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THE LIVED EXPERIENCES OF SIX STUDENTS WHO CHOOSE TO RE-ENTER A NURSING PROGRAM

Barbara Mary Morrison

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Abstract

In light of an impending nursing shortage, student retention is a priority concern for nurse educators. In this study, the lived experiences of six students of nursing who leave an undergraduate program and subsequently return are examined. A phenomenological, grounded theory approach reveals the following emergent themes: motivation, obstacles to success, support, and achieving success in the nursing program. Analysis of findings reveals numerous motivating forces that persist throughout the entire student experience. The tremendous impact of obstacles as well as support from various sources is also evident. Persistence, the use of effective time management, and the establishment of self-confidence emerge as essential components in the achievement of success in a nursing program. The significant roles of educational institutions and the nursing profession in student achievement and retention are clearly visible in this study. Recommendations for change within these facets of nursing education are presented.

Acknowledgements

Completing this thesis has truly been a challenge. I would like to sincerely thank and acknowledge the contributions made by Dr. Fiona Blaikie, my faculty advisor, to this endeavour. As I delved into the effects of student and faculty interactions upon student success in my study, I became extremely conscious of the positive impact of Dr. Blaikie's sincere words of encouragement and constructive feedback. I would also like to thank my committee member Dr. Hope Fennell as well as my internal and external examiners, Dr. Mary Clare Courtland and Dr. Dean Care for their valuable input.

The influence of support upon student success that is illustrated in my findings is also evident in my personal experience. Support was definitely one of the keys to my successful completion of this thesis. The support provided by my husband Ian and my daughters Andrea and Mariah proved to be the strength that carried me through this journey. They experienced with me the difficult as well as uplifting times and sacrificed much of our "together time" for the sake of this thesis. The additional support of my parents, family and friends further urged me on the path towards making this project a reality. Words cannot express my gratitude to each of these special individuals.

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CHAPTER ONE

PURPOSE

Statement of purpose

In light of an impending provincial and national nursing shortage, nurse educators must focus upon retention of all potential graduates. In this study, the experiences of students of nursing who leave an undergraduate nursing program and subsequently return are examined. In order to capture the true essence of these experiences, the methodology chosen involved qualitative interviews with six nursing students. This study may increase awareness and understanding based on the experiences of a group of nursing students who have not been investigated in the past.

Research question

What are the lived experiences of students who choose to re-enter a nursing program?

Rationale

Historically, retention of students has been a concern in nursing education (Munro, 1980; Weinstein, Brown & Wahlstrom, 1980; Smith, 1990; Campbell & Dickson, 1996). Nursing students, as well as the post-secondary institutions they attend, bear numerous costs related to attrition (Thurber, Hollingsworth, Brown & Whitaker, 1989; Smith 1990; Hutch, Leonard & Gutsch, 1992). Despite institutional efforts to improve student achievement, nursing students continue to leave post-secondary programs at various points in their education (Smith, 1990; Benda, 1991; Richardson, 1996; Sarkar, 1999). Some of these students choose to return later to programs and successfully graduate.

Student retention and attrition are rapidly becoming a serious concern in the field of nursing. At present, a shortage of nurses in Ontario is beginning to have a significant impact upon the health care system (Canadian Nurses Association, 1997; Sibbald, 1998). The future for the nursing profession is uncertain. The Canadian Nurses Association (1997) has predicted a severe shortage of nurses by the year 2011.

In response to this pending crisis, post secondary nursing programs in Canada face the challenge of graduating sufficient numbers of students. This examination of the unique journeys of students who leave and choose to re-enter nursing programs may offer new approaches and possible directions in retaining students and in improving achievement and success in nursing programs.

Personal background to the study

As a post secondary educator in a diploma-nursing program I have witnessed the costs of attrition at both the student and institutional levels. I have also had the opportunity to teach a number of students who left nursing, returned to complete the program, and successfully graduated at a later date. The experiences of these students are truly unique in that many students who leave programs often choose different paths or occupations. As I have watched these students proudly accept their diplomas on the day of graduation, I have reflected and realized that I have been aware of only a small portion of the journeys that they have undertaken. This examination of their experiences has provided me with greater insight and empathy towards them. An expanded understanding of the factors influencing achievement and success for these returning nursing students has also enhanced my effectiveness as a teacher.

Definition of terms

For the purposes of this thesis the following terms warrant definition:

Diploma nursing program: A three year college nursing program that prepares students to practise as Registered Nurses.

Registered Nurse (RN): The distinction given to a graduate of a college diploma or university degree nursing program who has successfully passed the required Canadian College of Nurses licensure exam.

Re-entry: The return to a diploma nursing program following a period of absence from nursing education.

Registered Practical Nurse (RPN): The distinction given to a graduate of a college certificate practical nursing program (normally of a two year duration) who has successfully passed the required Canadian College of Nursing Licensure exam. This term is synonymous with "Registered Nursing Assistant" (RNA).

Stop-out: The interval between a student's initial college nursing experience and their subsequent return.

Overview of thesis

In chapter one I describe the purpose and rationale for this study as well as my personal background and interest in pursuing a study of the lived experiences of students who choose to re-enter nursing programs. In the second chapter I present a review of literature wherein I explore the experiences of students who withdraw and return to programs during the phases of pre-admission, institutional experiences and return. In chapter three I introduce the phenomenological approach and outline the methodology incorporated in this study. A summary of individual subject findings, with a combined

synthesis of data and emergent themes is presented in chapter four. In chapter five I present personal reflections and conclusions including recommendations for educational institutions, the nursing profession and further research.

CHAPTER TWO

LITERATURE REVIEW

The literature review has been structured to reflect the longitudinal process of the experience of a student who leaves and returns to a nursing program. The stages of: pre-admission; institutional experiences (including participation and departure); and return are explored.

Pre-admission

A student's experience begins at the moment a field of study becomes a consideration. Each student brings with him/her a combination of meshed characteristics that impact upon his/her entire educational experience. Academic as well as non-academic characteristics set the stage for the pre-admission experience.

Non-academic characteristics

Research regarding non-academic characteristics including motivation, self-efficacy, personal expectations and commitment, perceptions, personality type, socioeconomic status, age, gender, ethnicity, and family background will be examined.

Motivation.

Why do students choose nursing? What is the source of motivation for students choosing nursing as a career? The decision to enter an educational institution is a complex matter that has been investigated through the use of many approaches. Maslow (1970) suggests that motivation arises from a hierarchy of needs. Physiological needs including safety and security form the base of the hierarchy which progresses to higher needs of social affiliation, self-esteem and self-actualization. An individual's motivation

to choose a career may vary in accordance with his/her position in the hierarchy and may be viewed as a consequence of his/her effort to accomplish specific needs.

Boshier's (1973, 1977) Congruency Model for Participation in Adult Education provides a different view of motivation. Boshier compares "life chance" (deficiency) oriented individuals to "life space" (growth) oriented individuals. "Life chance" oriented individuals, commonly of low socioeconomic status, are motivated by the need to eliminate a deficiency. Motivation in this case is viewed as a coping strategy. "Life space" oriented individuals, commonly of higher socioeconomic status, are motivated by higher level goals such as self actualization. Boshier (1973) suggests that congruence of an individual's view of him/herself, others, and the educational environment predicts the level of participation in education.

Studies examining students who choose to pursue nursing as a career suggest multiple sources of motivation. Historically the desire to provide caring and nurturing has persisted as the strongest motivator for individuals choosing nursing (Kersten, Bakewell & Meyer, 1991; Stevens & Walker, 1993; Magnussen, 1998; Hodgman, 1999). This motivation to provide service to others reflects a course towards meeting the higher level needs within Maslow's hierarchy and may correspond to Boshier's "life space" orientation.

Other work by Magnussen (1998), and Kersten, Bakewell, and Myer (1991) identifies additional motivational factors including perceived personal and family benefits such as emotional needs, employment opportunities and financial benefits.

The emotional needs identified in these studies can be seen to correspond with Boshier's "life space" orientation as well as Maslow's higher level needs. Employment

opportunities and financial benefits correspond to "life chance" motivation and basic human needs.

Self-efficacy.

The decision to choose a specific educational path also may be influenced by an individual's perception of self-efficacy in the field involved. Bandura's Social Learning Theory (1977) presents self-efficacy as a link between cognitive preparation and task performance. Bandura (1986) defines perceived self-efficacy as "a judgement of one's capability to accomplish a certain level of performance" (p. 391). This model suggests that individuals with low self-efficacy tend to avoid situations and tasks which they perceive are beyond their abilities. Those with high self-efficacy are more likely to undertake, persist and succeed (Bandura, 1986). The work of Kersten, Bakewell and Meyer (1991) identifies self-efficacy expectation indicators among students choosing nursing as a career. Students in the study describe their past experiences of caring and nurturing others as well as their aptitude for science as positive indicators of their success. Past educational success can be viewed as another positive self-efficacy indicator. Aber and Arathuzik's (1996) study of factors associated with student success suggests that past positive educational experiences provide a sense of competency that is transferable to nursing coursework.

An accurate appraisal of one's self-efficacy in regard to career choice leads to success, conversely an inaccurate appraisal may not (Bandura, 1986). Jeffreys' (1998) study of achievement and retention among nontraditional nursing students identifies "supremely efficacious individuals who overestimated their academic supports and

underestimated their need for preparation" (p. 47). These students are considered to be at risk for non-completion of their programs (Jeffreys, 1998).

Personal aspirations and commitments.

Munro's (1981) nation-wide longitudinal study of dropouts from higher education in the United States identifies educational aspirations and commitment of both students and their parents as the most powerful predictors of attainment of the educational goal to which the student was committed. These findings are consistent with Tinto's (1975) and Pascarella and Chapman's (1983) findings which suggest that personal aspirations and commitment act as the link between a student's pre admission characteristics and their institutional experience.

Perceptions.

The work of Knowles (1990) in regard to the effect of perception on learning warrants inclusion in the examination of student experiences. Knowles (1990) claims that learning involves a dynamic exchange between stimuli, responses and the learner. He states that an "individual's perception of the stimulus is the key factor in determining the response" (p. 148). This view suggests that the manner in which a student perceives stimuli within the post secondary experience will determine the learning response that takes place. Harvey and McMurray (1997) claim that attrition is related to a discrepancy between the perceptions of nursing students and their academic experience. Their findings suggest that a great percentage of students leaving nursing view nursing content as being incongruent with their expectations. The major area of discrepancy in this study involves student misconceptions regarding the scientific bases of nursing knowledge (Harvey & McMurray, 1997). The work of Smith (1990), Jeffreys (1998), and

Richardson (1996) reveals similar relationships between students' inaccurate perceptions of the personal and financial costs of nursing education and attrition. Benda (1991) explored the significance of timing related to choice of nursing as a career. Students who chose nursing as a career at the time of ACT assessment (early in their final year of high school) were more likely to leave nursing programs than those who chose it at a later time. Thus, Benda's findings suggest that high school students do not have realistic perceptions regarding the requirements for nursing education (Benda, 1991). The findings of the study by Blasdell and Hudgins-Brewer (1999) may reveal one potential source of these unrealistic expectations. Blasdell and Hudgins-Brewer (1999) examined high school counselor's perceptions of the academic and personality attributes important for a career in nursing. Counselors identified traits of compassion, kindness, sincerity, altruism and concern for others as the most important characteristics for nursing. Interestingly, these counselors did not rate leadership attributes and decision-making ability as important attributes.

Personality Type.

An examination of non-academic considerations has revealed studies related to investigation of personality types in nursing education. Munro's (1981) examination of pre-college characteristics finds that student self-confidence and self-esteem is a stronger predictor of success than locus of control. Uhl et al. (1981) also studied the relationship between personality type and attrition using the Myers Briggs Type Indicatory. Results reveal that the majority of nursing students are "Feeling Types". Findings also suggest that a lack of congruence with the predominant personality type in a major is more of a reliable predictor of change of major than of dropout (Uhl et al., 1981).

Huch, Leonard, and Gutsch (1992) sought to develop an equation that could be used to predict retention in nursing. Their study involved the use of the "Sixteen Personality Factor Questionnaire" originally utilized to profile drug users (Huch, Leonard & Gutsch, 1992). Findings indicate that students who successfully graduated from nursing are characterized as being happy-go-lucky, enthusiastic, impulsive and lively, tough-minded, self-reliant and realistic.

Socioeconomic status.

The influence of socioeconomic status on students entering post secondary education is also explored in the literature. Astin and Panus (1968), Astin (1985), Porter (1989), and Benda (1991) identify a direct relationship between socioeconomic status and student persistence. Munro (1980) finds high socioeconomic status to indirectly affect persistence in higher education, but not specifically on persistence in nursing. In Farahani's (1993) study of non-returning students at a community college, respondents cite job demands as a major reason for not returning. Financial reasons and conflicting job hours are among factors identified in other studies (Lucas, 1981; Smith, 1990; Stolars, 1991). Job pressures also have a significant impact upon students in Flaherty and Lucas' (1989) examination of students who left and subsequently returned to a community college. The importance of job pressures in this case however, seems to fluctuate with the economic conditions within the state (Flaherty & Lucas, 1989).

Age.

Findings are inconclusive in regard to the effect of age on success in post secondary programs. Pascarella and Chapman (1983) fail to note a significant association between age and student success in both two and four year colleges. In contrast, Froman and

Owen (1989) find maturity to be a predictor of higher GPAs in nursing theory courses as well as better performance on licensure exams. A British study regarding entry age of nursing students by Houltram (1996) indicates that performance of most mature students is better than the performance of younger students. Dirx and Jha (1994) investigated completion and attrition in adult basic education. In contrast to Houltram's findings, they conclude that younger students are just as apt as mature students to complete programs (Dirx & Jha, 1994).

Gender.

The literature does not support a definite relationship between gender and student achievement. Collins and McMaster's (1980) study of non-returning students finds gender ratios of non-returning students to resemble those of returning students. Munro (1981) concludes that the effect of gender on persistence in higher education is mainly indirect and transmitted through many intervening variables. Campbell and Dickson's (1996) meta-analysis of research related to prediction of retention, graduation and national exam success of nursing students identifies a tendency of nursing studies to fail to report gender representation of subjects. Studies that do so however are unable to identify gender as a significant variable in predicting student success (Campbell & Dickson, 1996).

Ethnicity.

Student ethnicity is identified in some research as impacting significantly upon educational experiences. Panos and Astin's (1968) findings reveal that non-white students are less likely to succeed in post secondary education. Similar findings are obtained in later studies (Astin, 1975; Campbell & Davis, 1996). A current Canadian

study by Jalili-Grenier and Chase (1997) also notes higher attrition rates for English as-a
—second-language students in nursing. Munro (1981) does not support these findings in
her research. She notes a minimal effect of ethnicity on persistence in nursing education
yet also identifies a substantial effect of ethnicity on persistence in higher education after
leaving nursing. The research of Allen, Nunley and Scott-Warner (1988) demonstrates
the compounding effect of ethnicity and other student characteristics. Black minority
students in this study identified the following barriers to retention: inadequate financial
aid, feelings of alienation and loneliness, failure to use available counseling and
inadequate secondary school preparation. Jordon's (1996) qualitative study examining the
lived experiences of African American students concludes that "being black in a
predominantly white educational setting parallels being black in society as a whole"
(p. 389). The centermost theme in Jorden's study involves student difficulties related to
residing in an unfamiliar white culture. Jorden (1996) proposes that blacks may be
leaving predominantly white nursing programs because the climate within the educational
setting is not conducive to their learning.

Family environment.

The effect of family environment upon the student experience is not well explored
in the literature. Stolar's (1991) study of nontraditional students (aged 25-55) at an
American county college identifies parenthood as one of the most frequently noted
reasons for not persisting in school. Students who left the college also suggested that a
campus day care center would help with childcare responsibilities (Stolar, 1991). Guided
by Bean and Metzner's (1985) work regarding nontraditional undergraduate students,
Jeffreys (1998) identifies the importance of environmental variables on nontraditional

nursing students. Among environmental variables considered in this study, family crisis and responsibilities were most often cited by students as severely or moderately restricting their academic achievement and retention (Jeffreys, 1998).

Academic characteristics

An extensive array of studies in post-secondary education has sought to explain the relationship between academic pre-admission attributes of students and subsequent successful performance in college. Early work by Pancos and Astin (1968) suggests students most likely to complete college are those who have good grades in high school. These results have recurred in subsequent studies. Prior academic success and high school grades are identified most widely as strong predictors of academic performance in nursing programs (Weinstein, Brown & Wahlstrom, 1980; Hayes, 1981; Munro, 1981; Wold & Worth, 1990; Benda, 1991; Brennan, Best & Small, 1996). These findings are consistent with Higg's (1984) conclusions in the application of her Model for the Study of Prediction of Success in Nursing Education and Nursing Practice.

Despite a general acceptance of grades as academic indicators, Higgs (1984) identifies methodological problems related to studies of this sort. Lack of comparability of grades between high schools results in difficulties when attempting to generalize results (Higgs, 1984). This discrepancy may account for findings in a study in the United Kingdom by Houltram (1996) who was unable to provide convincing evidence that entry scores were predictive of successful outcomes. These studies are also limited to generalization by differences in admission criteria, and student populations in the institutions studied.

Achievement measures such as standardized aptitude tests are identified as reliable academic predictors in some studies. A meta-analysis of research predicting student success between 1980 to 1990 by Campbell and Dickson (1996) found that S.A.T. (Scholastic Aptitude Test) scores were most often studied as predictor variables for student success. A.C.T. (American College Test) scores were found to most often predict success in national nursing examinations. Kissinger and Munjas (1982) employed other tests to predict student success. Scores on the Watkin's Group Embedded Figures Test, Range Vocabulary Test, and Inference Test were used in combination as predictors (Kissinger & Munjas, 1982). Wold and Worth's 1990 replication of this study finds SAT scores to be strong predictors of success however provides no support for the strength of the other tests used.

Numerous studies have focused specifically upon the type of courses completed prior to admission to nursing. A Canadian study of 1,169 nursing students by Weinstein, Brown and Wahlstrom (1980) examined student performance related to specific course work in high school. They identify a correlation between science, math and English grades in high school and performance in nursing. A later study by Brennan, Best and Small (1996) lends further support to these findings.

Institutional Experiences

The institutional experiences of students in post secondary education have been studied from numerous perspectives. Considerable research during the last two decades has focused upon Tinto's (1975) Student Integration Theory. Tinto (1975) incorporates Durkhiem's Social Integration Theory of Suicide as well as cost-benefit analysis to explain the complex longitudinal processes that compel students to persist or depart from

post secondary institutions. Durkheim's Integration Theory proposes that insufficient integration into society increases the likelihood of suicide (Tinto, 1975). Tinto, in viewing college as a social system, treats dropout form college social systems as analogous to suicide in larger society. Tinto's model also recognizes the effect of the pre-admission characteristics (including individual motivation and goals previously discussed) upon how students become integrated into the academic and social domains within institutions (Tinto, 1975). He suggests that individuals may be able to integrate into one domain (social or academic) without doing so in the other. This would account for withdrawal from college as arising out of voluntary withdrawal (suicide) or forced withdrawal (dismissal) (Tinto, 1975).

Munro's (1981) path analysis testing Tinto's model finds that factors related to student integration in the college's academic setting are more influential in regard to drop out decisions than are factors related to the social setting. Pascarella and Chapman (1983) in their multi institutional investigation of the validity of Tinto's model claim that social integration plays a stronger role in influencing persistence at four year primarily residential institutions, while academic integration is more important at two and four year primarily commuter institutions. In their qualitative study, Christie and Dinham (1990) find Tinto's model useful in helping to understand pressures that led to student attrition. They conclude that the experiences of living on campus and participating in extracurricular activities appear to enhance students' social integration and persistence in college. The external experiences of interacting with non-institutional friends and family, however, appear to have an adverse effect (Christie & Dinham, 1990). Ashar and Skenes' (1993) application of Tinto's model to adult learners reveals that classes which

are socially integrated and smaller are better able to retain their students than less socially integrated and larger sized classes. A recent study by Liu and Liu (1999) applied Tinto's model to 14,476 students at a commuter campus. Their findings suggest a need for social and academic integration. However, Liu and Liu note that student and faculty relationships are often crucial to student retention (Liu & Liu, 1999).

Pascarella (1985) has expanded upon Tinto's model by including explicit consideration of institutional structural characteristics as well as environmental factors. Living on or off campus, satisfaction with college facilities and services, enrollment as full verses part time, and student/faculty ratio are included as active forces which impact upon the student experience (Pascarella & Terenzini, 1991).

Tinto's model has also been used as a basis for research in nursing education (Benda, 1991; Liegler, 1997). Benda's (1991) study of 236 degree nursing students identifies a significant difference in retained and departed freshmen in regard to Tinto's pre entry, academic, social/institutional and commitment variables. Liengler's (1997) study of senior nursing student satisfaction reveals that a student's integration into the academic and social systems of their nursing programs accounts for a 42% variance in predicting satisfaction. Janes' (1997) qualitative study of African American nurses' perceptions of their baccalaureate nursing school experiences examined findings in relation to Tinto's model. Findings corroborate Tinto's theory with respect to the influences of individual commitment and institutional experiences (Janes, 1997).

Astin's (1985) extensive work regarding institutional experiences of students presents student satisfaction as the key outcome and one of the most direct influences upon success in college. Astin's (1985) Theory of Student Involvement (based on a

study of 200,000 students in 1977) suggests that "the greater the student's involvement in college, the greater the learning and personal development" (p. 157). The impact of academic and social factors such as positive student/ faculty interactions, honours program participation, residing on campus, participation in student government, and moderate involvement in athletics and academic areas are found to increase student persistence and satisfaction in college (Astin, 1975).

Both Tinto's (1975) and Astin's(1985) models support the notion that quality student/faculty interactions have a positive effect upon student attrition. The works of Pascarella and Terenzini (1978), Pascarella (1980), Thurber, Hollingsworth, Brown and Whitaker (1989), Sherrod, Harrison, Lowey, Wood, Edwards, Gaskins and Buttram (1992), Campbell and Davis (1996), Liegler (1997) and Liu and Liu (1999) also support these findings. DiGregoio's (1996) qualitative study of student and faculty interactions provides additional support. Students studied explained that out-of-class interactions with faculty augmented their learning as well as enhanced their commitment to their academic work.

Special programs developed for students to improve involvement in the academics have been found to positively impact upon student persistence. Kulik, Kulik and Swalb's (1983) meta-analysis of findings from sixty evaluation studies reveals that special college programs for high-risk students have positive effects on students. Evaluations of student assistance programs in nursing continue to demonstrate their positive effects (Burdick, 1996; Hesser, Pond, Lewis & Abbott, 1996; Lockie & Burke, 1999).

Returning

An inconsistency noted among many studies of the student experience involves the ambiguous definition of dropouts within and between studies. There is little acknowledgement of a distinct group of students who appear to be camouflaged within the groups identified as dropouts, that is, students who withdraw on a temporary basis and subsequently return. An early study by Eckland (1964) questions the reliability of attrition studies. Eckland suggests that studies fail to make adequate allowance for both the prolonged nature of most academic experiences and the dropouts who return (Eckland, 1964). 70.2 % of dropouts in Eckland's (1964) study came back to college some time during the ten years after matriculation. 54.9% of these students went on to graduate (Eckland, 1964). Other studies reflect similar student intentions to return. Collins and McMaster's (1980) study of returning and non-returning students revealed that more than one half of the respondents (55%) who "dropped out" had definite intentions to return to college in the future. McCoy's (1988) telephone survey of students who did not return to a community college noted that 85% of non-returning students indicated that they also planned to return in the future. In addition, a survey of non-returning nursing students by Smith (1990) demonstrated similar findings. 55% of respondents expressed a desire to continue their studies at a later date.

Some studies in this area have examined the length of attendance before leaving college and the length of absence of those who returned. Eckland (1964) found that chances of returning for dropout students increased with the amount of time spent in college before leaving. Eckland (1964) also discovered that dropouts who were out of college four or more years had a similar graduation rate to those who were absent for

shorter periods. Of the 1,208 non-returning students surveyed by Lee (1990), 36% indicated that they planned to return in the coming year or sometime. Horn's (1991) investigation of students who return to college (stop outs) and those who do not return (stay outs) revealed that 64% of students who left four year programs returned within five years, while one half of students from two year programs did the same. Ronco (1994) also investigated the influence of time upon these students. This study of student stop out found that students who left the University of Texas "were more likely to return after only one or two terms out. Once they had been gone for six terms, the odds of returning were virtually nil" (Ronco, 1994). These studies suggest that institutions interested in graduating students from their programs should not ignore this distinct group of students who leave and choose to return in the future – the stop outs.

Little work has been done in regard to developing an image of this group of students let alone obtaining insight into their experiences. Pardee's (1992) study of 396 students, who had previously dropped out of college and then returned, identifies the typical returning student as a white female between twenty-eight and thirty-two. "Desire to learn" was the most important motivation to return to college for the majority of both men and women (Pardee, 1992). Other important influences upon return that were noted in the study involved improved earning potential, improved emotional outlook, and dissatisfaction with job (Pardee, 1992). Flaherty and Lucas's (1989) study found that 80% of students who stopped out were employed full time after leaving college. These findings imply financial influences upon decisions to stop out. Ethnicity was found to influence return to an institution after a stop out period in Ronco's (1994) research.

Hispanic students were 1.7 times more likely to return than White-non-Hispanic students (Ronco, 1994).

Some postsecondary institutions have acknowledged the need to attract dropouts back to their programs. Contacts of college dropouts through direct mail and telephone in Stetson's (1984) study however did not result in a significant effect on return of these students. A similar effort undertaken by the Los Angeles Unified School District (1985) found 20 % of dropouts responded positively to a personal written invitation to return to school.

This literature review has not been successful in locating any studies that specifically examine students who leave and return to nursing programs. In light of the impending nursing shortage, postsecondary institutions cannot disregard these students who stop out. Are they a group that should be included with others in the category of dropouts? Do current models of student experience including pre-admission characteristics and institutional experiences apply to these individuals? There are many questions that warrant answering. Qualitative investigation will expose a more focused image of the lived experiences of these students. This study examines what it means to be a nursing student who leaves and subsequently returns to a nursing program.

CHAPTER THREE

METHODOLOGY

Introduction

Using a qualitative approach, I engaged in focused conversations with six nursing students returning to a diploma-nursing program at a community college. As I am interested in revealing the meaning and essence of the journeys of students who re-enter nursing programs, I chose the phenomenological method to address the research question. van Manen (1990) describes the aim of phenomenology as the ability to "transform lived experience into a textual expression of its essence" (p. 36). He also states that in the phenomenological process, "the structure of a lived experience is revealed to us in such a fashion that we are now able to grasp the nature and significance of this experience in a hitherto unseen way" (van Manen, 1990, p. 39). Conversation was used as the primary mode of data collection "because of its richness and because it is a friendly and natural form of intercourse which allows for an easy exchange of experiences" (Carson, 1986, p. 81).

Following van Manen's (1990) approach, conversations were open ended and loosely structured around the main research question: **What are the lived experiences of students who choose to re-enter a nursing program?** Under the direction of the main research question, the following topics were addressed:

1.) Describe your experience when you first came into the nursing program. What feelings did you have at that time?

2.) Describe your experience during the time that you left the nursing program. What feelings did you have during that time?

3.) Describe your experience during the time that you chose to return to the nursing program. What feelings did you have when you returned?

4.) Describe your current experience. How do you feel now?

Subjects were encouraged to recall their journeys and were given latitude to "shape the content of the interview" (Bogdan & Biklen, 1982, p. 97) with minimal direction by the researcher. The conversations were audio taped and transcribed to allow for further analysis. Subjects were given the opportunity to read the transcript of the first conversation prior to a second conversation. At this time, subjects had the opportunity to add to, delete, adapt or modify data within the transcript. During the second conversations the questions became more focused as the researcher sought to verify and clarify data collected. The second conversations were also audio taped and transcribed.

Subject selection

Selection of subjects occurred when I had concluded working with them in a teaching and supervisory capacity. A brief description of the study was announced to the class in the final year of the program. Students who left the nursing program and re-entered at a later date were asked to volunteer to participate in the study. Although it was my initial intent to include only five subjects, six voiced their interest in participating in the study. Subsequently, I chose to include all of those who volunteered. As well, it was also my intent to reflect the gender ratio of the student nurse population within the class by selecting subjects representing the ratio. The ratio of 1 male: 4 females was somewhat represented by the sample as one of the six subjects who volunteered is a male student.

Ethics

The subjects were given the opportunity to choose pseudonyms and remained .
anonymous throughout the study. Institutional approval was obtained from Lakehead
University and the institution where the subjects are studying. Subjects who volunteered
to participate in the study received a covering letter describing the study in detail and
were required to sign a consent form that described benefits, risks, anonymity and data
storage (see Appendix II, III). All conversations were held in a private location that was
acceptable to both the subject and myself. All but one of the audio taped conversations
took place in a small private office in the college at which the subjects were studying. In
compliance with one subject's preference, the remaining conversation took place in the
privacy of her residence. There were no physical risks for subjects who choose to
participate in the study. Although the recollection of past experiences exposed a range of
emotions, reflection on the part of subjects was found to encourage personal growth and
understanding (van Manen, 1990). Although the need did not arise, debriefing was
available to subjects by the college counselling service.

Subjects were given the opportunity to validate my interpretation of findings prior
to and during the second conversation. A summary of findings is available for subjects to
read if they request this. A contact number was provided to subjects in the introductory
letter. For a period of seven years, the thesis supervisor Dr. Fiona Blaikie will retain all
raw data including tapes and transcripts.

Data analysis

As data were analyzed, I sought to uncover the meaning that emerged through
language in the conversations (Carson, 1986) and to generate theory grounded in the

realities of the experiences of the subjects (Glaser, 1978, 1967). Data obtained from both

sets of subject conversations was transcribed. The examination of transcripts for

emergent themes was chosen as the most appropriate approach for data analysis as it

served to direct me towards the meaning of the experiences of nursing students who re-

enter nursing programs (Baritt, Bechman, Blecker, & Mulderij, 1984; van Manen, 1990).

In accordance with van Manen's approach to phenomenological research (1990), a

thematic analysis of each of the conversations was conducted. Reoccurring, unique

themes that gave insight into the multiple realities of each individual subject were

identified and drawn out of the conversations using a word processing computer program.

Individual subject stories were then summarized in accordance with these themes (see

Findings part one). These initial findings guided me into a global examination of visible

patterns and common themes within all subject conversations (Baritt, Bechman, Blecker

& Mulderij, 1984; van Manen, 1990). Findings grounded in the conversations with all of

the subjects were then summarized and integrated with a re-examination of the literature

(see Findings part two). Use of this inductive approach to analysis allowed findings to

emerge naturally from the data obtained (van Manen, 1990).

CHAPTER FOUR

FINDINGS

Findings part one: Subjects' individual experiences

Introduction

The first part of this chapter outlines the journeys of six nursing students who chose to re-enter a nursing program in order to obtain their diploma in nursing. Conversations with the subjects revolved around the main research question: What is the lived experience of a student who chooses to re-enter a nursing program? In order to illustrate their true lived experiences, a description of each of the subjects as well as an overview of the data clusters and themes that emerged from each set of conversations has been included.

Robin's story

This segment outlines Robin's experience as a mature, male student who entered the college nursing program and left after successfully obtaining his Registered Practical Nursing (RPN) certificate. After working for six years Robin returned to the college to complete his diploma in nursing. Robin appeared contemplative and focused as we engaged in the conversations. He required minimal prompting as he reflected upon his experience in a soft tone and serious manner. Using the phenomenological approach, data from both conversations with Robin were examined and grouped into three thematic clusters: motivation to be a nurse, influences of past experiences, and the experience of being a student nurse. Within these clusters recurrent themes emerged (see Table 1). These themes will be presented and explored.

Table 1. Data clusters and isolated themes - Robin

Data Clusters	Isolated Themes
Motivation to be a nurse	Financial security
	Opening doors
	Importance of patient contact
The influences of past experiences	Being a mature student
	Returning as a Registered Practical Nurse
Returning to nursing	Encountered stressors
	Coping in the nursing program
	Sources of support
	Self-confidence
	Being a tutor

Motivation to be a nurse.

Why does one choose to enter the field of nursing? Examination of this cluster of data revealed three distinct themes, need for financial security, the opening of doors and the importance of patient contact.

<u>Financial security</u>

Robin's motivation to enter and continue in nursing stemmed primarily from financial and job security needs. Prior to entering the RPN program, Robin was hired in a temporary position as a hospital attendant "As soon as I got hired they told me...this is only going to be a six month thing." Knowing that there would be positions available to him if he obtained further education, Robin enrolled in the RPN program.

> "I knew I wouldn't be able to hang onto that job. I was probably the second last attendant to be hired… so you've got to get a job…then they tell me there is an RPN program at the college, so I said, "Well, alright.""

Choosing to become an RPN appeared to be a logical choice for Robin.

Later in his life Robin was faced with another threat to this financial security. It became known that the institution at which he had worked for six years as an RPN was to be closed in the near future. Robin, for the second time, chose to return to school and this time obtain his nursing diploma. "I came back again this time because the HL is closing…its another financial move." Robin conveyed a strong sense of wanting to establish job security for himself in the future. He described his plans for continuing his education by taking an operating room course.

> "So just in case…if I can't get a job anywhere…I'll have at least two things that I can draw on… I know psychology pretty good. And the OR… I know a little bit about that… hopefully after I take the course I'll learn a bit more."

Opening doors

Finances and job security were not the only motivating forces for Robin's re-entry into nursing. Although Robin could have looked for other work as an RPN, he had reached a point in his life where he wanted more. Robin viewed completion of the diploma nursing program as another stepping stone in his own personal growth. "You can only go so far as an RPN. You can't really progress as far as I'd like to go… It's going to open up some doors for me. I'm going to be able to move on…"

Importance of patient contact

Robin treasured the close relationships that he was able to establish as a hospital attendant and RPN.

> "You're lifting patients. You're moving patients. You get to talk to them all day. Find out their story. Where they're from, what they're at, what they're doing you

know? I meet some of the most interesting people in the world...everybody has a little story no matter what, no matter who you are... I've always liked that."

While working in the psychiatric field, Robin had the opportunity to spend a lot of quality time with his patients.

> " So you tend to talk to somebody when you're staring them in the face for twelve hours! It doesn't matter if they're delusional or anything...I still sit there and talk to them...I've had patients tell me that I look like a bird ... "You remind me of this mud puddle I've seen outside...it's very soft...and they'll pat my head or whatever...""

As Robin re-entered and progressed through the diploma nursing program an unexpected personal conflict began to surface. While Robin gained more insight into the actual role and responsibilities of a Registered Nurse (RN), he came to realize that he might lose the opportunity to establish the close relationships he valued with his patients. "In my heart I feel that I made a mistake...I made a grave error in judgment..." Robin sees the increased responsibility and the time pressures on registered nurses as contributing factors.

> "You're very busy and you're always crunched for time... it seems that time is your biggest enemy.... And that's what I miss... a lot of times, as an RPN, I would take a problem patient and put them in a side room and I'd sit at the door...and I sit there and all I get told to do by the RN is to make sure that they don't hurt themselves, make sure they don't leave... so you're sitting there at the door with the patient and you have a lot of time to talk to them. And I miss that... a lot."

Robin's decision to take an operating room course upon completion of the diploma program also appears to conflict with his personal desire to maintain patient relationships. He described his contact with patients when in the OR ...

> "Because you're not really a person...when I look at you.. You're a chole... that's a bowel obstruction...you're not a person anymore. I'm going to miss that close interaction with some of the most different people you've ever seen. And that scares me a little bit. Especially if I go to the OR."

The importance of obtaining job security as an RN overrode Robin's personal needs at the time of the conversations.

> "I have mixed feelings about it.... In my mind I say, "Yeah it's a good thing, look at all of the things you can do now"... but in my heart I say to myself... " Ah jeez...you're just a regular guy"... I have a whole agenda of things... in order to obtain a full time job...I was happy being an RPN, I liked my job, I liked talking to the patients, I liked doing different things with them. Were as now as an RN I can see that I'm not going to have the time to do that."

Robin hopes that this conflict can be resolved by obtaining a job that will best meet both of these needs. "In my head I knew it was a good thing... I hope I can find a job that... I will still be able to talk to people as I did before."

The influences of past experiences.

The influences of Robin's past life experiences impacted upon his journey though the nursing program. Examination of this cluster reveals two major themes: being a mature student and returning as a Registered Practical Nurse.

<u>Being a Mature student</u>

As a mature student it was necessary for Robin to make modifications in his established lifestyle to accommodate his decision to re-enter nursing.

> "I'm a little bit older and oh boy...back in school at my age...it had to do with a lot of things because... the money's not there...your friends are all out buying toys and stuff like that...new ski-doos, boats, whatever...and you don't because you're in school."

Because he had been out of school for a while, Robin felt it was necessary to prepare himself adequately for his return. He began by taking some of the required courses in advance. This action allowed Robin to focus primarily on the nursing courses when he re-entered the program and allowed him to continue to work and support himself.

Robin's maturity was adventitious to him when he was faced with communicating with others in the practice setting. He expressed his comfort when working with physicians. ""I don't know if it's because I'm a little bit older or why. I just look at her and say, "I don't know."...and I talk to the psychiatrists at work...just the same way as I talk to everyone else.""

Returning as a Registered Practical Nurse

Robin described the effects of being an RPN upon his experience in the diploma nursing program. When recalling his experience as an RPN student, Robin remembered being anxious. "I was pretty nervous...but then when I took the RN program...I've worked in it for a while...it really helped." The practical experience Robin obtained while working in the field after graduating from the RPN program served to increase his sense of comfort and confidence in the practice settings of the diploma program. "... My past experience has helped me out because I'm used to being on the floor. I've got used to running around doing stuff."

The organizational and study habits that Robin developed in the RPN program proved to be an asset to him.

> "That's something I learned from the RPN program. And moved it on to the RN program. Don't work harder, just think smarter. Think about what you're doing before you go ahead and do it. Because maybe there's a better way of doing it." "I sort of had guidelines that I developed in the RNA program and I carried those over into the RN program. It really helped me out a lot..."

As an RPN Robin had the opportunity to see and care for individuals with various conditions. Robin found this experience to be advantageous when he began studying these conditions in the diploma program.

> "All the different types of schizophrenia, and bipolar...that came relatively easy for me because I could associate it with people I had met...it stays with you...and

I'm working with it...it's just adding so I know all the medications and stuff like that."

Robin attributed his past experience as helping him make connections between theory and application of knowledge.

"I could see where things were going...the pathophysiology and the nursing theory kind of entwine... you incorporate everything you've learned and you pull it together...it's like a big melting pot."

Robin became comfortable working in the capacity of an RPN for six years prior to returning to college to complete his diploma. The initial transition to the role of a diploma nursing student required an unanticipated adjustment.

"I kind of had a little problem because I'd wait for instructions sometimes... I was used to being the RNA role where the RN is going to tell you what to do for the day.... They'll plan your day, sort of, for you...and you work together. Where as in the RN role, you're kind of taking the leadership opportunity...you're the one who is trying to plan the day...get the ball moving type of thing."

Returning to nursing.

Conversations with Robin revealed a wealth of information regarding the experience of being a returning nursing student. Five major themes emerged from within this data cluster: encountered stressors, coping in the nursing program, sources of support, self-confidence, and being a nursing student.

<center>Encountered Stressors</center>

As Robin described stressors that he encountered during his experience, two sources of stress became evident: stressors external to the nursing program including financial and personal concerns as well as stressors originating from within the nursing program including assignments, tests, comprehensive exams, and clinical practice.

Because he was financially supporting himself on his return to the nursing program, Robin was faced with the need to maintain an adequate income for himself during this

period. As a result, Robin chose to continue working full time as an RPN... "I've got nobody helping me out or anything like that. So it was difficult." Robin faced working thirty-six to forty hours a week as an RPN in addition to clinical practice that was required in the program. Robin frequently worked double shifts during this period. During Robin's final semester he worked on a unit in the hospital as an RPN and was also doing a rotation in the operating room as a student. "I'm lucky because I work on 44 at the hospital and I can slide down after my shift in the OR." Robin recalled some weeks during which he worked a total of up to eighty hours including work and nursing program hours.

Personal difficulties with his wife, which eventually led to a divorce during Robin's final year in the program, were another source of stress. Robin chose not to share his personal matters with others in the class "I doubt if anyone even knew I was getting a divorce."

Robin described the workload involved with the nursing program as stressful. "There are a lot of triggers associated with this program. Anytime you go in for a test of something like that... everyone is stressed...You can see it..." Robin encountered a continuous high level of stress throughout the program. "... And all the projects and everything... you've got to be able to take stress over a long period of time." A critical point in Robin's experience took place during the week before the comprehensive end of program exams – the pre-RNs. "There is such a mystique around the pre-RNs that they're a killer." It was during this time that Robin felt the cumulative impact of both external and internal stressors. At the same time that he was trying to focus on studying

for the exams his divorce proceedings were initiated. "School is one big stress but if you had other things as well...I slipped down to a B this year in theory."

The clinical experience associated with the nursing program also proved to be a source of stress for Robin. Robin recalled the stress involved with taking responsibility for providing care for a full load of patients.

> "I had four to five patients and you've got to be able to take six and up from there. And on evenings you take even more and on nights even more... So its' time...finding the time. So much to do but you don't have the time. You always look around to find ways you can do things faster."

Robin also faced additional stress when doing a clinical placement in the operating room during his final semester. Adapting to a totally new environment with different equipment and terminology was a challenge. As Robin reached the end of the experience however he became more comfortable and even chose to continue his education in that specialized field of nursing.

Robin described the final semester of the nursing program as being less stressful than those preceding it. He recounted a sense of relief after writing the pre-RNs in the fifth semester. " A lot of stress is gone because I know I don't have to study every minute, I don't have big major projects that are done anymore...I have clinical and I have work and that's it."

<div align="center">Coping in the nursing program</div>

Despite facing numerous stressors, Robin was able to remain focused upon his goal of completing the diploma nursing program. He recounts a phrase that a coworker once told him... "I used to work with an old guy... he was an attendant and that's what he'd say to me all the time, "No matter what happens in this place... everything's minor except death and losing a limb...just remember that!" ... He'd make me feel a lot

better." Incorporating this frame of thought into his lifestyle helped Robin when he was faced with his divorce in the fifth semester of the diploma program – (just prior to the comprehensive program exams).

> "I managed to stay focused... because I kind of pictured... it would all be lost and everything I'd worked so hard for in the last two and a half years would be lost... if I let my present personal situation govern my head...Listen, you've got to do this...and that's it!"

Staying focused on the nursing program required sacrifices. While enrolled in the diploma program Robin limited his social activities and primarily directed all of his time towards schoolwork and his job as an RPN.

> "Yeah. That's what you have to do. You can't sit back...go out to the bar...or attend social functions...because as soon as you do you make yourself slip behind. Fall behind...faster and faster...slide further down...and you're not going to be able to catch up."

Robin repeatedly stressed that organization was "the total key to this program." He explained how he was able to cope with the demands of the nursing program...

> "Stay organized. Put everything on a big poster...when you have things to be done put them on a big calendar...hang it on your wall...look at it every day. Remind yourself that - yes I have to do this project and it has to be done at this time. And do a little bit every night so its not such a big rush at the very end... you have to be prepared. Well in advance... if you study a little bit all the time, do a little bit on your project...it'll fly by."

Robin recognized the need to organize and structure his approach to studying.

> "Be more structured with what I was trying to do...set your goal...instead of getting all flustered and opening up my books and trying to learn everything. I'd break it off into little sections and try to learn little stuff. Then it managed to stay with me – I could understand it more. And then I'd put all of the little pieces together and you make the big puzzle and you can understand everything."

Robin continued to apply his organizational skills to work in the clinical practice setting. "If you're not organized on the floor, you're not going to get things done...if you're not organized you're going to sink."

In anticipation of the heavy workload he would face Robin chose to take some courses approximately one year prior to re-entering the nursing program. During the summer before Robin began the diploma program he enrolled in a six week "crash course" of pathophysiology. Robin describes this as a critical point in his journey as a returning student. "That is probably the big turning point in this RN program for me – taking that pathophysiology in the summer time…it's something that I'll probably remember for a long time… it was really difficult." Robin felt that taking this course in advance really gave him a foundation on which to build further knowledge. He expressed feelings of having an advantage over other classmates as a result.

<div align="center">

Sources of support

</div>

During the conversations with Robin it became evident that the support he received from others was instrumental in helping him through the nursing program. The majority of the support that Robin received was from coworkers and professionals that he worked with in the medical field. Colleagues that he worked with when he was a hospital attendant spurred him on to enroll in the RPN course. Robin described being overwhelmed when he first entered the RPN program and attributed some of his success to his colleagues' support. "A lot of people I worked with kind of helped me with my homework and stuff like that…" Robin continued to benefit from this type of support during the time that he was in the RN program. "Worked there and they helped me out too… so when you're in, it's kind of a little advantage because you can branch off and you can use different avenues and different people that you know to help you out." When faced with something that he didn't understand, Robin would reach out to these supports.

"I live across the street from H... I'll walk across the street... say for studying sometimes... I'll see one of the girls in Emerg. that I know and I'll plunk down one of my books and say, 'Heh I don't understand this... can you explain this to me?' 'Yeah, ok, I'll be with you in a few minutes'... That helps a lot."

Physicians that Robin worked with also supported his learning by quizzing him while he was working in the operating room. "Yeah and I'm standing here and he's asking me questions like, "What's the main artery that runs down the leg? And the questions will get harder... they all love that... it's almost like being on Jeopardy!""

Coworkers also helped Robin during the times that he would work double shifts. "I've been there since ninety four. They cover for me if I'm fifteen minutes late."

Robin described support that he received from teachers in the program while in the clinical area.

"You also need that teacher too, because there's days when you're just frazzled... and you need that mother hen guidance to help you out... And that separates good teachers from bad teachers... the ones that know... 'Yeah, ok... I can see this person's struggling... let's help them out a little bit.'"

Robin recounts a sense of being on his own and not feeling part of the group of students in the diploma class. Robin had little interaction with others in the class although, on occasion, he did study with one student in semesters four and five. "The only person I talked to was just another guy in my class who was around my age – two years older."

Self-confidence

Robin portrayed a picture of himself as an apprehensive, overwhelmed student when he first entered the RPN program. He describes the source of this lack of confidence to be related to his lack of experience. "So I kind of figured... oh boy, I'm in over my head here... and then, the way they do things at the place I worked was a lot

different than general nursing." Feelings of insecurity were also prevalent when Robin

re-entered the nursing program.

> "I had doubts about it...but it's a beginning thing...you're going to doubt it until
> you do it...Like when you first go to drive a care...Can I really do this? And now
> you've done it a couple thousand times...you just hop in and go. Same thing with
> my entry to the program, there were a few doubts there, but I kind of looked at it
> and, well no chance...no dance... if you don't you'll still be in the same place."

Although he described himself as a "basket case" when he re-entered the nursing

program, Robin expressed a sense of having a higher level of confidence as a result of his

clinical experience as an RPN. As Robin gained experience in both the classroom and

clinical settings his confidence grew.

> "The confidence that you don't have at the beginning – even when you give your
> first needle...Now its just nothing... you just go along...you don't even think
> about it any more...a little bump in the road for your day..."

In the second conversation, Robin summarized his feelings about his level of

confidence at the end of the program... "...and then at the end you're more confident.

It's like a big weight has been lifted off of you." Robin's confidence in his abilities has

spurred him on to enroll in a specialized OR course which he plans to take upon

completion of his diploma.

<u>Being a Tutor</u>

Entwining Robin's experience as a returning nursing student was the experience of

being a tutor. During the first year of Robin's re-entry into the nursing program, he

undertook the task of becoming a tutor. Robin's motivation to become a tutor, as well as

his perception of the advantages and disadvantages of tutoring will be explored.

Robin's motivation to become a tutor arose out of a personal need to help others...

> "Give something back...I'm here because I want to be here. I did have problems
> with the RNA program... there were some aspects of it that I just found that were

hard...So why not stop and turn around and give somebody a hand who's where you used to be?"

Robin appeared to have a desire to give to other nursing students what he received in terms of support from others.

> "It's kind of comparable to finding somebody who has a flat tire on the side of the road and you help them out ... its a good thing...who knows? One day down the line, they may be able to help me out."

Tutoring another nursing student was beneficial to Robin in that he was able to review the material he needed to know and at times obtain another's perspective on the material. As Robin had limited his social activities while in the program, the tutoring experience also provided personal contact that he needed at that time.

> "It gave me more social interaction that I kind of needed too... because I wasn't doing anything... I was just going home, reading, going to work and that type of thing. When you go and tutor with somebody, sometimes you go for coffee or something like that. You get the small talk. You get to meet somebody. You get to talk to somebody. So its not that monotonous, everyday..."

Robin also described a personal sense of satisfaction in helping others. "And it gives you a good feeling to help somebody else...I mean why not? If you're going to study anyway, why not sit there and study with somebody else?" Robin suggested that the college should encourage students to form study groups by possibly keeping a room open at night for student to meet, work together and exchange ideas.

Although Robin recounted his experience as a tutor as a positive one, he also identified a possible drawback.

> "Sometimes you might get somebody who's not really interested. And then it's kind of a waste of time... its business to me, its like a job...there's no fooling around...I'll drop you just as fast as I found you."

Conclusion.

As one who expressed an interest in and sensitivity to other's stories, it appeared natural for Robin to tell his story and share his experiences. Each difficult step of Robin's journey through the nursing program was driven by his strong motivation to open doors for himself and establish job security (see Table 2). Becoming a Registered Nurse can be seen as a major step that will bring Robin closer to his goal of becoming a nurse with diversified capabilities.

Table 2. Isolated Themes and Reflections - Robin

Data Cluster	Isolated Themes	Reflections
Motivation to be a nurse	Financial security	"I came back again this time because the HL is closing… its another financial move."
	Opening doors	"You can only go so far as an RPN. You can't really progress as far as I'd like to go…It's going to open up some doors for me. I'm going to be able to move on…"
	Importance of patient contact	"I meet some of the most interesting people in the world…everybody has a little story no matter what, no matter who you are… I've always liked that."
The influence of past experiences	Being a mature student	"I'm a little bit older and oh boy…back in school at my age…your friends are all out buying toys and stuff like that…and you don't because you're in school."
	Returning as a Registered Practical Nurse	"I could see where things were going… the pathophysiology and the nursing theory kind of entwine…you incorporate everything you've learned and you pull it together… its like a big melting pot."
Returning to nursing	Encountered stressors	"School is one big stress but if you had other things as well… I slipped down to a B this year in theory."
	Coping in the nursing program	"Be more structured with what I was trying to do…I'd break it off into little sections and try to learn little stuff… And then I'd put all of the pieces together and you make the big puzzle and you can understand everything."
	Sources of support	"A lot of people I worked with kind of helped me out with my homework and stuff like that… it's kind of a little advantage because you can branch off and you can use different avenues and different people that you know to help you out."
	Self-confidence	"… and then at the end you're more confident. It's like a big weight has been lifted off of you."
	Being a tutor	"So why not stop and turn around and give somebody a hand who's where you used to be?"

Beth's story

This segment outlines the experience of Beth, a single parent who financially supported herself as she struggled to reach her goal of becoming a registered nurse. During her first experience in the diploma nursing program Beth faced academic difficulties which prompted her to transfer into the RPN program. Beth's commitment to become an RN persisted after she received her RPN certificate and impelled her to re-enter the diploma program for the second time. An expanded support system and a more stable financial base aided Beth in accomplishing her goal. Beth enthusiastically shared her story as she participated in the conversations. She appeared unable to contain her joy and sense of pride in her accomplishments as she recalled her experience. Review of data collected from the conversations with Beth exposed the following data clusters: the nursing student experience, advantages of becoming an RPN, and success in the diploma program. These clusters as well as isolated themes will be explored (see Table 3).

Table 3. Data clusters and isolated themes - Beth

Data Clusters	Isolated Themes
The initial nursing student experience	Motivation to be a nurse
	Sources of support
	Academic problems
Advantages of becoming an RPN	Building on previous learning
	Organization
	Building self-confidence
	Financial security
Achieving success in the diploma program	Expanded support
	Time management
	Self-confidence
	Commitment to continue in nursing

The initial nursing student experience.

Despite Beth's strong motivation to become a nurse, her initial experience in the diploma nursing program proved to be a difficult one. A meagre support system consisting of her grandmother, the father of her son, and his family proved to be inadequate. As she lost her ability to cope with academic problems and financial pressures Beth eventually chose to withdraw from the nursing program. Upon examination of this data cluster, the following three themes emerged: motivation to be a nurse, sources of support and academic problems.

Motivation to become a nurse

Beth's interest in becoming a nurse surfaced when she was a child in grade school. Upon the birth of her son at the age of seventeen, Beth's commitment intensified. "I think what really did it was when I had my little guy and I was on the maternity floor... This RN that was looking after me... She was just as young as I was. And I just kept her in the back of my mind and finally I got into the program."

Following her son's birth, Beth chose to return to high school part time and eventually progressed to taking upgrading courses at the college. Beth's plans for the future began to take shape as she completed courses in a college general arts and sciences program and was offered admission to the diploma nursing program.

Sources of Support

As Beth recounted her initial experience in the nursing program, it became evident that she did not have a strong network of support at that time. Beth found it necessary to become relatively self-sufficient emotionally and financially in order to support herself and her son.

Beth's sole emotional support during her first experience in the nursing program arose from her grandmother who had raised her as a child. As she faced the challenges associated with being a full time nursing student, Beth also confronted the task of financially supporting herself and her child.

> "I had to do it... It's just me... I don't really have parents... There's my grandmother but I couldn't really expect her to pay for school. She's helped me... but she still has her home and she's running her home alone... so I didn't want to put any kind of pressure like that on her."

Beth coped by working at a minimum wage position in a restaurant. "... It wasn't enough. I was finding that I'd have to do doubles...like sixteen hour shifts... There was

one time I worked thirty-two hours straight." The accommodating relationship that Beth

maintained with the father of her son and his family enabled her to tackle her challenges

without childcare concerns.

> "I never had a baby sitter. It was just between myself and his father and his
> father's family... Just before exams he'd offer and say, 'I could take Tommy for
> an extra couple of days or this evening and give you time to study.'"

Meeting the demands of work and school eventually became an insurmountable trial for

Beth. "Ugh... I'd be up until two, three o'clock in the morning studying. And I'd get up

for six o'clock. And I just burnt right out. It wasn't going to work."

Academic problems

As she progressed through her second year, academic troubles began to compound

Beth's difficulties. Although she encountered some difficulty in her anatomy course,

Beth successfully completed her first year in the diploma program. During her second

year, however Beth found herself struggling academically. "I had a really hard time with

it. Just putting it together and finding a way to study... I kept trying all different ways of

studying but it just wasn't working." Acquiring a tutor did not prove beneficial. "I don't

know if it was just with method...or just...giving me too much information all at once."

During the final semester of her second year, Beth found that her difficulties in the

classroom began to impact upon her clinical performance. "I was really scared of T.P.N.

(Total Parenteral Nutrition)... things like that. I just wasn't too sure. I hadn't spent

enough time studying it or anything like that. So it turned around on me." "I wasn't

ready for it. I hadn't absorbed enough to feel confident. I'd always be second guessing

myself and wondering if I was doing that right..."

Advantages of becoming an RPN.

"The suggestion to switch to the RPN program and get some practical experience and go from there... That was the best move I ever did..." Beth's decision to withdraw from the diploma program and enroll in the final semester of the RPN program proved to a turning point in her journey. The ability to build on previous knowledge and develop organizational skills as a practicing RPN proved to boost Beth's self-confidence and prepare her for the challenges she would encounter when she re-entered the diploma program. The remuneration obtained while working in the capacity of an RPN also benefited Beth by alleviating some of her financial pressures.

Building on previous learning

As Beth found employment as an RPN, the opportunity to build on prior learning presented itself.

> "It's like taking little steps to your final big step. And it works! Each one kind of built on the previous... You learnt new things, extra things that would help you along the way... and it wasn't all kind of thrown at you."

Working in the clinical setting helped Beth make valuable connections between nursing theory and practice.

> "I don't think I was really ever a textbook person...it was more like hands on. Get on the floor and then I could picture... the relationships between everything...it really helped...it was like putting a puzzle together..."

The opportunity to work along side practicing RNs also proved to give Beth a further advantage. " I was able to see what the RNs were doing. I'd ask them questions and they'd answer them... or they'd try to get me involved... To see something different or a new experience."

Organization

The organizational skills acquired by Beth before re-entering the diploma program proved to become extremely valuable. Immediately following her graduation from the RPN program Beth obtained a temporary position as a health care aid. Within two months, she obtained a transfer to an RPN position at the same institution.

> "We had a really heavy load. Anywhere from ten to fourteen people to look after. And you have to do all of their hygienic care... and that's a lot... I got that type of organization down pat, and when I jumped into the RPN I was able to organize that kind of care and give my meds on top of it."

Because of her past experience, Beth encountered minimal difficulty in maintaining the level of organization skill demanded of her when she returned into the diploma program. "It all fell into place. The extra responsibility doesn't feel overwhelming or anything like that. I took it more as a challenge."

Building self-confidence

The self-confidence that eroded away during the period before her withdrawal from the diploma program rapidly began to flourish as Beth entered the RPN program.

> "Towards the end... when I switched over... my confidence was almost next to nothing. And then once I switched over and just kept plugging away at it... I started studying a lot more, and my marks went into the As and Bs and my confidence started to come up."

Graduating from the RPN program further enhanced Beth's sense of self-confidence. Beth was convinced that she would be capable of successfully meeting the challenges of the diploma program for the second time.

> "The end result was that I got the certificate... Awesome! Yeah! I was like...Oh wow! And it wasn't with bad marks either... That was really a good boost of confidence to come back. I felt that things were getting better for me."

<u>Financial stability</u>

As Beth established herself as practicing RPN, she began to strengthen her financial position. Working excessive hours in order to survive financially no longer consumed Beth's life.

> "That was another reason for going to the RPN program... because I knew once I was finished that the wage would be a lot better than a minimum wage... Before I'd have to work four or five days a week at a minimum wage job."

Beth's new financial position enabled her to focus her time on her academic pursuits. "I would have to work less so I'd have more time to study...Now its work a couple of days and I have five other days to study."

Achieving success in the diploma program.

Beth attributed her eventual success in the nursing program to the cumulative effect of changes that took place in her life. Examination of this data cluster revealed the following themes: expanded support, time management, self-confidence, and commitment to continue in nursing.

<u>Expanded support</u>

Upon re-entry into the diploma nursing program, Beth found herself surrounded by a network of support more extensive than any she had experienced in the past. In addition to the consistent support of her grandmother and the father of her son, Beth gathered further support from her new tutor, coworkers, staff in her clinical settings, as well as a fellow student. "Everyone's been such a big support. I can't just narrow it down to just a group of people. Everybody's been that at one point or another."

Tutor support

Following an ill-fated experience with her first tutor, Beth was hesitant to accept a teacher's persistent recommendations to work with one again. "I tried previously being paired up with another student... It didn't work out... and I thought... This isn't going to work again... I'm wasting time... When I finally did say, 'Yeah', it was a good thing." The relationship that Beth established with her tutor proved to be the key to her academic success in the program. As she recounted her experience, Beth recognized that up until the period that she began to meet with her tutor her approach to studying was ineffective. "My biggest thing was how to study. I'd never really learned how. I wasn't retaining information or understanding what it meant... So that's when my tutor came in. Even the simplest little things. He'd show me." Rather than primarily focusing on the current semester, Beth and her tutor worked on developing a foundation upon which she could build her knowledge.

> "... We went straight back to basics... to first year... anatomy and physiology. When I was learning the heart again and the flow path through the heart... he drew a square box and cut it into four and that helped! I can still picture this box today and draw it and tell you what is going on. And then when we got conditions... say cardiac tamponade... I can picture it... but I picture this little box first!"

Beth and her tutor soon discovered that visual and hands on approaches to learning were the most effective for her.

> "There's just a method of studying... more like visual with pictures and drawings and stuff like that... When we were learning about otitis media... we were talking about auto inflation... He grabbed my nose and said, 'Blow!' He grabbed my nose and pinched me! But those things stuck!"

Beth's tutor also identified alternative sources of information that proved valuable when consolidating new knowledge.

"My partner, my study guide, kept reinforcing and kept looking for other ways, for other books, whatever to help out... He just pointed out other textbooks that were not necessarily simpler but the working was difficult... and I seemed to really catch on."

As tests approached, Beth and her tutor systematically divided content and dealt with it in small portions.

"We took that and broke it up... and we made up our own notes of what was most important to remember. But we'd read through the chapters more than once... I probably read a couple of those chapters four or five times."

The impact of the support received from her tutor became evident as Beth 's academic marks began to climb.

"It was a good thing... my marks started coming up... I had my first A... I started getting Bs... It's almost like being a sponge... Once I found my way of studying, I just didn't want to stop!"

Co-worker support

As Beth began to practice as an RPN, she found herself drawn into the profession and supported both emotionally and academically by her coworkers. Fellow staff undertook the task of assisting Beth with her studies in the RN program.

"They were studying with me and actually helping me with my RN. On night shifts we'd studying till about two o'clock after we got our round done... Any questions I had or something I didn't understand... they'd explain it... Ways they used to remember."

By including her in their practice, fellow staff fostered Beth's enthusiasm for the profession.

"All the RNs, they involve me in different sorts of skills a work. They let me participate... nebulizers... and I just try and do the best I can. And they'll say, 'Well what do you think? What should we do?'... Assessing patients if they have to go to the hospital."

The backing that Beth received from coworkers extended beyond encouragement of learning and grew to encompass emotional support as well. "There was one RN...she

said if I ever felt really low… if I ever felt bad, just to call her anytime of day… That was kind of neat that she would support me like that."

Support received in clinical settings

Beth's sources of support continued to multiply as she applied herself during her clinical placements as student nurse. Preceptors as well as other staff in the clinical settings eagerly assisted Beth along her challenging course. Beth recalled working on an assignment during her final semester… "I'd been working on it the day I finished the last one. I had it reviewed by other people…doctors, nurses… and they gave me their feedback." A significant gesture by staff struck Beth emotionally…

> "In fact my last day on my first preceptorship was my birthday. They all went out and bought a cake for me… I thought that if this many people are supporting me – even staff… they must really think it's worth it…or you know that they believed in me…so that helped with confidence too!"

The relationships that Beth established with her preceptors began to expand beyond the clinical area… "I think that my preceptor has become more of a friend now…She gave me her phone number and said, 'Drop by, give me a call, drop by my home'… I've made really good friends."

Support from a fellow classmate

A close relationship that developed between Beth and a fellow student served to provide her with additional emotional support. As she was facing a similar experience, Beth found that she could relate to this friend.

> "There is one girl that I frequently talk to about every day and she's about finished too… Whenever we were burned out or not feeling to great we'd kind of talk to each other and kind of pep each other up… Just keep motivating each other and saying, 'We only have this much more time… We're almost there.'"

Time Management

Managing her time effectively became a useful strategy for Beth as she progressed through the nursing program for the second time. Under the guidance of her tutor, Beth began to study and plan for tests and assignments well in advance.

> "In first and second year I'd leave things until almost the last minute and then I'd be in this big panic... and I wouldn't get the marks that I'm getting now... For our second project this year in sixth semester... I got sixty seven out of seventy!"

Preparation for her final year in the program began during the preceding summer. "I studied about a month ahead of time... Halfway through the summer I picked up the package and I looked at what the content would be on the tests and I studied it."

Adapting a pocket calendar to organize her work and school activities also proved to be beneficial. "It's like living by a book. It's all blue and black and you can hardly see any spaces but it was worth it... I'm not going to be working crazy hours forever."

Self-confidence

Beth's self-confidence swelled as she banked each of her successful endeavours in the nursing program.

> "It was something I was really determined to do. And I loved what I was doing... Semester four was a little bit difficult towards the end but I just kept studying. Once I got to semester five it seemed like things really turned around... and that's when everything started to come together as far as practicing and studying."

A sense of decisiveness and a thirst for knowledge began to replace the insecurity that shrouded Beth in the past.

> "I make a decision and I just go with it... Now compared to before... I almost felt stupid before... But now I've spent so much time studying and finding things out... almost like being nosey and just sticking my nose everywhere I could possibly get it so I could learn more."

With pride, Beth recalled times when the staff used her as a resource during her preceptorship experience.

> "This RN came in and said, 'What does a deviated trach mean?'… and I thought for a second and I said, 'Pneumothorax!' And the next day she came up to me and said, 'You know Beth, you were right!'… and lab tests and things like that."

Commitment to continue in nursing

Beth's commitment to becoming a nurse intensified as she overcame each of her obstacles. "…Three years… It's taken me just about six to get there. But I think it was worth it… I just wouldn't give up!" As she approached her goal, Beth began to set her sights for the future. With a renewed sense of strength and continued commitment, Beth began to focus upon a new vision - becoming an emergency nurse.

> "Nine more weeks… almost done… I'm excited about the opportunities afterwards… all these little courses that I've been looking at… I can't take on five or six of them but just one at a time."

Conclusion.

As Beth shared her experience, a true success story began to unfold. Despite her initial struggle and eventual withdrawal from the diploma program, Beth managed to cling to her commitment to become a nurse. Making the decision to become an RPN as well as receiving additional support from her tutor and others around her proved to be the crucial elements that empowered Beth to return and successfully complete the diploma program (see Table 4). As she made plans to embark upon another journey in the nursing field, a brighter future for Beth and her son appeared inevitable.

Table 4. Themes and Reflections - Beth

Data Clusters	Isolated Themes	Reflections
The initial nursing student experience	Motivation to be a nurse	"This RN that was looking after me... I just kept her in the back of my mind and finally I got into the program."
	Sources of support	"I had to do it...It's just me...I don't really have parents...There's my grandmother... so I didn't want to put any kind of pressure like that on her."
	Academic problems	"I had a really hard time with it. Just putting it together and finding a way to study..."
Advantages of becoming RPN	Building on previous learning	"It's like taking little steps to your final big step. And it works! Each one kind of built on the previous... You learnt new things, extra things that would help you along the way..."
	Organization	"It all fell into place. The extra responsibility doesn't feel overwhelming ...I took it more as a challenge."
	Building self confidence	"The end result was that I got the certificate... Awesome! ...That was really a good boost of confidence to come back."
	Financial security	"I would have to work less so I had more time to study..."
Achieving success in the diploma program	Expanded support	"Everyone's been such a big support. I can't just narrow it down to just a group of people."
	Time management	"I studied about a month ahead of time...Halfway through the summer I picked up the package and I looked at what the content would be on the tests and I studied it."
	Self confidence	"I make a decision and I just go with it... Now compared to before... I almost felt stupid before."
	Commitment to continue in nursing	"I'm excited about the opportunities afterwards... all these little course that I've been looking at..."

Tina's story

This segment will outline the experience of Tina a student who, because of illness, withdrew from the nursing program. Tina re-entered the program and was completing her final semester at the time of the last conversation with the researcher. Tina was born and raised on a tropical island in a family of four children. She and her brothers were sent to the United States for their high school education when Tina was sixteen years old. Following an arranged marriage, Tina moved to Canada with her husband and enrolled in a diploma nursing program. Tina remained serious and articulate during our conversations. She conveyed a need to share her story and reflect upon her past. The disclosure of her experience served to awaken an array of both joyous and painful emotions that she willingly shared with me. Two clusters were identified from the collected data: the impact of past experiences and Tina's experience as a returning nursing student. Reoccurring themes within these clusters will be identified and discussed (see Table 5).

Table 5. Data clusters and isolated themes - Tina

Data Clusters	Isolated Themes
Impact of past experiences	Motivation to become a nurse
	Benefits of being a medical assistant
Returning to nursing	Encountered stressors
	Sources of support
	Coping with returning

Impact of past experiences.

The experiences in Tina's life served to influence her on her course through the nursing program. Upon examination of the cluster of data related to the impact of past experiences, two major themes were identified: motivation to become a nurse and benefits of being a medical assistant. Sources of these themes within the conversations will be explored.

<u>Motivation to become a nurse</u>

As a child, Tina watched and admired her father in his position as a physician…

> "…He has been through so much in life and he always shared his past experiences with us…that really gave me the outlook that in life those are the kinds of things that make you stronger. And the way he was with people…that really gave me so much inspiration…I wanted to do what he was doing…be in the same field…I decided to get into nursing."

Tina shared the joy that her father had when working with others. "I love working with people…I think it's really fun… When you can help someone out and make a difference in someone else's life." Tina's father's tragic death instilled in her a determination to enter nursing and sense of wanting to make things right.

> " I was told…how the nurses were laughing at him…they didn't cover him… I don't know what happened but I was told that the nurse didn't give him the attention that he should have been getting…and that really…really made me angry…and I just felt like…No this is not how it should be." and when I become a nurse I'm not going to be like that towards a patient never mind who it is…everyone deserves to be respected and treated well. Especially if you are in a position such as an RN…I wanted to make it right."

Tina looked upon the nursing program as a path towards gaining respect and obtaining job opportunities. Upon moving to Canada after her marriage, Tina faced

difficulties when seeking employment. Tina found that her qualifications as a medical assistant were not recognized in the same capacity as they had been in the United States.

"I just didn't feel like I was getting the respect I should have got...When I looked into the nursing field I noticed there were much more opportunities ...a higher salary, much more you can do...so that made me decide...now stop right here...I'm going to school."

<u>Benefits of being a medical assistant</u>

Upon completion of a medical assisting program at a private college in the United States, Tina worked for approximately one year with a family practitioner. She described this experience as an opportunity for personal growth and an advantage to her in the nursing program. "The background that I had really helped me when I interacted with patients."

Returning to nursing.

As Tina shared her unique experience as a returning nursing student, three reoccurring themes emerged: encountered stressors, sources of support and coping with returning. A clear vision of Tina's experience emerges as these themes are investigated.

<u>Encountered stressors</u>

As she passed through the nursing program Tina faced numerous stressors. Trying to catch up upon returning after her illness, exclusion from the class, as well as the preceptorship experience presented as major stressors that Tina sought to overcome.

Tina managed well in the nursing program before her absence due to illness at the beginning of her final year. When Tina returned one month late into the semester she walked into a wall of obstacles. The efforts required for catching up in both the practical and theory courses were overwhelming for Tina...

"... It was too late for the (clinical) teacher to evaluate me...I felt overwhelmed by so much... not only with clinical but knowing that all the projects, assignments, tests that are coming up...it was just overwhelming. I didn't know what to do...everything was being pushed at one time..."

The decision to withdraw was a difficult one. "I was fighting within myself and talking to myself... 'You can do it. You can do it.' But I also knew that... No, I would rather have the time off."

On the advice of the nursing program coordinator, Tina returned to audit the fourth semester of the program prior to re-entering the fifth. Although she faced no difficulty when dealing with course requirements, Tina was unexpectedly faced with stress on a more personal level at that time. Tina expressed strong emotions in relation to frequently feeling personally excluded from the new class unit. "No one included me. No one asked me... 'Would you like to come in our study group?'... That was really making me sad... I just wish I was with my own class." Although students in the new class approached her for help, Tina did not feel she was getting anything in return.

"There was a lot of communication going around... 'Where we would study tonight?'... and 'Would you come over?'... And no one ever asked me...and those were times that would really make me down. Sometimes I would go home upset about it... It's hard to deal with."

Tina proposed an approach that might help to avoid this disturbing situation for other returning students... "I think in some way the message should be conveyed in semesters where they're getting older students back...that please include everyone...everyone should work as a group...you're all a team."

As Tina entered the final semester of her final year she experienced additional stress in relation to her preceptorship experience. Tina was faced with the challenge of being

assigned to a preceptor who responded very negatively towards her. Tina described the effect of this situation upon her self-confidence...

> "When you have a preceptor who makes you feel like you're down there, like you're nothing...its so hard to still maintain that...especially when you know you're happy, you're finishing... you came back in the program, you worked your way up to here..."

Again, Tina suggested an approach to help other students in the future...

> " The student is supposed to be on their own and play a role of basically getting to be a nurse. It is very critical that the preceptor that is chosen is also asked... if she wants a student... some of the things should be gone over with a preceptor before a student is handed over to her."

Sources of Support

"... I think if a person really wants to do something they can do it... and there has to be some kind of a light that has to help them... either a supportive friend or friends...family." Tina's "lights" of support throughout her experience as a nursing student were primarily her family and to a lesser degree her teachers. The strong "light" of support from fellow classmates faded as Tina left and re-entered the nursing program.

Tina strongly expressed her beliefs regarding the importance of family support "... I think a strong family background really makes a difference on the person." Although it was difficult for him as he was a student himself, Tina's husband was her strongest supporter. Tina and her husband lived with her two brothers who also provided valuable support. Tina shared memories of the period when she was ill... "They were always there for me...and they knew that I was sick... really supported me and that helped a great deal."

Tina expressed appreciation for the support provided to her by her teachers. The ability to approach them comfortably in order to discuss material and obtain feedback

was beneficial to her learning. Tina also recalled the efforts that the coordinator made to try to keep her in the nursing program. Tina stressed the impact of her teachers' support during her troublesome situation with her preceptor. She expressed relief that her teachers had kept detailed records of her past performance... "...so I was happy about that. If my teachers or coordinator didn't stick up for me what would have happened to me? Does it mean that I come back again?"

The support provided by fellow classmates was valued dearly by Tina. As she initially came through the nursing program, Tina established a close bond with her cohesive group of classmates. "I felt that there was this group of supportive people with me... they were also in the same boat...we were working together." Tina noted that some students in her class were more supportive than others.

> "...These certain students were the ones who had gone through stuff in life...who had seen life in a different way...which has made them stronger...who had already gone thorough stuff in their lives similar to what I had...maybe not exactly what I had gone through...but that really make a difference... communicating one to one."

She explained the importance of this form of support... "A lot of students that were going to graduate...it happened because of team effort." During her illness Tina's classmates continued to provide support by keeping her up to date with classroom work and helping her out with required assignments. Tina strongly expressed her regret that she was unable to graduate with her first class. "I had memories with them...we started... they were buddies...we studied together...stayed late at night and did assignments together."

When Tina returned to the nursing program the "light" of support from classmates faded. The second nursing class lacked the cohesiveness to which Tina had become

accustomed. "The second time I felt like I really had to strive because of the fact that I really felt alone. No one wanted to give me that support."

<div align="center">Coping with returning</div>

As Tina recalled her experience in the nursing program it became evident that success would not have been within her grasp had it not been for her effective coping skills.

Tina established an approach to studying which she maintained throughout the program. Despite a heavy load of reading and assignments, Tina was able to focus and organize her time effectively.

> "What usually helped me was the evaluation criteria... what assignment or project is due when. So I marked it in my diary and I knew that since this test is coming first I'm gong to work for it first. And then the second test I'm going to get prepared for it in between."

In addition to studying independently, Tina benefited from studying one on one with other students.

> "Studying on my own helped me to focus on the material, absorb the material and get an understanding of it... and studying one to one helped me to test myself also...to see how well I got the information that I studied on my own... If I didn't get something well enough in my brain the other person did."

Unfortunately, when Tina re-entered into the program she was unable to establish this form of contact with anyone else in the class.

As she faced the reality of withdrawing from the nursing program, Tina picked herself up and transformed a painful situation into a positive one. "I decided...ok, I'm going to spend my time well..." Although she was no longer in the nursing program Tina took the opportunity to take a nursing professions course that was a final year requirement. Tina also made a decision that would have a significant impact upon her

future – she chose to become a tutor. "I was really happy that I decided to tutor. That was the best thing I did at that time. If not I don't know what would have happened to me." The seven students that Tina worked with were not the only ones that benefited from their relationship. "It gave me great joy because they were having problems with classes like anatomy and physiology. It pushed me to review the material…so deep in my mind I thought, "I can still do it!" The self-doubt and insecurity that Tina felt when she left the nursing program quickly began to fade away as she became more involved in the tutoring experience.

> "It gave me self-confidence, it gave me the view that – No – don't give up. If you can do this you can move on…that was quite a boost for me…it gave me a positive look. I am going into forth semester, I am going to be moving on, I'm not stopping right here!"

Spending her time well also included accepting the opportunity to audit the forth semester of the program. Although she already had credit for the semester, Tina found that auditing was beneficial to her. "That helped me to absorb information better, recall information better… I guess because the more you do something the better you get at it." Repeating placement in the clinical practice setting was also a positive experience for Tina. "Going over clinical areas again. You know it boosted my confidence more…I felt it in me…that I was better than I would have been."

One of Tina's most difficult challenges involved coping with her feelings of exclusion from the class when she re-entered the nursing program. With difficulty Tina recalled how she managed the situation. "I know that sometimes you have to be your own best friend…you can do it…you have obstacles coming your way. You'll meet all kinds of people in this world…" In Tina's eyes she had a lot to lose. She had devoted a lot of time and energy into the nursing program and was determined to be successful…

"That's how I had to do it. Because I got myself prepared for it... Its almost over, you can tackle it... So I did it on my own...was my own friend. I studied on my own...I won't let anything come in my way."

Conclusion.

Despite numerous obstacles, Tina's strong motivation to succeed and become a

nurse spurred her on to completion of the nursing program. The support she received

from family, fellow students and teachers served to sustain Tina's determination to

succeed. Table 6 provides an overview of Tina's experience.

Table 6. Themes and reflections - Tina

Data Clusters	Isolated Themes	Reflections
Impact of past experiences	Motivation to become a nurse	"And the way he was with people...that really gave me so much inspiration...I wanted to do what he was doing...be in the same field... I decided to get into nursing."
	Benefits of being a medical assistant	"The background I had really helped me when I interacted with patients."
Being a returning nursing student	Encountered stressors	"... I felt overwhelmed by so much... it was just overwhelming. I didn't know what to do...everything was being pushed at one time..."
	Sources of support	"... I think if a person really wants to do something they can do it... and there has to be some kind of a light that has to help them...either a supportive friend or friends... family."
	Coping with returning	"I know that sometimes you have to be your own best friend...you can do it..."

Janet's story

The following section portrays the arduous path of a native student through a nursing program. After successfully obtaining her certificate as a Registered Practical Nurse, Janet chose not to seek employment. Approximately two years following graduation, Janet entered the second semester of a diploma nursing program. Overwhelming obstacles originating from many sources drove Janet to leave the program after three months. Positive changes later in her life enabled Janet to re-enter the diploma program and eventually successfully complete it. Janet appeared very pensive and serious during our conversations. As she shared her moving experience in a soft- spoken manner, Janet remained very candid and sincere. Examination of data collected during the two conversations with Janet exposed the following data clusters: motivation to be a nurse, obstacles to success, coping with obstacles, and growth of self-confidence. Investigation of predominant themes within these clusters will follow. (see Table 7)

Table 7. Data clusters and isolated themes - Janet

Data Clusters	Identified Themes
Motivation to be a nurse	Need for financial security
	Desire to "help" her people
Obstacles to success	Personal obstacles
	Feelings of exclusion
Coping with obstacles	Ineffective coping strategies
	Effective coping strategies
	Positive effects of support
Growth of self-confidence	Influences of work experiences
	Influences of past successes

Motivation to be a nurse.

Many individuals are motivated to enter nursing for a multitude of reasons. Janet's story illustrates the experience of a student who managed to cling to her goals as she faced life's obstacles. Janet's initial motivation to become a nurse arose from a need for financial security. As she began to establish this security, a desire to help her native people became an additional motivating factor.

<u>Need for financial security</u>

As a relationship with a long time boyfriend dissolved, Janet began to seek security for her future. Janet's decision to enter nursing evolved from a need for financial security as well as an inability to commit to a program of long duration.

> "...My whole thing about school was that I hated it and I didn't want to do it so I was basically flipping through the brochure and looking at all the various programs... and how much time I would have to dedicate to each thing and kind of evaluating it that way...and the practical nursing jumped out to me because I thought...they make good money...it was only a year and a half and more obtainable for me."

Shortly following a move to the city Janet discovered that she was pregnant. The responsibility of having and supporting a child strongly motivated Janet to proceed into the Registered Practical Nursing (RPN) program.

> "I knew I had to succeed because my son's future and our destiny...it was either finish school or face a life of poverty. I knew that being on welfare sucked...financially wise it was a struggle...like get your check and it would be gone in three days. And then what do you do at the end of the month when you run out of food? And never mind being able to pay to get a car...you would never be able to do it. So what options did I have? Go out and find a rich man? I mean that wasn't in the picture at all. I had to go back. I had to. I would have felt like a complete failure."

As Janet's relationship with her current husband developed in the period following graduation from the RPN program she gave birth to another child. Janet felt a renewed

need to establish an increased level of security for her family at that time. These feelings motivated Janet to return to college in order to become a registered nurse. "It was...yeah. I've gotta do it. I've gotta do it for my family."

Although she was unsuccessful in her first attempt in the diploma program, Janet's drive to become a nurse remained with her through her successful second attempt. "I've gone through this nursing program for so long...it seems like so long! ...I was always a survivor!"

Desire to help her people

As Janet faced the eminent success of graduating from the diploma nursing program, she spoke of the desire to continue further with her education in nursing. The motivation to further her education at this time however flowed from a different source. Survival was no longer an issue. Janet expressed a desire to use her knowledge and education to help others of her own native race...

> "Get a Bachelors and then maybe a Masters in something else. Like health administration I was thinking... and maybe even go and work on a reserve or something...I'd like to do something to help my people."

Obstacles to success.

Numerous obstacles blocked Janet's path towards becoming a registered nurse. Janet faced the tasks of overcoming difficulties stemming from her personal life, as well as dealing with feelings of exclusion.

Personal obstacles

As Janet recalled her story, it became evident that the personal turmoil she encountered was a tremendous deterrent to her success. While Janet worked her way through the RPN program, she faced the responsibility of being a parent as well as legally

fighting for child support. Janet's personal situation remained troublesome as she re-entered nursing for the first time. She was faced with living with a boyfriend who became physically abusive. As this relationship ended, Janet became involved with the man who would later become her husband. Although Janet described her family life as being more stable, both she and her husband were involved with drinking at that time. "...And his drinking. He was leaving me for days at a time to go out on these binges I guess... and I was at home with the kids so I couldn't go to school..." Transportation to the college presented a problem, as Janet did not own a vehicle.

> "I'd have to take a bus which was a real inconvenience... You have to get up an hour earlier and leave an hour earlier to get there...and an hour bus ride to get home...so it just didn't work."

Being absent from classes presented additional difficulties for Janet as she faced catching up on missed material. In addition to facing the demands of the nursing program, Janet also faced the burden of running a household.

> "When I got home I'd have to cook, do some cleaning, get the kids off into bed, make sure that they had their baths...not only was I struggling with homework and assignments...I was also struggling to run a house."

Janet presented an image of her frame of mind during the time she first re-entered the nursing program...

> "I was kind of not really there...I had a lot of personal problems, a lot of personal issues and I couldn't focus on the school work properly but I tried to as best I could. But still I wasn't...I was barely cutting it."

Janet explained the direct relationship she perceived between personal stability and success in the nursing program...

> "If you don't have a stable personal life, no matter what your background... you can't make it in this program. Some do...some manage to make it through. But for me I couldn't...until I had that stability in my personal life, that was the only way I could make it."

Feelings of exclusion

Intense feelings of exclusion compounded Janet's struggle as she re-entered nursing for the first time. As the only native student in the class, Janet felt isolated from the others. She recounted a situation in the classroom...

> "The discussion was about AIDS... Somebody was making a presentation in front of the class and...they were talking about native people are the highest rate of people who are HIV positive in Canada ... and this guy who was sitting at the next table over from me says... 'You're native aren't you?' and I go, 'Yeah.'... And that was all I could say because I was so stunned... I just knew it was kind of a jab... an ignorant remark... and it made me feel very unaccepted."

In addition to receiving racial remarks within the classroom, Janet faced racial comments from native people she was acquainted with. "They call you red on the outside and white on the inside... it means you're actually an Indian who acts white... I'm not the stereotypical native person..." Janet expressed concern about this form of exclusion from her own race as she felt it was a reaction to her going to school to become educated.

> "I'm caught up in this whole thing about being native and you know... getting negativity from white people, not only white people but my own race... its not my fault that I'm like that... red on the outside and white on the inside."

The lack of support from others instilled in Janet a sense of being an outsider. "I just felt like I didn't have any kind of support there at all..." When she was able to come to classes, Janet faced unwillingness by other students to share notes or update her on class work. Janet also noted that her teachers at that time had a different attitude towards her... "When you get good marks and you show you're doing well they treat you differently... quite a bit of difference there. I felt I was frowned upon... I felt like I was being punished..." Feelings of exclusion reached their peak with Janet's assignment to work with three students on a group project.

"I had my work completed... it was done at my house for a whole week...
Nobody phoned me, nobody called me to pick it up and I didn't have the
transportation to go drop it off to them... My girlfriend came to pick up. They
handed it in and I guess they lost marks because there were no references or
bibliography... and they blamed it on me...They kind of banded together... even
my friend... My friend didn't stick up for me..."

Janet described feelings of being "framed" by the group and not trusted by the teacher.

"The teacher wasn't very supportive either... She put more homework on me!" The

cumulative effect of Janet's feelings of rejection and the additional workload proved too

much for her to cope with...

"I just couldn't handle it, I said, 'Forget this!' I felt that I was being punished for
something I didn't even do. I kind of lost all hope with that... and so I decide to
drop out after that."

Coping with obstacles.

Janet's success in the nursing program related directly to her ability to cope with the

obstacles overshadowing her. Upon examination of this data cluster, three themes were

evident: ineffective coping strategies, effective coping strategies and positive effects of

support.

<u>Ineffective coping strategies</u>

Janet attributed her marginal success in the RPN program as well as the difficulties

she experienced during the first time she was enrolled in the diploma program to her

inability to cope effectively with her problems. Drinking became Janet's primary method

of coping during this period in her life.

"There was pressure there, I guess you would say. So I think the way I dealt with
it was actually drinking... I drank not lots... but quite a bit... (Like party on the
weekends... stuff like that...) That's how I dealt with that emotion. But that
created more negative situations I guess you could say... it cause more problems
more than anything..."

As a result of her drinking, Janet's performance in the RPN program was fair... "I was trying to distract myself by drinking and stuff like that...I managed to squeeze by ...Cs I think... and some of them I actually did fail...because of the drinking." Janet shared an image of herself during these difficult times... "The person who was always drinking to run away from problems."

Effective coping strategies

As Janet discovered new approaches to coping, her goal of becoming a Registered Nurse appeared within grasp. Janet's decision to stop drinking renewed her focus in life and facilitated her growth in a positive manner. As she began to organize her life and manage her time effectively, Janet established a new sense of control over her life.

Following withdrawal after her brief experience in the diploma program Janet gave birth to her third child. It was at this time that Janet made the decision to stop drinking.

> "The main reason why I stopped drinking in the first place was because I had another daughter. A small baby... It was also a personal decision because my husband had quit drinking and I thought, well I don't really want to be drinking around him either...I'm sure that would lead to him drinking too."

Janet recognized the significant impact this choice made upon her life...

> "I felt like I was in control of myself. That I could do whatever I wanted whenever I wanted to...That's how I became stronger... I became myself again. I faced my problems head on...dealing with problems head on made me stronger."

As her life transformed, Janet's focus became extremely clear. "I had a goal...and nothing's going to shake that...and I want to do it now rather than come back two or three times to get it done. My focus was more focused..."

The clarity of thought that Janet acquired when she stopped drinking helped her to recognize the need to manage her time more effectively. "I was tired of being unorganized and being last minute... because I would even forget things...I'd forget to

even show up for a test... and it wasn't very good working under that kind of strain."

The use of a calendar proved to be an ideal approach to organizing her activities.

> "I'd have a little calendar...those little pocket sized ones... I'd think of pay days...how to make my money last through the whole month...Well there is an assignment due on this day...it was kind of a like a hobby thing. It was very neat. I would get all wrapped up in it and I'd get everything all organized and then I felt good about the next month that was coming up...That I was more prepared for everything...finances, assignments, everything... You should see my calendar with all the pink, yellow, green...all kinds of colours..."

Janet applied her time management strategies to her family life in order to balance school and home demands. Janet managed by allocating schoolwork to evenings and late nights after her children had gone to bed. "... For tests...I would be up until two or three in the morning... I knew I had to sleep...then wake up at seven or something... and it worked out well that way."

Positive effects of support

Janet's first steps into the Practical Nursing Program may not have been possible had support from a concerned couple not been available. Janet recalled having mixed feelings about keeping her first child and being terrified about becoming a single parent.

> "I was thinking of giving him up for adoption...but I kind of drifted away from that because I really did want him in a way. So... my mother... talked to her cousin who was a chaplain... and his wife and they decided to take him...for about a year or so while I continued my school."

The support of this couple enabled Janet to try to focus on her education and complete the RPN program.

> "I just went to school and they looked after him and I just basically went over there whenever I could and had him on weekends... it stayed like that until he was about a year and a half and then I got him back."

As Janet entered the diploma nursing program for the second time, she stepped into an environment entirely unlike the one she had previously encountered. Janet felt a

strong sense of support and acceptance from within this new group. The presence of other native students positively affected Janet. "I felt... not powerful, but accepted, more accepted for sure. But you know when you have more of your own kind you feel a little bit protected I guess..." Camaraderie with native as well as non-native students within this new class was commonplace. Janet disclosed the significance of the support she received from others as she described her relationship with a male student...

> "We were the same age and we're the same background... a lot of the same things so we could relate to each other. When I felt down or when I felt like I wasn't going to make it... He would say to me... 'You are going to make it Janet... you're going to be in that picture... the graduation one'... and make me feel a lot better and more confident. Because my husband couldn't really give me that kind of support because he was only seeing it from the outside in. Whereas this other student was right along with me... the for the whole thing."

The support of her husband through Janet's struggle through the nursing program proved to be integral to her success. Janet disclosed how her husband intervened on her behalf while she faced problems in an abusive relationship.

> "Then my husband came along and he actually saved me... not saved me... but helped me... when I needed him he was there to get the guy out of my place... I knew him previously as a friend and then we kind of just got together after that..."

With gratitude, Janet described her husband's contribution to the stability in her life...

> "Everything is just going so good. I wouldn't be here now ... because of his support. He was always very encouraging and supportive of my education. And if I didn't have that... the stability... the good home life... the support... I probably wouldn't have made it. No."

Growth of self-confidence.

Janet experienced an escalation of self-confidence as she proceeded through the diploma nursing program for the second time. Armed with new coping strategies and a high level of support, Janet was prepared to face her challenges. As she gained

experience in the nursing field and began to accomplish her goals, Janet built a strong foundation on which her self-confidence grew.

Influence of work experiences

Although Janet's dreams of graduating from the RPN program did materialize, her self- confidence at that time was low. Feelings of low self-esteem as well as personal difficulties deterred Janet from seeking employment as an RPN following graduation.

> "It was self confidence with the skills, hardly any experience in it, not only that but the responsibility of it all too. To know that I would be the one responsible if something went wrong... it scared me."

Janet's feelings of low self-confidence persisted throughout the period when she entered and withdrew from the diploma nursing program. As a result of her abstinence from alcohol and her ability to use new coping skills, the individual who re-entered the diploma program was not the Janet of the past.

> "I had more confidence. Definitely. I was more confident and I knew I could do it... sure of myself. When I stopped drinking everything became so clear and I felt more in control of myself. I could actually say to myself, 'You are going to do it.'"

Following the successful completion of her first year in the diploma program, Janet's level of self- esteem rose to the point that she felt confident enough to work as a health care aid and an RPN during her summer break as well as through her second year. "It gave me self-esteem... and that I could actually work and go to school at the same time...and then the money started coming in...I was addicted to that!"

Influences of past successes

Janet's self-confidence multiplied as she banked her successes. Janet clarified the relationship she saw between success and her feelings of self-confidence. "Now that I have so much experience in nursing...because I've been doing it for so long...I feel

really good about myself. I feel I can accomplish a lot." Janet's preceptorship experience in her final year enabled her to work fairly independently in an environment which demanded a high level of responsibility. "...pretty much independent...everything on my own...I don't think that someone who didn't have the confidence could do something like that." As her goal of graduating form the diploma nursing program approached, Janet expressed feelings of empowerment...

> "Something that I was determined to do. .I think that gave me a lot of confidence...the whole world is opened up to me now...now I feel I could do anything... There are so many choices...a crossroads rather than reaching a goal..."

Janet's self-assurance became apparent as she described her plans for working and furthering her education in the future. "Now that I'm very confident in school and in my ability I've decided to go back to school and get my degree."

Conclusion.

Janet's story of debilitating trials and remarkable personal growth reveals some of the striking realities which students who re-enter nursing programs face. "It was a struggle... It was this huge struggle. I wish I could have did it differently. I wish I would have been smarter in my eighteen, nineteen years old...and after I graduated from high school go right into college. Do what I had to do right away...with no kids, no husband... nothing. Get a job...I wish I could do it that way ...but I didn't. I had to do it the hard way. It's all working out now!" As Janet overcame enormous obstacles her dreams of becoming a nurse were finally transformed into reality. An overview of Janet's experience is presented in Table 8.

Table 8. Themes and reflections - Janet

Data Clusters	Isolated themes	Reflections
Motivation to be a nurse	Need for financial security	"...and the practical nursing jumped out to me because I thought ... they make good money...it was only a year and a half and more obtainable for me."
	Desire to "help" her people	"Get a Bachelors and then maybe a Masters...and maybe even go and work on a reserve or something...I'd like to do something to help my people."
Obstacles to success	Personal obstacles	"If you don't have a stable personal life, no matter what your background ...you can't make it in this program."
	Feelings of exclusion	"I'm caught up in this whole thing about being native...getting negativity from white people, not only white people but my own race..."
Coping with obstacles	Ineffective coping strategies	"There was pressure there...So I think the way I dealt with it was actually drinking."
	Effective coping strategies	"I faced my problems head on." "I'd get everything all organized and then I felt good about the next month that was coming up..."
	Positive effects of support	"I felt... not powerful but accepted." "And if I didn't have that...the stability... the good home life...the support...I probably wouldn't have made it. No."
Growth of self-confidence	Influences of work experiences	"It gave me self-esteem... and that I could actually work and go to school at the same time... and then the money started coming in...I was addicted to that!"
	Influences of past successes	"Now that I have so much experience in nursing...I feel really good about myself. I feel I can accomplish a lot."

Natasha's story

The following section illustrates the taxing journey of Natasha, a single mother of three children as she struggled to achieve her goal of becoming a nurse. During her first two experiences in the diploma nursing program, Natasha faced obstacles which resulted in her withdrawal. Due to problems with clinical performance, Natasha was initially asked to withdraw from the fifth semester of the diploma nursing program. Upon her subsequent return to the following fifth semester, Natasha was asked to withdraw for a second time. Natasha's third endeavour in the nursing program began with a return to the forth semester and led to an eventual successful progression through the program. Natasha was extremely talkative and boisterous during both of the conversations. As she shared personal feelings about her sources of support, however, Natasha's demeanour changed and revealed an emotional, sensitive side of her personality. As Natasha told her story, the following data clusters became evident: becoming a nurse, obstacles to success, and success in the nursing program. (see Table 9)

Table 9. Data clusters and isolated themes - Natasha

Data Clusters	Isolated Themes
Becoming a nurse	Helping others
	Motivation to become a nurse
Obstacles to success ·	Personal stressors ·
	Obstacles within the nursing program
Success in the nursing program	Playing "the game"
	Sources of support

Becoming a nurse.

"Your dreams are important and I think everybody should go for what they want to go for." As Natasha described her dream of becoming a nurse, two major themes became evident: helping others, and motivation to become a nurse.

Helping others

A pattern of helping others began to unfold as Natasha recounted her story,. Becoming a nurse presented itself as a natural path in Natasha's life. "Right through my life. I don't know, some people are born being really good mechanics. Some are born painting.... So...it comes natural for some people to do certain things." As a child, Natasha grew accustomed to a life of extensive traveling and relocating with her family and took on the role of caretaker for her younger siblings.

> "We moved so much. I always had to make sure my brothers and sisters and everything was ok. Every time we moved into a new neighbourhood I was the one that scouted the neighbourhood and made sure my brothers and sisters got to school ok."

As time passed, Natasha continued to feel a sense of responsibility for the well being of her siblings. "My sister is bipolar – manic depressive...I took care of her... I still do as a matter of fact...and she lives with me off and on... When she's manic she's very manic and when she's depressed she's suicidal." Caring for her brother also fell into Natasha's hands...

> "He was involved in all kinds of bad stuff...and he ended up getting stabbed and I'm taking care of him too...I have to go there three days a week and take him groceries and make sure he's ok."

As a teenager, Natasha left home and eventually joined a motorcycle gang. She soon realized that she had assumed the role of caregiver in that environment as well. "...It seemed that everybody was dumping everybody that was sick on me to take care of...

that was shot, or sick or stabbed or whatever. They though I was a nurse. I don't know why."

After leaving the gang and establishing a more stable lifestyle for herself, Natasha continued to attract and reach out to those in need. "I always have all these people at my house all the time. Trying to take care of everybody." Natasha attributed her ability to relate to these individuals to her past experiences in life.

> "I think that from all of my travels and all the places I've been I've been really lucky to see so many different kinds of people ...I've been in different kinds of lifestyles...I've had so many life experiences that I can honestly say to people, 'I know how you feel."... I don't judge anybody.'"

As Natasha entered the nursing program for the first time, she found herself again assuming a care-taking role. She described herself as having a "mother hen attitude"... "This is what I do best... help people and take care of them..." Natasha established a close bond with her classmates and committed herself to helping whether it involved acting as an advocate and presenting a class petition, studying with struggling students, or listening and supporting those going through tough times.

Motivation to become a nurse

The goal of becoming a nurse lingered in Natasha's mind throughout her life. Natasha's interest in nursing arose from a childhood experience in the hospital following a head injury. The quality care provided to her by the nurses and her doctor remained a distinct memory. "I don't remember how serious it was... But I remember that they were always so friendly and so nice... and that they were there all of the time." As she grew older Natasha's interest in the medical field persisted, leading to a hobby of collecting and reading medical books.

During her marriage to a member of the motorcycle gang, Natasha struggled to hold on to her dream. "Every time I got set and wanted to do something I couldn't...I went and got my high school education behind my husband's back." Unbeknown to her husband, Natasha also took accounting courses and eventually obtained her C.P.S.. "He didn't want me to succeed." Natasha did not abandon her childhood goal in the period after she left her husband and began working in the accounting field. Successfully completing a nursing program became a personal challenge.

> "It's something that I was told I couldn't do...I was abused by my husband...I wanted to do it before... 'Oh you are stupid, you can't do it, you can't do nothing...you'd make a lousy nurse...blah, blah, blah...'"

Natasha eventually chose to quit her job as an office manager and enrol in a diploma nursing program. "I just looked out the window...my divorce was going through... I had two little kids to look after...and I said, 'I'm going to apply, and if they accept me I'm quitting...'" Obtaining her nursing certification also presented itself as a step towards another goal for Natasha - opening a street clinic for the under privileged.

> "There's a place for you to go and get help. No one wants to know your name, it's just a place to try to help you. That's my dream! ... I need this paper to open that kind of business... I already have the business end of it... I have the accounting end of it..."

Although she faced many challenges and obstacles as she progressed though the nursing courses, Natasha's motivation to complete the program did not waver.

> "... if I didn't finish the program, I would be eighty years old or sixty and dying on my bed an I would have been mad at myself because that's what I wanted to do...and if I didn't go ahead and get it I would have regretted my life up until that point."

Obstacles to success.

Examination of Natasha's passage through the nursing program revealed numerous obstacles that she endeavoured to overcome. Natasha found herself struggling to cope with stressors in her personal life as well as difficulties arising from within the nursing program.

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Personal stressors

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As she progressed through her first two years in nursing, Natasha managed to cope with the stress involved with living as a single parent, caring for her three children and others as the need arose. When she reached her fifth semester in the third year of the nursing program however, Natasha found herself facing overwhelming personal stressors. The responsibilities of caring for her children as well as her two siblings became staggering at a time when Natasha was diagnosed with a chronic illness.

> "I didn't know I was sick...very tired and very sick... plus that was when my brother had first come to live with me...that's when my sister got out of the hospital and I was looking after her...and that's when my final divorce papers were going through... Plus my daughter had been diagnosed with a seizure disorder and she kept me awake many nights in a row having seizures...and my son got diagnosed at the same time with hypothyroidism."

These stressors continued to escalate until Natasha's initial withdrawal from the nursing program.

When she returned into the fifth semester on her second attempt in the nursing program, Natasha's life remained in a state of havoc. Natasha continued to manage care for her sister who was released from the hospital during that time. "No one would take her so I ended up taking her." Although her divorce had been finalized, Natasha's life continued to be disrupted by her past husband. The stabbing, hospitalization and near death of her brother also served to strain Natasha's ability to cope to the limit.

Natasha's personal life became much more settled during her successful third experience in the nursing program. Although her father underwent major surgery during that time, the turmoil that had disrupted her past had settled. Natasha acknowledged that she had faced many challenges yet she denied that her life had been difficult.

> "No... when I look at the people on the floor and the people I deal with I always say thank God I didn't have a life like they did....because there's always someone worse off than you... And I haven't been through a lot. I've been through a learning experience. That's how I look at it."

Obstacles within the nursing program

During her initial fifth semester, the personal difficulties that Natasha encountered began to impact upon her performance in the clinical area. Natasha sensed a lack of sensitivity by her clinical teachers to her situation.

> "The teachers were not very understanding... They were blaming me because my skills sucked and they wouldn't let me explain to them why I'd been away... So I had two weeks of hell...it's hard to meet everything at home and come to school and perform your best."

Natasha accepted the recommendation to withdraw from the program. During the following semester, Natasha underwent surgery and began taking additional non-nursing courses at the college. Upon application to return to the fifth semester class in the following year, Natasha met resistance. She recounted assuming that she would be able to return to the semester that she had withdrawn from and denied receiving a letter from the college that was to indicate to her how she should return to the program.

> "N said, 'Oh, you have to go back to semester four...everybody who comes back has to go to semester four.' And I said, 'Hell, I'm paying for O.S.A.P. and that's bullshit...I passed semester four, I got A's, I've already got the clinical, I'm not going back to semester four.'"

Natasha was eventually granted entry into semester five for the second time however on this occasion she entered under a clinical contract. "Yeah. That was the only way they

would let me into semester five...if I signed this contract... One mistake and I'm

out...and I thought...that is bull shit." Natasha described her predicament at that time...

"From that point on I got sabotaged...because I didn't do it the way they wanted me to do

it." Natasha proceeded through the semester with a high level of stress. "So I was

always asking everybody everything...always second guessing myself...always doubting

myself." During the second last week of the semester, Natasha faced a disturbing

encounter with one of her teachers.

> "...The pre RNs (exams) were the very next week. And N came up on the floor
> the second last day of clinical to tell me I wasn't proceeding any farther because
> there was a problem with my skills as far as T was concerned... My clinical
> teacher at that time."

Because of her clinical contract, Natasha felt angered and helpless.

> "There was nothing I could do to fight it...if there is a problem with someone's
> skills...you know after two weeks on the floor... You tell them in the beginning.
> Not two days before the end... 'Oh, by the way... ha, ha... You didn't do what you
> were supposed to do! Bye, Bye...see you' ...It was a shock."

Although she received a letter asking her to resign and consider not returning to the

program, Natasha persisted in her struggle and chose to initiate an appeal. The appeal

process resulted in a decision to allow Natasha to return to the program – this time

however into the fourth semester.

> "Yeah, I came back. And I came back into semester four. So I did semesters one,
> two, three, four, five – semester five – semester four, five, and six now...and I
> have to pay for it every cent... I don't think that that was right."

Natasha discovered that her teachers at this time appeared more sensitive to her needs

than they had in the past.

> "E said, 'You might be fumbling around a little bit with your dressings. I think
> that you should go to a couple of extra labs.' That's what they should be saying.
> Not giving you a letter at the end saying that you're unsatisfactory in your skills
> and if we find you screwing up you're out of here."

As she progressed through the program for the third and final time, Natasha remained very wary of her teachers' motives. Clinical placements remained very stressful.

> "There were a lot of days I was stressed out...I was scared to ask staff because they'll think I don't know. And they're going to kick me out because I don't know... I felt I had to be better than everybody else to prove that I could make it through."

Success in the nursing program.

As Natasha overcame her obstacles, her dream of success in the nursing program appeared within grasp. In order to achieve this success Natasha found it necessary to play "the game" and draw on all of her sources of support.

<u>Playing "the game"</u>

During her third attempt in the nursing program Natasha discovered what she believed to be the key to her success. " I changed attitude... That's all I changed...I didn't change my skills." Natasha insisted that her clinical performance had been satisfactory when she was last asked to withdraw. "There's no doubt in my mind. I wouldn't have got offered a job already on 7R ... and the nurses wouldn't have given me all the stuff that they're giving me if I was stupid..." Rather than challenging and questioning her teachers, Natasha became more passive when interacting with them. "That's human nature... When you feel threatened or challenged you challenge back... Don't rock the boat...Yes sir...Yes mam." Natasha found that her teachers responded positively to this change in behaviour. "I've had them all come up to me... 'Oh my God. We can't believe that you're the same person as you were before... You're skills are so marvellous now.'... I've done everything exactly the way I did last time, only without the attitude." Natasha continued to play "the game" and maintained her change in attitude as she successfully progressed to the end of the nursing program.

Sources of support

The support that Natasha received from both within and outside the nursing program proved to be her lifeline. Support received from within the program arose primarily form classmates Natasha met during her first year at the college. External sources of support included Natasha's parents, her babysitter, friends and neighbours, and most notably, her fiancé.

Support from within the nursing program

Natasha felt a strong connection with others in her class during her first experience in the program.

> "We had the best class ever...there were only four that didn't associate with the whole group." The social bond that existed within the class remained strong as time passed. "We used to get together at my home...lots of tears...lots of stories... We did lots together...They'd always be there on the other end of the phone...We're still a good group! They were all at my shag... They're all coming to my wedding...I mean it's been five years... I think they're your friends if they're still there."

Those within the class unit also strived to help each other achieve success.

> "It kept a lot of people that probably would have quit. If they had nowhere else to go...We helped each other do papers. Sometimes you need help just to make something make sense...We all pulled W through as far as we could. We had lots of sleepless nights trying to pull him up there..."

Leaving her first class and re-entering twice with entirely new groups of students required an adjustment for Natasha.

> "I don't even know who anybody in the class is this time... I think it's because when you start off together.... You go through all of that stress and stuff together...and coming back after...they've already built their friendships and their trust."

Other than a relationship that she maintained with a former classmate who had

also re-entered the program, Natasha remained relatively isolated during her final year.

At the beginning of her final fifth semester Natasha found it necessary to assess her inner

desire to help this student.

> "...Let's try to help somebody who's not quite making it through... and it started
> to drag me down and I sort of had to let him go. I said to myself, 'I'm not going
> to do that anymore'... it burns me out."

Natasha came to the conclusion that it was necessary for her to focus all of her energy

upon herself and her own personal goal.

> "I said, 'This is me... I've got to get through this... It's the give or break... you
> can't go back again... So this is my time... Just to do it for me.' So I just studied
> myself. Did it myself."

<u>Support received outside the nursing program</u>

The support that Natasha received from sources external to the nursing program

became instrumental in her eventual success. Natasha's parents remained a dependable

source of support throughout her experience. "My mom and dad are great...Take my

kids for me... They're always there..." Continual assistance from her babysitter enabled

Natasha to tackle the demands of school and personal obligations. "She brought them

up... She is so much like me that I trust my kids with her...She's really a good person...

Treats my kids like they're hers." When Natasha required their help, friends and

neighbours were also consistently there for her. "When I needed money or quick

babysitting... we'd run over. We still run back and forth."

As Natasha established her relationship with her husband-to-be, security and

stability began to envelope her and her family. With tears in her eyes, Natasha described

the effect Adam had upon her life...

> "He's been great...My kids love him...He works hard, He goes in every day...He
> drops me off at the hospital and goes to work...No matter how tired he is, the

coffee pot is always on before I get out of bed and the car warmed up... For two years he's been doing that and at night time I come home... Supper is always made, the kids are always in the bath... everything is always taken care of... I'm not used to that..."

As Natasha endeavoured to complete the nursing program, Adam's unrelenting support urged her onward.

"My whole last year has changed... I don't know if I would have put as much enthusiasm into it... I just would have sat back and went through... but my fiancé... "I believe in you... you get going... you're going to be late... get up... you have to go... get up!" Yeah... it means a lot.""

Conclusion.

Although Natasha encountered many experiences in her life, making the dream of becoming a nurse a reality presented itself as one of her most challenging endeavours. Natasha's strong motivation to continue as well as the endless support of those around her enabled her to finally accomplish her goal. As she crossed this milestone in her life Natasha was finally free to set her sights on the future. A summary of Natasha's story is portrayed in Table 10.

Table 10. Themes and reflections - Natasha

Data Clusters	Isolated Themes	Reflections
Becoming a nurse	Helping others	"This is what I do best... help people and take care of them..."
	Motivation to become a nurse	"It's something I was told I couldn't do..." "... and if I didn't go ahead and get it I would have regretted my life up until that point."
Obstacles to success	Personal stressors	"... I've been through a learning experience. That's how I look at it."
	Obstacles within the nursing program	"There were a lot of days I was stressed out...I was scared to ask staff because they'll think I don't know. And they're going to kick me out because I don't know..."
Success in the nursing program	Playing "the game"	"I changed attitude... That's all I changed..."
	Sources of support	"I don't know if I would have put as much enthusiasm into it...but my fiancé... 'I believe in you...you get going...you have to go...' Yeah... it means a lot."

Destiny's story

This segment outlines the experiences of Destiny, a Registered Practical Nurse who chose to continue her education in order to obtain her diploma in nursing. With a strong sense of motivation and the support of those around her Destiny met the challenge of working full time, caring for a newborn child and coping with the demands of the nursing program. Destiny was initially slightly hesitant and required some prompting to share her experiences during the first conversation. As she became more comfortable, Destiny was

able to candidly share her thoughts and experiences in a light- hearted manner. As she

conveyed an acceptance of her circumstances in life and her ability to adapt to them,

Destiny's chosen pseudonym appeared very fitting. The following data clusters emerged

from the conversations with Destiny: becoming a nurse and the diploma nursing

experience. Prevalent themes within these clusters will be explored. (See Table 11)

Table 11. Data clusters and isolated themes - Destiny

Data Clusters	Isolated Themes
Becoming a nurse	Motivation to enter nursing
	Returning to become a Registered Nurse
	Further education in nursing
The nursing student experience	Returning as a Registered Practical Nurse
	Stressors
	Sources of support

Becoming a nurse.

As Destiny's story unfolded, an unshakable attraction towards becoming a nurse

became evident. Destiny's initial motivation to enter nursing, her return to become an RN

as well as her plan to continue her education can be seen as stepping stones along her

path into the field of nursing.

<u>Motivation to enter nursing</u>

As she approached her high school graduation, Destiny faced making decisions

regarding her future. "I was young at the time, I was eighteen...I didn't know what I

wanted to do." Being denied admission to the nursing program at the community college

redirected Destiny's focus and prompted her to make the decision to enrol in a college

accounting program. As she worked in the accounting field following her graduation however, Destiny found herself dissatisfied. "I worked for the summer for C.C. ... Didn't really like it...it was a going nowhere kind of job..." Seeing a shortage of nurses in the community at that time, Destiny began to again entertain thoughts of becoming a nurse. "There was a need for nurses. There was not that many people coming into it. So that's why I decided to go into the RPN program." Destiny's family was supportive of her decision. "My family is all into health care... They said, 'Oh, you should go back and be a nurse.'" With some indecisiveness still lingering in her mind, Destiny chose to enter the RPN program rather than the RN program. "I took the RPN program because I wasn't sure if nursing was the thing I want to do as well... I thought... Nah, I want to get finished with school because I want to get out and working."

Returning to become an RN

After working for approximately one and a half years as an RPN, Destiny's thoughts of completing her diploma in nursing began to rekindle. The "stigma" associated with being an RPN as well as a desire for future job security motivated Destiny to apply to the diploma nursing program.

Destiny sensed a "stigma" of inferiority as she practised as an RPN.

> "My main reason for going back was that I didn't like being in that role anymore... It's pretty bad when patients say, 'Can you go and get me a nurse?'... 'Ok.' And sometimes you're there with the patient a long time too. And you're doing the care. You're getting them up, mobilizing them. You see them more on a personal basis. You know more assessment wise. Sometimes more than an RN that's giving out meds and doing all the paper work..."

The behaviour of practicing RNs as well as RN students who Destiny encountered further reinforced these feelings.

"They think that they're above the RPN level... I don't know what to call it... Grad-itis... I don't feel that way personally... but yeah, I feel a certain stigma about it. And that's really too bad because you know what? Without a good RPN your job could be a lot worse."

Destiny felt motivated to accomplish more with her life and began to entertain visions of returning to college to obtain her diploma in nursing. The encouragement of her boyfriend at that time also spurred Destiny toward achievements beyond the RPN level. "'He comes from a family of LPNs [Licensed Practical Nurses synonymous with RPN] and he says, "Oh, no, you should go back and be an RN." He's another one. There's a different stigma attached to it.'" Destiny's mother, who viewed the RN role as more prestigious than that of an RPN, further influenced her decision to return to college.

"Mom goes, 'It's a different type of work when you're an RN.' Its a different, I guess, stigma attached to it. So I guess what she was saying... I shouldn't really say this... but it's something to be proud of."

Prompted by encouragement from and the attitudes of those around her, Destiny eventually made the decision to continue her education and began to aim towards her goal of becoming an RN.

During the period that Destiny worked as an RPN, she reviewed the status of the health care system and foresaw an eventual decline in potential job opportunities for herself.

"It goes in cycles too... and eventually I personally think they're going to get rid of the RPN role or change it all together... They'll get rid of that person and pay somebody a lot less to do the same job."

In contrast, Destiny recognized a constant need for RNs. "And you're always going to need an RN right? I find a huge difference between what they know as for knowledge and assessment and stuff like that." In addition to limitations in job availability, Destiny felt that the settings in which RPNs were able to practise were also limited. "There's no

real chance of really moving around... Long-term care is there but you get bored doing long-term care as well. And it wasn't really going anywhere... It's a going no where job..." Destiny eventually chose to alter her future and decided to seek the security and flexibility that she desired by returning to school to become an RN.

<div align="center">

Further education in nursing

</div>

As Destiny approached the end of the diploma nursing program she began to set sights upon a new goal – becoming a nurse practitioner. Destiny believed that she had gained new insight into the operation of the health care system during her practice as a diploma nursing student.

> "I don't like the new health care system. You're always working short staffed. I find it unsafe... You're doing the deeds of nursing...not really doing nursing...you're doing all the skills and following all the orders...but you're not really there with the patients."

Destiny became more cognisant of the high levels of responsibility shouldered by RNs as well as their relative lack of power within the system.

> "More responsibility...I find more responsibility is lying on top of the nurse than it is on top of the doctors. I don't know if it was like that before and I just never realized it...It's always on the nurse to do everything. To coordinate everything. Even talk amongst doctors...a hundred doctors that are too overworked that don't respond back to you...it's kind of frustrating."

Destiny viewed working as a nurse practitioner as her opportunity to practise nursing as it should be practised. "I don't know for sure...I think you would have more time with one on one...Depending on where you work as well too...Maybe getting off a floor and maybe doing something in the community." The opportunities available to nurse practitioners were also attractive. "That would give me hopefully more opportunity depending on where I work. I mean start Monday to Friday hopefully, depending on what kind of clinic you work at or what you plan to do."

The nursing student experience.

Destiny's unique experience as a diploma student nurse became evident as she gave an account of the impact of being an RPN, the stressors she encountered, as well as the sources of support that sustained her.

Returning as a Registered Practical Nurse

Possession of the knowledge and skill of an experienced RPN proved to have a varied effect upon Destiny's experience in the diploma nursing program. As Destiny returned to college to continue her education she found herself harbouring lingering feelings of regret.

> "You get comfortable in saying, 'This patient has a problem.' Go to the RN and say, 'This patient's not feeling good.' And go for coffee... You get comfortable not having that responsibility. It was very hard and sometimes I still regret it. I had such a wonderful job!"

Destiny's past experiences as an RPN also fostered feelings of self- doubt as she began to assume the role of an RN. "You start...like doubting yourself. You start saying... 'Oh, I won't be able to do that...I couldn't do that...' I think you also get stuck in a rut there... You don't think personally you can do it." Destiny began to realize that the close relationships she had with her patients as an RPN could not exist to the same degree when she became an RN. "I used to be able to talk to my patients, spend time with my patients... I found that you don't have very much of it." Destiny described her job as an RPN as relatively comfortable. "I did everything I could... I never had the feeling that I forgot something or that I omitted something or that I didn't have time to spend with a patient." As she entered the realm of the RN, Destiny encountered much higher levels of pressure to perform. "There's a lot more stress. People are getting sicker... I go home thinking of what I didn't do or what I could've done better."

Destiny's background as an RPN placed her at an advantage in both the theoretical and practical components of the RN program. The learning that took place while practicing as an RPN proved invaluable.

> "You see a lot more. Actually you learn a lot through observing. And you then learn a lot through what you hear. And you hear lots... sometimes you know certain drugs and what they do...And you know policy and procedure...a big thing I find."

As she made the transition to the role of the RN, Destiny discovered that she was able to build upon the foundation of knowledge she had gained as an RPN. "You're comfortable with basic things so you could focus on more important things." The organizational skills that she acquired as an RPN also benefited Destiny as she began to practise as an RN. "I think I would have been a lot worse off if I hadn't...(worked as an RPN)... You learn as you go."

Despite the advantages of being a returning RPN, Destiny concluded that she would have been better off progressing through the diploma program from the beginning and avoiding the difficult adaptation to the RN role. "It would have been less difficult if I had stayed in it and did it from the beginning." Destiny attributed her apprehension and caution about working in an acute area to her familiarity with the realities of the health care setting that she gained as an RPN. "Sometimes ignorant is better...Just going into it... Because you don't know anything...if you're ignorant you're willing to go there and take a chance and just learn from scratch." Although she realized that she was just as capable of working in critical care areas as her classmates, Destiny chose not to follow that course. "There is no reason why I shouldn't. But...I just don't find it...No...I just see a potential for problems."

Stressors

The demands of the program as well as the birth of her child during her final year became major obstacles that Destiny struggled to overcome. Although she found the theory content in the fourth semester the most challenging, the fifth semester in Destiny's final year presented itself as the most stressful phase in the diploma program. The clinical component during this period proved to be extremely demanding "I found that everything was kind of just thrown at you…like… here do everything now. When we came in to fifth semester, we were on medical and surgical. It was a shocker." A large comprehensive assignment as well as the pre RN exams at the end of the fifth semester also contributed to Destiny's high level of stress. Destiny's life outside of the nursing program was not devoid of stressors during that same difficult period. As Destiny began her fifth semester in the third year of the program, she gave birth to a daughter. "It was a stressful thing and I didn't have much time to do anything else…so that time it was just school and the child." Following the successful completion of her fifth semester and progression through her sixth semester preceptorship experience, Destiny's stress level remained high.

> "You're trying to learn lots because in a few month you're not going to have anybody to back you up as in always being there…You're trying to get in everything that you can during this small amount of time."

Support

The support that Destiny received from various sources enabled her to cope with her stressors and empowered her to continue in nursing. Destiny's primary support arose from sources both within and external to the nursing program.

Support originating from within the nursing program

During Destiny's first experience in nursing, she became a member of a class that maintained a strong sense of camaraderie and support. "The first year was common so it was the RNs and the RPNs and we socialized a lot! We went out together on weekends...We all kind of helped each other." The bond that Destiny established with this group remained intact after she graduated from the college as an RPN. "I'm still in contact with people that were in that class." As she entered as a newcomer into a second year diploma class Destiny faced an entirely different group. "The nursing class this year actually...to tell you the truth. Everybody was for themselves." Destiny resorted to working on her own.

> "I came into second year. So I didn't really know too many people in the class and didn't really have time to get to know anybody in the class...I just kept to myself and did my own work...Did my own thing."

An obvious lack of support within this group became vividly apparent following the pre RN exams in Destiny's fifth semester.

> "After the first exam...after the first write...we were trying to get together all the topics that were on the exam. And there were a set of people that really didn't want to give that information out. And I couldn't figure out why these people were kind of not doing it....And actually what goes around kind of comes around because...ha, ha...some of those people were looking for those questions after!"

Destiny valued the support she received from teachers especially during the periods leading up to and following the birth of her daughter.

> "That was the biggest hell I ever went through. But...I figure...if I don't do it now I'm never going to come back and do it. Plus the teachers were quite supportive during that time...I didn't think truthfully that they would be that supportive...for somebody coming back pregnant."

Destiny attributed her teachers' willingness to accommodate her for assignments and absent time to her recognizable motivation to do well in the program.

"I think that teachers know who is motivated, who wants to do it and who is doing their best at something. And they will support you if you are trying. If you're not, I don't think they have the time of day for you... because if you don't have a motivated student, how are you going to have a motivated nurse?"

Personal support

The steadfast support received from her mother became instrumental in Destiny's success throughout the nursing program.

"I still live with her... and before I was pregnant she knew I was working and she was quite supportive as in letting me sleep all day. Working and studying... she would never disturb me. She'd kind of leave me alone to study. She never put any pressure on me to do other things. It was just school and work that's all she wanted."

The assistance that Destiny's mother provided became vital following the birth of her child. "I don't think I could have did it without her...She's still very good. When I was in the last semester...she watched the baby while I was typing up my paper. And I had a colicky child." Destiny's mother continued to baby-sit and attend to household tasks allowing her to remain focused upon school and work responsibilities. The emotional support received from both Destiny's mother and boyfriend also served to consistently motivate her to persist in the nursing program. "My mother was... 'You've got to do it, you've got to do it!' My boyfriend was the same thing... 'You've got to do it, you've got to do it!' So I was kind of forced into doing it!"

Financial support

Destiny maintained a strong work ethic and financially supported herself as she completed her education. While in the RPN program, Destiny lived at home and worked at two part time jobs.

"Yeah, so it was a little bit tough, working and going to school but I kind of had to do it because I had an expensive way of life. I liked going on vacations and stuff like that so I had to work."

While in the diploma program, Destiny managed to completely finance her education and lifestyle by working full time as an RPN. "I just kind of squeezed it in here and there...it was hard though." Destiny endeavoured to work as many hours as possible during the last months of her pregnancy in order to obtain the maximum maternity benefits... "And then I found out I was pregnant during my last semester and I wanted my maternity leave to be high. So I had to put in more." Destiny continued to coordinate school and childcare demands during her paid maternity leave from her RPN position. "I think I've aged ten years since... Didn't have much time for a great social life. But I had to deal with priorities."

Conclusion.

Driven onward by the support from those around her, Destiny managed to reach her goal of becoming an RN. Her success in this challenging endeavour became a motivating force that prompted Destiny to set additional goals and embark upon yet another journey into the field of nursing. A summary of Destiny's story follows in Table 12.

Table 12. Themes and reflections - Destiny

Data Clusters	Isolated Themes	Reflections
Becoming a nurse	Motivation to enter nursing	"There was a need for nurses. There was not that many people coming into it. So that's why I decided to go into the RPN program."
	Returning to become a Registered Nurse	"My main reason for going back was that I didn't like being in that role anymore..."
	Further education in nursing	"I don't like the new health care system. You're always working short staffed. I find it unsafe...You're doing the deeds of nursing... not really doing nursing... you're not really there with the patients."
The nursing student experience	Returning as a Registered Practical Nurse	"You see a lot more. Actually you learn a lot through observing. And you then learn a lot through what you hear." "You're comfortable with basic things so you could focus on more important things."
	Stressors	"It was a stressful thing and I didn't have much time to do anything else... so that time it was just school and the child."
	Sources of support	"I don't think I could have did it without her...She's still very good. When I was in the last semester...she watched the baby while I was typing up my paper. And I had a colicky child."

Findings part two: Emergent themes

The following chapter includes a synthesis of data that emerged from conversations with all of the subjects in the study. Several sources of motivation manifested their influence at varying levels throughout the entire journeys of each of the subjects. Obstacles to success as well as support from various sources appeared as visible forces during both the initial and returning experiences. Subjects attributed the achievement of their goal of success in the diploma program to a variety of interrelated factors. Findings will be presented in accordance to the following data clusters: motivation, obstacles to success, support, and success in the nursing program (see Table 13).

Table 13. Data clusters and emergent themes – All subjects

Data Clusters	Emergent Themes
Motivation	Motivation to enter nursing
	Motivation to return to nursing
	Motivation to continue post diploma education in nursing
Obstacles to success	Financial demands
	Personal and family obstacles
	Feelings of exclusion
Support	Intra-institutional support
	Support from external sources
Achieving success in the diploma program	Returning as a Registered Practical Nurse
	Time management
	Persistence
	Self-confidence

Motivation

Motivation related to the pursuit of the goal of becoming a nurse and persistence in efforts to do so remained strong throughout the journeys of each of the subjects. Subjects drew upon variable motivating forces as they progressed along each stage of their journeys through the nursing program. This study reveals an intermingling of both lower and higher level needs in Maslow's (1970) hierarchy as well as of Bosheir's (1973,1977) "life-space", "life-chance" orientations and suggests a more fluent view of individual motivations that encompasses a range of coexisting sources of motivation. Tinto's (1987) model argues that a loss of individual commitment and motivation results in withdrawal from educational programs. Findings in this study reveal that withdrawal from a nursing program is not synonymous with a loss of motivation. Variable motivating factors continuously persist throughout a returning student's entire experience. The degree to which each factor influences motivation at any specific moment during each of these journeys varies in accordance to personal uniqueness and existing circumstances. Exploration of these sources of motivation during the pre-enrolment, re-entry and post-graduation periods follows.

Motivation to enter nursing.

Although Boshier (1973,1977) proposes two categories of individual orientation, "life space" and "life chance", orientation of each of the subjects prior to entry into nursing extended beyond the realm of these two categories. In addition to a "life chance" orientation, including the pursuit of financial security, subjects were additionally motivated by a "life space" orientation that encompassed personal aspirations and the

desire to nurture others. These findings blur Boshier's distinction between these two orientations. Initial sources of motivation for subjects choosing nursing were found to encompass family influences, past experiences, efforts to establish financial security, as well as personal aspirations.

<div align="center">Family influences</div>

The significant impact of family influence upon motivation to enter nursing was clearly evident in conversations with Tina, Destiny and Natasha. The significance of family influences, as is visible in both Destiny and Tina's experiences, is also identified in Munro's (1981) work which reveals a relationship between aspirations and commitment of parents and students and success in higher education. Tina's decision to enter the field of nursing evolved from the observations she made as she watched her father, a practicing physician. Tina felt inspired by him. "I wanted to do what he was doing...be in the same field...I decided to get into nursing." After becoming aware of the disturbing circumstances leading to the death of her father, Tina felt further motivated to become a nurse. "And when I become a nurse I'm not going to be like that towards a patient never mind who it is...I wanted to make it right." Encouragement from Destiny's family was also instrumental in motivating her to enter nursing following an unsatisfying experience working in the accounting field.

In contrast, findings arising from conversations with Natasha suggest an inverse relationship between negative family influences and motivation. A lack of support and encouragement from family thrust Natasha on a parallel path. "It's something that I was told I couldn't do... I was abused by my husband... I wanted to do it before... 'Oh, you are stupid, you can't do it, you can't do nothing...you'd make a lousy nurse.'"

Consequently, Natasha's consideration of a future in nursing became a personal challenge.

Past experiences

My findings support the significance that Malcolm Knowles (1990) attributes to initial perceptions and their impact upon the response to learning. Memories of positive past interactions with practicing Registered Nurses sowed an interest in nursing for both Beth and Natasha. Beth's experience as a new mother in the hospital made a significant impact upon her future. "This RN that was looking after me...She was just as young as I was. And I just kept her in the back of my mind and finally I got into the program." Natasha's attraction to nursing began at an early age following a lengthy hospitalization... "I remember that they (nurses) were always so friendly and so nice...and that they were there all of the time." The positive perceptions of nurses held by these subjects motivated them to eagerly begin an education in the field of nursing.

Financial security

The drive to establish financial security that emerges in the findings corresponds with the needs of individuals positioned at the safety and security level in Maslow's (1970) hierarchy. Although other motivating factors contributed significantly to individual decisions to enter nursing, achievement of this initial step in the hierarchy became a definite priority for the majority of the subjects.

The pursuit of financial security served as a strong motivating factor for Janet. As she contemplated entering the college nursing program, she was vividly aware of her lack of options. "I knew I had to succeed because my son's future and our destiny...it was either finish school or face a life of poverty." Robin, Tina, Destiny and Beth also

recognized the positive impact that an education in nursing would have upon their future. Tina described the rationale she used to make her decision, "When I looked into the nursing field I noticed there were much more opportunities…a higher salary, much more you can do…so that made me decide…now stop right here. I'm going to school."

Personal aspirations

Natasha's decision to become a nurse evolved from a history of reaching out to care for others. "This is what I do best…help people and take care of them." Becoming a nurse presented itself as one step toward her dream of establishing a street clinic for the underprivileged. This sense of altruism corresponds to needs within the higher levels of Maslow's (1970) hierarchy. A desire to meet higher level needs within the hierarchy was found to exist concurrently with lower level needs in the cases of Tina and Robin. In addition to a need for security, an inner desire to nurture others motivated each of them to enter the field of nursing. Tina saw the opportunity to provide care for others as a potential source of personal satisfaction. "I love working with people…when you can help someone out and make a difference in someone's life." Robin also placed high personal value upon the relationships he would be able to establish as a nurse.

Motivation to return to nursing.

Sources of motivation to return to nursing were found to remain relatively consistent with those identified as sources to enter nursing. Although evidence of the presence of all identified motivating forces was evident, the drive to establish financial security remained a priority need. A desire for personal growth also provided a strong incentive during this period.

Circumstances by which each departure and return to nursing occurred varied among subjects in this study. Destiny and Robin returned to the diploma nursing program following a period of employment as Registered Practical Nurses. Although she had graduated from an RPN program, Janet chose not to practise in that capacity. She eventually re-entered nursing and after one unsuccessful attempt in the diploma program, chose to enrol for a second time. In response to academic difficulties in the diploma program, Beth chose to transfer into the Practical Nursing program. Following employment as an RPN, Beth re-entered the diploma program and continued to pursue her goal of becoming an RN. Absenteeism related to an illness prompted Tina's withdrawal from the college. Upon an improvement in her condition, Tina returned to the diploma nursing program. In addition, Natasha faced two forced withdrawals that corresponded to two subsequent re-entries into the nursing program.

Financial security

The returning RPN students, Destiny, Janet and Robin in particular, voiced a continued desire to secure themselves financially. Destiny felt insecure in her position as an RPN. "... Eventually I personally think they're going to get rid of the RPN role or change it all together...They'll get rid of that person and pay somebody a lot less to do the same job." The instability surrounding his position as an RPN also prompted Robin to continue his education. "I came back again this time because the H.L. is closing...its another financial move." The decision to become a Registered Nurse created a conflict between Robin's desire for financial security and his desire to nurture others.

> "I have mixed feelings about it... in my mind I say, 'Yes, its a good thing...'
> but in my heart I say, 'Oh jeeze, you're just a regular guy.' I have a whole

agenda of things in order to obtain a full time job... I was happy being an RPN, liked my job, I liked talking to the patients. I liked doing different things with them. Where as an RN, I can see that I'm not going to have the time to do that."

The birth of a child and expansion of her family proved to be the impetus for Janet.

"Yeah, I've gotta do it. I've gotta do it for my family."

<u>Personal growth</u>

Although job security remained an issue for Destiny and Robin, a desire for personal growth also motivated their return to nursing. Destiny viewed being an RN as an escape from the "inferior stigma" associated with being an RPN. "My main reason for going back was that I didn't like being in that role anymore... It's pretty bad when patients say, 'Can you go and get me a nurse?'" Robin was attracted to prospects of expanding his personal horizons. "You can only go so far as an RPN. You can't really progress as far as I'd like to go... it's going to open up some doors for me...I'm going to be able to move on."

Motivation to continue post-diploma education in nursing.

Earlier sources of motivation continued to impact upon all subjects as they made plans to pursue post diploma education in nursing. Although the demand for financial stability and personal growth continued to motivate Robin and Beth, the effects of altruistic intentions became more powerful for Janet and Destiny during the same period. As Janet approached her graduation from the diploma nursing program, a desire to help her fellow native people evolved as a motivating force. "Get a Bachelor's and then maybe a Masters or something else. Like health administration I was thinking..." As a diploma nursing student, Destiny gained new insight into the operation of the health care system. "You're always working short staffed. I find it unsafe... You're doing the deeds

of nursing... not really doing nursing... you're doing all the skills and following all the orders... but you're not really there with the patients." Destiny's desire to practise nursing and still maintain a close bond with her patients, became her motivation to continue her education with the new goal of becoming a Nurse Practitioner.

Obstacles to success

Each of the subjects encountered formidable obstacles on their journeys throughout the nursing program. Financial demands, personal and family obstacles as well as feelings of exclusion emerged as common themes within this data cluster.

Financial demands.

Findings suggest that high socio-economic status in not as critical to persistence in nursing as is the achievement of a financial position that meets basic needs. This view may explain Munro's (1980) inability to identify a relationship between socio-economic status and persistence in nursing education. The positive indirect effect of high socio-economic status, which was visible in other areas of higher education, was not evident in Munro's nursing student sample.

The impact of financial demands was evident during the experiences of the majority of the subjects in the study. During her first experience in the nursing program, Beth struggled to financially support herself and her child by working extraordinary hours at a minimum wage position. The time commitments related to meeting work and childcare demands negatively influenced Beth's academic performance and eventually lead to her withdrawal from the program. "Ugh... I'd be up until two, three o'clock in the morning studying. And I'd get up for six o'clock. And I just burnt right out. It wasn't going to work." Beth's experience reflects the negative relationship identified between lower

socio-economic status and student persistence by Austin and Panis (1968), Astin (1985), Porter (1989) and Benda (1991). These findings however are not applicable to Robin who managed to successfully support himself and handle academic requirements during his first experience at the college in the RPN program. "I've got nobody helping me out or anything like that. So it was difficult."

As they returned to the diploma program, Beth, Robin, Destiny and Janet faced coping with pressures of work in addition to school demands. As Registered Practical Nurses, Robin and Destiny struggled to maintain their full time positions while Beth and Janet continued to work part time. Despite time commitments involved with working, all of these students managed to successfully meet the requirements of the nursing program. Juggling program clinical hours and personal jobs became commonplace. Robin recalled working double shifts at one institution... "I'm lucky because I work on 44 at the hospital and I can slide down after my (nursing program) shift in the OR." The level of financial security achievable by working as RPNs, in contrast to lower minimum wage positions, had a positive effect upon the persistence of these students in the nursing program. The establishment of a reliable source of income enabled Beth to concentrate upon her studies... "I would have to work less so I'd have more time to study... Now it's work a couple of days and I have five other days to study."

Personal and family obstacles.

Results reveal a critical call to recognize personal life struggles as powerful determinants of student performance and persistence. The significant influence of personal and family environment upon success is also reflected in Jeffrey's (1998) work where nursing students cite family crises and responsibilities as severely to moderately

restrictive to their retention and academic achievements. Similar findings are also evident in the work of Bean and Metzner (1985) and Wiedman and White (1985) who examined the experiences of non-traditional students in higher education. Tinto, in his revised (1987) model of student attrition, includes "external commitments" as an additional variable influencing student withdrawal. Findings suggest that these commitments should be recognized as major elements in the decision to withdraw and that personal and family obstacles must be considered as key components within this category.

Findings expose the powerful impact that personal and family circumstances have upon the nursing student experience. Personal difficulties encompassing a range of obstacles including abuse, divorce, and childbirth to family and personal illness were cited by subjects as having an enormous impact upon their progression through the nursing program. All of the subjects, at variable points in their journeys, struggled to cope with the impact of these circumstances in addition to their college commitments. Upon their return to the college to obtain their diplomas in nursing, Destiny and Robin managed to overcome their personal obstacles and successfully complete the program. Destiny summarized this difficult phase in her life... "I think I've aged ten years since... Didn't have much time for a great social life. But I had to deal with priorities." The influences of personal and family difficulties however became instrumental in the eventual withdrawal of the remaining subjects. Janet described her struggle as she dealt with physical abuse, responsibilities associated with raising her child, and financial constraints... "I was kind of not really there... I had a lot of personal problems, a lot of personal issues and I couldn't focus on schoolwork properly but I tried to as best I could.

But still I wasn't... I was barely cutting it." Their ability to manage their personal life

struggles proved to have an intense impact upon the performance of all of the subjects as

well as their persistence and withdrawal from the program. Janet summarized her

perspective regarding this relationship...

> "If you don't have a stable personal life, no matter what your background...
> you can't make it in the program. Some do...manage to make it through.
> But for me I couldn't...until I had that stability in my personal life, that was
> the only way I could make it."

Feelings of exclusion.

Tinto (1975) identifies the lack of social integration as an integral factor in the

decision to depart from educational processes. Other studies by Christie and Dirham

(1990), Pascarella and Chapman (1983) also identify similar relationships between social

integration and withdrawal from college. A personal perception of exclusion from others

in their classes arose as a persistent theme throughout this study. The degree to which

these feelings influenced their experiences, however, varied among subjects.

Although other factors also contributed to her decision to leave nursing,

examination of Janet's eventual withdrawal through the view of Tinto's (1975, 1987)

model reveals an inability to integrate into the social system of the college. Janet's

intense feelings of being unaccepted played a primary role in her withdrawal from the

diploma program. As a member of a minority group within the class, Janet felt

isolated...

> "The discussion was about AIDS... Somebody was making a presentation
> in front of the class and ...they were talking about native people are the
> highest rate of people who are HIV positive in Canada...and this guy who
> was sitting at the next table over from me says... 'You're native aren't you?'
> and I go, 'Yeah.' ... And that was all I could say because I was so stunned...
> I just knew it was kind of a jab...an ignorant remark... it made me feel very
> unaccepted."

The exclusion experienced by the remaining five subjects did not occur during the interval before their departure as it had in Janet's case. Unexpectedly, the feelings of isolation surfaced during the return of these students to the nursing program. The support and camaraderie that Tina, Destiny and Natasha were accustomed to in their initial classes was strikingly absent when they returned and became part of a new class unit. These unexpected circumstances disturbed Tina immensely...

> "No one included me. No one asked me, 'Would you like to come in our study group?'... That was really making me sad... I just wish I was with my own class... There was a lot of communication going around... 'Where we would study tonight?' and 'Could you come over?' and no one ever asked me...and those were times that would really make me down. Sometimes I would go home upset about it... It's hard to deal with."

Although this sense of isolation within their new classes presented itself as a difficulty, it did not deter these students from achieving their goals. Adaptation to this new environment included opting to study independently. Tina described her response to her situation...

> "I know that sometimes you have to be your own best friend... you can do it... you have obstacles coming your way. You'll meet all kinds of people in this world... So I did it on my own... was my own friend. I studied on my own... I won't let anything come in my way."

Although Tinto's model does not extend into the re-entry phase of a departing student's experience, it does aid in understanding the perspectives of these returning students. As social integration became impossible, these students, by necessity, focused upon the academic domain and eventually were successful. Despite an absence of the advantages of social involvement and integration identified by Tinto (1975, 1987), Pascarella and Chapman (1983), Astin (1985), Christie and Dirham (1990), Benda (1991), Ashar and Skenes (1993), and Liengler (1997), these students managed to

succeed in their programs. Findings suggest that although academic and social involvement and integration do play a role in the student experience, integration in both of these areas is not integral to student success.

Numerous studies including Tinto (1975), Pascarella and Terenzini (1978), Astin (1985), Campbell and Davis (1996), Liegler (1997), and Liu and Liu (1999), identify the positive impact of quality student and faculty interactions upon student retention. Findings in this study reflect the consequences of an absence of these positive interactions. A sense of being excluded and treated differently by teachers emerged from conversations with Janet and Natasha. Both these students shared perceptions of an absence of trust and support from their teachers which contributed to their departure from the program. Janet recalled a situation in which she was assigned to work with a group...

> "They (the group) blamed it on me... they kind of banded together... The teacher wasn't very supportive either... She put more homework on me! ... I felt I was being punished for something I didn't even do... I kind of lost all hope with that... so I decided to drop out after that."

Support

The influence of support surfaced distinctly throughout the experiences of all the subjects. Tina's impression of the impact of support upon the student experience captures the essence of this data cluster ... "I think if a person really wants to do something they can do it... and there has to be some kind of a light that has to help them..." The support that sustained subjects in the study flowed from two different origins: within and external to their educational institution.

Intra-institutional support.

The personal experiences of the subjects reflect the previously discussed advantages of social involvement and integration within institutions. Primary sources of intra-institutional support identified by subjects include the support of fellow classmates, faculty, and partners in the tutoring experience.

Class support

The fact that class support did not directly relate to success in all circumstances suggests that a climate of support within the classroom promotes a satisfying learning environment that is a definite asset but not necessarily essential for student success.

Although the support of classmates could not prevent the departure of Tina, Natasha and Beth from the program, it contributed to a positive climate that encouraged them to persevere. Tina recalled her experience in her first class... "I felt that there was this group of supportive people with me...they were also in the same boat...we were working together." Although a similar relationship did not exist in the classes they entered upon their return to the program, the bond that these subjects established with others in their initial classes persisted following their departure from the program. Natasha described this relationship... "We used to get together at my home...lots of tears...lots of stories...We did lots together... They'd always be there on the other end of the phone...We're still a good group... I mean its been five years...I think they're your friends if they're still there." Janet's circumstances evolved differently. The support that she received from fellow native and non-native classmates when she returned into diploma nursing for the second time enabled her to work toward her goal without the upsetting emotions and feelings of exclusion she found in her previous class. "I felt...not

powerful, but accepted, more accepted for sure. But you know when you have more of your own kind you feel a little bit protected." Tina, Beth, Janet, Natasha and Robin voiced the importance of being able to relate to at least one individual in the class. Janet shared her observations... "My husband couldn't really give me that kind of support because he was only seeing it from the outside in. Whereas this other student was right along with me... for the whole thing."

<u>Faculty support</u>

The positive perceptions of these students regarding their interactions with faculty support the previously mentioned works of Tinto (1975), Pascarella and Terenzini (1978), Astin (1985), Campbell and Davis (1996), Ligler (1997), and Liu and Liu (1999), which identify the beneficial impact of positive student faculty interactions upon retention. In light of the impact of negative student faculty interactions discussed earlier, it is evident that faculty's control over the nature of interactions with their students can formidably affect student success or departure.

The positive influence of faculty support upon their experiences was evident in conversations with Destiny, Robin, Tina and Janet. Janet and Destiny both identified a tendency by their teachers to support the students whom they believed were motivated.

Destiny gave her perception of this behaviour..."And they will support you if you are trying. If you're not, I don't think they have the time of day for you... because if you don't have a motivated student, how are you going to have a motivated nurse?" Robin and Tina recalled the importance of faculty support in clinical areas. Robin shared his interpretation of the role of the teacher...

> "You also need that teacher too, because there's days when you're just frazzled...
> and you need that mother hen guidance to help you out... And that separates

good teachers from bad teachers... the ones that know... "Yeah, ok... I can see this person's struggling, let's help them out a little bit.""

Tutor partner support

The positive effects of assistive programs for nursing students that are identified in the works of Burdick (1996), Hesser, Pond, Lewis and Abbot (1996), and Lockie and Burke (1999), are supported by findings in this study. As partners in different tutoring relationships, Beth, Tina and Robin discovered mutual benefits for both tutors and tutees. Beth's success upon her re-entry into the diploma nursing program hinged upon the establishment of a solid tutoring relationship. Beth perceived the academic support received from her tutor as her lifeline... "It was a good thing... My marks started coming up... I had my first A...I started getting B's." As they provided support to their tutees, Tina and Robin were, in turn, themselves supported by these individuals. Tina recalled the impact support from her seven tutees made upon her sense of self-confidence during the period prior to her return to the program...

> "...and the students, it was amazing...they all said that we think that you should become a teacher. I said well, one thing at a time! But anyway, I think that was quite a boost for me. You know, it boosted my confidence, it gave me a positive look. I am going to go into fourth semester, I am going to be moving on, I'm not stopping right here!"

Robin's relationship with his tutee provided him with the opportunity to personally interact with another within his extremely busy schedule.

> "It gave me more social interaction that I kind of needed too... because I wasn't doing anything... I was just going home, reading, going to work and that type of thing. When you go and tutor with somebody, sometimes you go for coffee or something like that. You get the small talk. You get to meet somebody. You get to talk to somebody. So it's not that monotonous, everyday..."

Robin also described a personal sense of satisfaction in helping others. "And it gives you a good feeling to help somebody else...I mean why not? If you're going to study anyway, why not sit there and study with somebody else?"

Support from external sources.

Christie and Dinham's (1990) work suggests that interacting with non-institutional friends and family has a negative effect upon student social integration and persistence in college. Findings in this study reveal that although these interactions may negatively influence student social integration, they are integral to student success. Each of the subjects described the significance of maintaining a solid source of external support to carry them through their experience. The influence of this external support is surprisingly absent in Tinto's (1975, 1987) model of student institutional departure. Findings suggest that student lives extend far beyond the framework of institutions and that students will succumb to their obstacles and eventually depart from nursing programs if a form of secure external support is not established.

Support received from sources external to the institution at which the subjects were enrolled proved to be a positive force throughout their experiences in the nursing program. Support from family and significant others was found to have a profound impact upon the success of the subjects. Subjects also identified other sources of support, including coworkers and staff in clinical settings.

<u>Support from family and significant others</u>

Destiny, Tina, and Natasha described a consistent level of support from their families throughout their experiences. The support of Destiny's mother was instrumental in her success before and following the birth of her child... "I don't think I could have

did it without her... she's still very good. When I was in my last semester... she watched the baby while I was typing up my papers. And I had a colicky child." Tina's husband and her two brothers provided continual support when she was ill and upon her return to the program... "They were always there for me... and they knew that I was sick... really supported me and that helped a great deal."

Assistance from a couple willing to care for her child played a major role in enabling Janet to successfully complete the Registered Practical Nursing Program. It was not until her future husband entered her life that Janet began to secure the support that she required to continue in the program.

> "I wouldn't be here now... his support. He was always very encouraging and supportive of my education. And if I didn't have that... the stability... the good home life... the support. I probably wouldn't have made it. No."

The support of her parents, close neighbours, and a devoted babysitter enabled Natasha to pursue her educational goals, however it was not until she established a relationship with her future husband that she experienced a personal sense of stability.

> "My whole last year has changed... I don't know if I would have put as much enthusiasm into it as this year... I just would have sat back and went through... but my fiancé... 'I believe in you... you get going... you're going to be late...get up...you have to go...get up!' Yeah... it means a lot.'"

Support of coworkers and staff

The support of coworkers also encouraged Beth and Robin to continue in their educational pursuits. The academic and emotional support that Beth received from her coworkers as she worked as a Registered Practical Nurse proved to be extremely beneficial. In addition to assisting with her studies and encouraging her participation in unit activities, fellow staff also provided emotional support... "There was one RN... she said if I ever felt really low... if I ever felt bad, just to call her anytime of day... That was

kind of neat that she would support me like that." Robin also felt himself drawn into the medical field by fellow health care professionals as he worked in the capacity of a health care aid, student and Registered Practical Nurse. "I worked there and they helped me out too... when you're in, it's kind of a little advantage because you can branch off and you can use different avenues and different people that you know to help you out." In addition to providing academic assistance, these individuals helped Robin manage his hectic schedule of working double shifts... "I've been there since ninety four. They cover for me if I'm fifteen minutes late."

Achieving Success in the diploma program

As each subject shared his/her experience, it became evident that achieving success in the diploma nursing program involved the cumulative effect of interrelated variables. Common themes within this data cluster include: returning as a Registered Practical Nurse, time management, persistence and self-confidence.

Returning as a Registered Practical Nurse.

Four of the subjects who volunteered for the study became Registered Practical Nurses at various points along their paths toward obtaining their diplomas in nursing. Beth, Janet, Destiny and Robin shared their unique experiences of returning as Registered Practical Nurses.

Making the transition to the RN role required an unanticipated adjustment for Robin and Destiny. It was necessary for Robin to adapt in the clinical setting... "I kind of had a little problem because I'd wait for instructions sometimes...I was used to being the RNA role where the RN is going to tell you what to do for the day..." Destiny was apprehensive about accepting the responsibilities associated with being an RN. "You

start saying... 'Oh, I won't be able to do that... I couldn't do that'... I think you also get stuck in a rut there... You don't think personally you can do it." These feelings of apprehension and self-doubt mirror Bandura's (1986) description of feelings harboured by individuals with low self-efficacy. Bandura proposes that individuals with low self-efficacy avoid situations and tasks which they perceive are beyond their abilities.

As all of the RPN students in this study began to practise as student diploma nurses feelings of self-efficacy began to grow. Their past educational success in the RPN program as well as their proven aptitude to perform in practice settings empowered these students to continue in and successfully complete the diploma program. Comparable findings are cited by Kersten, Bakewell and Mayer (1991) who identify past experiences of caring and nurturing others as positive indicators of success in nursing programs. Aber and Arathuzik (1996) also find a similar relationship between past positive educational experiences and a sense of competency in nursing courses.

As they practised as RPNs, subjects began to value the opportunity to establish close bonds with their patients. Destiny and Robin shared feelings of remorse over losing this close contact with patients as they made the transition to the role of an RN. "I used to be able to talk to my patients, spend time with my patients...I found that you don't have very much of it." Robin sees the increased responsibility and the time pressures on registered nurses as contributing factors...

> "You're very busy and you're always crunched for time... it seems that time is your biggest enemy.... And that's what I miss... a lot of times, as an RPN, I would take a problem patient and put them in a side room and I'd sit at the door... so you're sitting there at the door with the patient and you have a lot of time to talk to them. And I miss that... a lot."

Smith, Stanley, and Shores' (1957) principle of simple to complex learning indicates

that curriculum content is optimally organized in a sequence progressing from simple to complex elements. This principle suggests that optimal learning takes place as individuals build upon concrete content and progress to more difficult, abstract content. Findings support this view of progressive learning. In addition to providing a secure income as previously discussed, entering the diploma program as RPNs provided subjects with the opportunity to build on previous knowledge and apply established organizational skills. Beth shared her impressions about her experience... "The decision to switch to the RPN program and get some practical experience and go from there...That was the best move I ever did." Robin attributed his strong theory base to his ability to build on knowledge he obtained while working as an RPN. "I could see where things were going... the pathophysiology and the nursing theory kind of entwine ... you incorporate everything you've learned and you pull it together.... it's like a big melting pot." Beth also viewed her progression from the RPN to RN role as a natural building process...

> "It's like taking little steps to your final big step. And it works! Each one kind of built on the previous... You learnt new things, extra things that would help you along the way... and it wasn't all kind of thrown at you."

The organizational skills that these subjects developed as RPNs proved to be an asset as they entered clinical settings as RN students. Robin described his approach... "Don't work harder, just think smarter. Think about what you're doing before you go ahead and do it."

Time management.

The meta-analysis by Kulik, Kulik and Swalb (1983), as well as other work by Burdick (1996), Hesser, Pond, Lewis and Abbott (1996), and Lockie and Burke (1999) identifies the positive effects of programs which assist students upon retention for a

variety of groups of students. This study also reveals the positive impact of effective time management upon nursing student success and supports the inclusion of effective time management skills in comparable programs.

The ability to effectively manage time was identified by all of the subjects as imperative in their efforts to successfully complete the diploma nursing program. Janet recognized that a lack of organization during her initial experiences at the college had contributed to her departure... "I was tired of being unorganized and being last minute...because I would even forget things... I'd forget to show up for a test... and it wasn't very good working under that kind of strain." The use of a calendar to manage work, school and family activities became beneficial for Beth, Tina, Janet and Natasha. "It's like living by a book. It's all blue and black and you can hardly see any spaces..." Janet described the use of her calendar..."I would get all wrapped up in it and I'd get everything all organized and I felt good about the next month that was coming up... That I was more prepared for everything... finances, assignments, everything..." Distributing time accordingly was also challenging. Tina described her approach...

> "What usually helped was the evaluation criteria... which assignment or project is due when. So I marked it in my diary and I knew that since this test is coming first, I'm going to work for it first. And then the second test, I'm going to get prepared for it in between."

A structured approach to studying also benefited Robin and Beth. Robin described the methodology he adopted...

> "Be more structured with what I was trying to do... set your goal... instead of getting all flustered and opening up my books and trying to learn everything. I'd break it off into little sections and try to learn the stuff. Then it managed to stay with me – I could understand it more. And then I'd put all of the little pieces together and you make the big puzzle and you can understand everything."

A focus upon school and work responsibilities resulted in a limitation of social activities

for Destiny, Robin and Beth. Robin shared his impressions ...

> "You can't sit back... go out to the bar... or attend social functions... because as
> soon as you do you make yourself slip behind. Fall behind... faster and faster...
> slide further down... and you're not going to be able to catch up."

Persistence.

Huch, Leonard and Gutsch's (1992) work which identifies personality factors that

predict retention in nursing does not include perseverance as a significant personality

trait. Findings in this study however suggest that perseverance is an important personally

trait among students who chose to return and eventually succeed in nursing programs.

Although sources of motivation to become a Registered Nurse varied among

subjects, it became evident that all subjects shared an inherent sense of persistence in

overcoming their obstacles. Beth's commitment to becoming a nurse intensified as she

spent extensive hours with her tutor building upon her initially weak knowledge base...

"...Three years... it's taken me just about six to get there. But I think it was worth it...I

just wouldn't give up!" Returning to the diploma program despite two forced

withdrawals demonstrated the degree of Natasha's persistence...

> "... if I didn't finish the program, I would be eighty years old or sixty and dying
> on my bed an I would have been mad at myself because that's what I wanted to
> do... and if I didn't go ahead and get it I would have regretted my life up until
> that point... Your dreams are important and I think everybody should go for what
> they want to go for."

Self-Confidence.

The relationship between high self-confidence and success in nursing education has

been examined by Munro (1981). Munro (1981) identifies the pre-college characteristic

of self-confidence as a predictor of success. Findings in this study suggest that although

initial high levels of self-confidence may be beneficial, the evolution of self-confidence

as students progress through nursing programs is critical.

A direct relationship between self-confidence and success in the nursing program

was identified by all of the subjects. Self-confidence flourished as these students gained

experience in the classroom and clinical settings. Robin described the development of his

self-confidence...

> "It's a beginning thing... you're going to doubt it until you do it... Like when you
> first go to drive a car... Can I really do this? And now you've done it a couple
> thousand times... you just hop in and go. Same thing with my entry to the
> program..."

The preceptorship experience in the final year of their programs provided the subjects

with an opportunity to work relatively independently and gain valuable self-confidence.

Beth explained her attitude during this period...

> "I make a decision and I just go with it... Now compared to before... I almost felt
> stupid before... But now I've spent so much time studying and finding things
> out... almost like being nosey and just sticking my nose everywhere I could
> possible get it so I could learn more."

Following a successful preceptorship experience at which she was required to accept a

high level of responsibility, Janet's self-confidence also continued to climb...

> "I think that gave me a lot of confidence... the whole world is opened up to me
> now... now I feel I could do anything... There are so many choices... a
> crossroads rather than reaching a goal..."

Tina, Robin, Destiny also expressed a similar sense of high self-esteem as well as a desire

to continue their education with higher educational goals.

Conclusion

Presentation of the findings reveals a range of moving personal struggles. A

pictorial representation of predominant data clusters and associated themes summarizes

findings in this study (see Figure 1). Motivating forces including family influences, past

experiences, efforts to establish financial security, personal aspirations, and altruistic

intentions vary in the degree of their influence upon the subjects at various points along

their journeys. These fluent motivating forces persist throughout the entire student

experience. Each of the subject's paths includes a "stop out of college" period that

occurs following graduation from a Registered Practical Nursing program or withdrawal

from the nursing program. The duration of this departure from college varies among

subjects and concludes with an eventual return to a diploma nursing program. The

tremendous impact of obstacles as well as the support from various sources that was

identified by subjects is also represented in the pictorial representation. Obstacles

include: financial demands, personal and family obstacles, as well as feelings of

exclusion during the phases before and following re-entry into nursing programs. The

impact of inter-institutional support as well as support from external sources is also

evident during the initial experiences in nursing programs as well as upon return.

Persistence, the use of effective time management, and the establishment of self-

confidence are essential components in the achievement of success in a diploma nursing

program. Subjects continue to be motivated by variable forces as they advance onward

towards post diploma educational endeavours. Individual student reflections representing

data clusters and emergent themes are further presented in Table 14.

OBSTACLES
Financial demands
Personal & family obstacles
Feelings of exclusion

OBSTACLES
Financial demands
Personal & family obstacles
Feelings of exclusion

Pre-admission

MOTIVATION
Family influence
Past experience
Efforts to establish
financial security
Attaining goals
Altruistic purpose

Admission

Institutional Experience

STOP OUT

Institutional Experience

ACHIEVING SUCCESS
Time
management
Persistence
Self-confidence

Post Diploma Nursing Education

SUPPORT
Intra-Institutional
support
Classmates
Faculty
Tutoring partners
External support
Family
Significant others
Coworkers
Practising nursing
professionals

SUPPORT
Intra-Institutional
support
Classmates
Faculty
Tutoring partners
External support
Family
Significant others
Coworkers
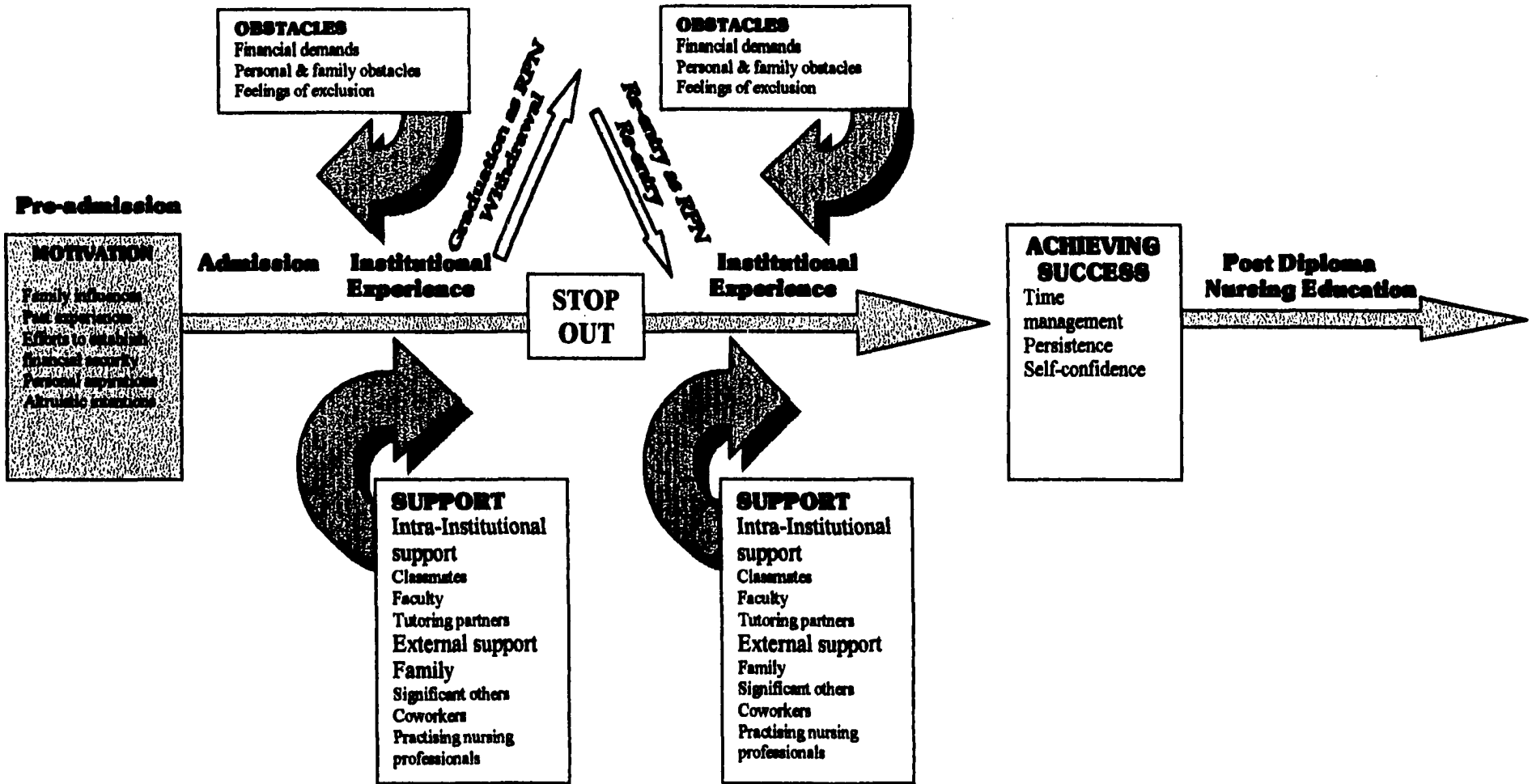Practising nursing
professionals

Figure 1: Pictorial representation of the synthesis of findings

Table 14. Data clusters and emergent themes - Subject reflections

Data Clusters	Emergent Themes	Subject Reflections			
Motivation	Motivation to enter nursing	"And when I'm a nurse I'm not going to be like that towards a patient never mind who it is…I wanted to make it right." Tina	"This is what I do best …help people and take care of them." Natasha	"This RN that was looking after me… I just kept her in the back of my mind and finally I go into the program." Beth	"I knew I had to succeed… it was either finish school or face a life of poverty." Janet
	Motivation to return to nursing	"I came back again because the H.L. is closing … its another financial move." Robin	"You can only go so far as an RPN. You can't really progress as far as I'd like to go." Robin	"I've gotta do it. I've gotta do it for my family." Janet	"My main reason was that I didn't like being in that role any more…" Destiny
	Motivation to continue post diploma education in nursing	"You're always working short staffed… you're doing the deeds of nursing… not really doing nursing…" Destiny	"Get a Bachelor's and then maybe a Masters…" Janet	"I'm excited about the opportunities afterwards… all these little courses that I've been looking at…" Beth	"It's going to open up some doors for me. I'm going to be able to move on." Robin

Table 14. Data clusters and emergent themes continued - Subject reflections

Data Clusters	Emergent Themes	Subject Reflections			
Obstacles to success	Financial demands	"I've got nobody helping me out or anything like that. So it was difficult." Robin	"It wasn't enough. I was finding that I'd have to do doubles... like sixteen hour shifts" Beth	"I was at home with the kids so I couldn't go to school... and an hour bus ride to get home... it just didn't work." Janet	"Yeah, so it was a little bit tough, working and going to school but I kind of had to do it..." Destiny
	Personal and family obstacles	"I was kind of not really there... I had a lot of personal problems... I couldn't focus on schoolwork properly." Janet	"It was a stressful thing and I didn't have much time to do anything else...it was just school and the child." Destiny	"So I had two weeks of hell... its hard to meet everything at home and come to school and perform your best." Natasha	"I doubt if anyone even knew I was getting a divorce." Robin
	Feelings of exclusion	"I was so stunned... I just knew it was kind of a jab...it made me feel very unaccepted." Janet	"No one included me... Sometimes I would go home upset about it... It's hard to deal with." Tina	"Everybody was for themselves... I didn't really know too many people in the class..." Destiny	"I don't even know who anybody in the class is this time...they've already built their friendships and their trust." Natasha

Table 14. Data clusters and emergent themes continued- Subject reflections

Data Clusters	Emergent Themes	Subject Reflections			
Support	Intra-institutional support	"I felt that there was this group of supportive people with me... we were working together." Tina	"My biggest thing was how to study....I'd never really learned how... So that's when my tutor came in... even the simplest little things. He'd show me." Beth	"I felt... not powerful, but accepted, more accepted for sure." Janet	"You also need that teacher too, because there's days when you're just frazzled." Robin
	Support from external sources	"I don't think I could have did it without her..." Destiny	"They were always there for me...really supported me and that helped a great deal." Tina	"He was always very encouraging and supportive of my education... And if I didn't have that...I probably wouldn't have made it." Janet	"I worked there and they helped me out too...so when you're in, it's kind of a little advantage..." Robin

Table 14. Data clusters and emergent themes continued - Subject reflections

Data Clusters	Emergent Themes	Subject Reflections			
Success in the diploma program	Returning as a Registered Practical Nurse	"I was used to being the RNA role where the RN is going to tell you what to do for the day..." Robin	"The decision to switch to the RPN program and get some practical experience... That was the best move I ever did." Beth	"I could see where things were going... you incorporate everything you've learned and you pull it together. It's like a big melting pot." Robin	"It's like taking little steps to your final bit step and it works! Each one kind of built on the previous..." Beth
	Time management	"I was tired of being unorganized and being last minute...it wasn't very good working under that kind of strain." Janet	"Be more structured with what I was trying to do...I'd break it off into little sections and try to learn the stuff." Robin	"What usually helped was the evaluation criteria... So I marked it in my diary..." Tina	"I studied - about a month ahead of time... I picked up the package and I looked at what the content would be ... and I studied it." Beth
	Persistence	"...Three years ...it's taken me just about six to get there. But I think it was worth it... I just wouldn't give up!" Beth	"If I didn't finish ... I would have regretted my life up until that point. Your dreams are important - everybody should go for what they want to go for." Natasha	"That was the biggest hell I ever went through. But... if I don't do it now I'm never going to come back and do it." Destiny	"So I did it on my own...was my own friend. I studied on my own... I won't let anything come in my way." Tina
	Self-confidence	"It's a beginning thing...you're going to doubt it until you do it. Like when you first go to drive a car." Robin	"I make a decision and I just go with it... Now compared to before...I almost felt stupid before." Beth	"I think it gave me a lot of confidence...the whole world is open up to me now...now I feel I could do anything." Janet	"I was really happy that I decided to tutor... so deep in my mind I thought, 'I can still do it!'" Tina

CHAPTER FIVE

CONCLUSION AND REFLECTIONS

Conclusion

My analysis of findings generates implications for many facets of nursing education. I suggest that those in educational institutions and the nursing profession undertake the following initiatives.

Recommendations for educational institutions

The significant role of education institutions in student achievement and retention is clearly evident in the experiences of each of the subjects. Recommendations for educational institutions are summarized in Table 15.

Table 15. Recommendations for educational institutions

1. Review adequacy of student support services – personal and financial.
2. Strengthen relations between nursing faculty and counselling services.
3. Provide multiple entry and exit points in nursing programs.
4. Support tutoring relationships.
5. Incorporate time management strategies in nursing curricula.
6. Promote positive student/faculty interactions.
7. Promote team building and reintegration of returning students in nursing classes.

1. In light of the significant impact of obstacles to success as well as support upon students in this study, I suggest that educational institutions interested in improving retention in nursing programs examine the adequacy of student support services. The

enormous impact of financial as well as personal and family obstacles upon individual success may be alleviated by an examination of the sufficiency of financial support as well as the availability and accessibility of counselling services.

2. Faculty who are aware of student services available may play a role in preventing student attrition by providing a bridge between students in need and necessary support services. I urge the implementation of communication systems that provide for frequent consultation between faculty and those working in counselling services and ensure that information regarding available student support is shared regularly.

3. In order to meet the needs of students with financial and personal responsibilities, I propose the inclusion of opportunities for students to progress through nursing programs in phases with multiple entry and exit points. The advantages associated with being a Registered Practical Nurse when returning to continue nursing education should also be recognized and reflected in improved accessibility for these students.

4. The reciprocal benefits to those involved in tutoring relationships were clearly evident in this study. I suggest a focus upon the expansion of comparable supportive relationships between students within educational institutions. Faculty all play a role in advising students to either seek a tutor or become one themselves.

5. The positive influence of the use of effective time management suggests adaptations to nursing curricula. Incorporation of time management strategies into early stages of nursing programs will set the stage for future student success in nursing programs.

6. It is important to address both the advantageous and detrimental impacts of interactions with faculty upon the student experience. I advise professional development for faculty to assist in the development of an approach that promotes the growth of

student self-confidence in an environment that proves challenging, yet within the grasp of students. Establishment of student/faculty liaison groups as well as formalized mentoring relationships between faculty and students will further foster student retention.

7. The advantages associated with being part of a cohesive class that were identified by subjects, reveal a need for faculty to direct efforts towards team building throughout nursing programs. I also propose that additional efforts to integrate returning students into their new class environments will prove instrumental in promoting their adaptation and persistence.

Recommendations for the nursing profession

The influence of interactions with practicing nurses upon the student experience indicates that these professionals play a role in motivating individuals to enter nursing as well as retaining students in nursing programs. Recommendations for the nursing profession are summarized in Table 16.

Table 16. Recommendations for the nursing profession

1. Build camaraderie and cohesion within the nursing profession.
2. Promote professional growth of nursing students and new graduates.

1. In view of the pending severe nursing shortage in Canada (Canadian Nurses Association, 1997), it is essential that practicing nurses become aware of the role models they present to prospective nursing students. The support of practicing nurses for the subjects reveals the importance of establishing a sense of cohesion and camaraderie within the nursing profession.

2. I propose an increased focus upon efforts that encourage the promotion of professional growth of students and new graduates. I urge the establishment and support of preceptorship programs for nursing students as well as mentoring programs for new graduates.

Recommendations for further research

I recommend additional research in areas that will further add to the field of knowledge encompassing student success and achievement in nursing. Research regarding obstacles to student success, exclusion in nursing programs, sources of support for students, as well as continuing education in nursing calls for further examination. (See Table 17)

Table 17. Recommended topics for further research

1. Obstacles to nursing student success.
2. Exclusion in nursing programs.
3. Sources of support for nursing students.
4. Continuing education in nursing.

1. Attention to obstacles for students in nursing programs warrants further attention in research. Further insight into the experiences of those who leave and re-enter nursing programs as well as those who do not return may provide additional data to support retention efforts. Research concerning the effects of external versus intra-institutional obstacles and commitments is also warranted. I also suggest an examination of the experiences of students who graduate successfully from nursing programs as it may also reveal coping strategies and approaches that may be used to further promote student

success. Examination of the positive influence of working as a Registered Practical nurse that is evident in this study suggests an examination of the impact of working in different fields upon the student nurse experience.

2. The sense of exclusion experienced by each of the subjects also calls for further investigation. The impact of these feelings upon students who withdrew and did not return to nursing programs may provide further insight into this phenomenon. Further investigation into the experiences of members of minority groups within nursing programs is also recommended. Additional examination of the effects of class cohesion upon the student experience as well as the effects of team building efforts upon success may serve to identify strategies to create a class environment that is receptive to all students.

3. Although the influence of support from family and significant others was clearly evident in this study, I suggest a more intensive examination of the influence of support received from practicing nursing professionals as well as those within the tutoring relationship. The impact that support from and interactions with practicing nurses has upon the student's experiences in clinical settings as well as in their work environments must also be examined. Further exploration of the reciprocal benefits to each member in the tutoring relationship may also highlight the significance of this mode of student support.

4. This study provides insight into some of the experiences of Registered Practical Nurses who returned to obtain their diplomas in nursing. Investigation into the journeys of others who chose to further their education in the nursing field, be it diploma nurses seeking their degree, or degree nurses seeking their masters, may provide data that may

aid in their transitions. Approaching these realms through the use of a phenomenological approach may serve to further provide a holistic view of the nursing education experience.

Personal reflections on the study

This thesis represents the cumulative result of a two-year effort during an extremely demanding period in my life. Completing this work in addition to balancing teaching nursing full-time and family responsibilities was definitely a challenge.

The use of the phenomenological approach enabled me to truly immerse myself in the experiences of the subjects, uncovering data that may not have been captured using a quantitative approach. The willingness of the subjects to share even the most personal details of their lives with me was truly moving. As I listened and sought to understand each subject's journey, I was awed by the individual strength and persistence in overcoming obstacles that appeared unsurpassable. The opportunity to reflect upon their experiences during the conversations gave the subjects the opportunity to recognize their achievements with a sense of pride. As I reflected upon the conversations, I began to view these subjects' experiences from a perspective outside my limited view. My journey in pursuing this effort has broadened my personal scope and instilled in me a greater sense of empathy towards the lives of my students. I wonder how many truly caring and gifted nurses have been lost to the nursing profession due to unmet needs while in nursing education. I hope for and can imagine a future in which practicing nurses, nurse educators and educational institutions work together to retain these potential nurses.

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APPENDICES

Appendix A – Research Questions

Appendix B – Consent Form

Appendix C – Cover Letter

Appendix D – Ethics Consent

Appendix E – Sample Conversation Transcript - Tina

Appendix A

Research Questions

Appendix A

Research Questions

Main research question:

What are the lived experiences of students who choose to re-enter a nursing program?

Under direction of the main research question, the following topics were addressed:

1.) Describe your experience when you first came into the nursing program. What feelings did you have at that time?

2.) Describe your experience during the time that you left the nursing program. What feelings did you have during that time?

3.) Describe your experience during the time that you choose to return to the nursing program. What feelings did you have when you returned?

4.) Describe your current experience. How do you feel now?

Appendix B

Consent Form

LAKEHEAD UNIVERSITY

955 Oliver Road. Thunder Bay. Ontario. Canada P7B 5E1

Faculty of Education

Appendix B

CONSENT FORM

I .... am a student in a diploma nursing program

at a community college. I have read and understand the cover letter describing the study titled,

"The lived experiences of five students who chose to reenter a nursing program" by Barbara

Morrison. I agree to participate in the research project and understand that I will be involved in

about two audio taped conversations. Participating in the study will not put me in danger of any

physical harm. I realize that I may be asked to recall past experiences in relation to the nursing

program, which may arouse feelings of discomfort. I may benefit from participation in this

study in that, through reflection, a better understanding of my choices and experiences could

develop. Should the need arise, debriefing will be available to me by the college counseling

service. I am aware that my identity will be kept confidential and that a pseudonym will be

used. As well, I may withdraw from the study at any time. On completion of the research study

I may have access to a summary of findings if I so request. The thesis supervisor Dr. Fiona

Blaikie will retain all raw data including tapes and transcripts for seven years.

....

Signature of Subject   Date

....

Signature of Researcher   Date

Appendix C

Cover Letter

LAKEHEAD UNIVERSITY

955 Oliver Road, Thunder Bay, Ontario, Canada P7B 5E1

Faculty of Education

Appendix C

Cover Letter

Dear Participant:

Thank you for agreeing to participate in this study of the experiences of nursing students who reenter nursing programs. I am conducting this research as my thesis requirement for a Master of Education degree.

The purpose of this study is to examine the lived experiences of nursing students who leave nursing programs and subsequently return. The information obtained from this study will add to the body of knowledge regarding student achievement and success. It will also provide nurse educators with insight and direction for efforts to retain students and minimize student attrition.

During the first phase of the study you will be asked to take part in an audio taped conversation which will take about one hour. Approximately three weeks after the first meeting you will receive a transcript of the conversation. You will, at this time, have the opportunity to review the transcript and make comments, changes or clarifications as you see fit. At a later date, you will be asked to take part in a second audio taped conversation during which time I will ask for verification and clarification of themes that have emerged.

The conversations will be unstructured and will revolve around general questions regarding your experiences and feelings during the time when you entered the nursing program, when you left the nursing program, and when you returned to the nursing program as well as your current experience and feelings.

All information you provide will remain confidential. In order to protect your identity, a pseudonym will be used. At your request a summary of the findings of this study will be made available to you. The thesis supervisor Dr. Fiona Blaikie will retain all raw data including tapes and transcripts for seven years. Please feel free to contact me at the number below with any questions.

Thank you for your cooperation and participation.

Sincerely,

Barbara Morrison RN, BScN
Researcher
475-7259

Appendix D

Ethics Consent

3 November 1999

Ms. Barbara Morrison
Faculty of Education
Lakehead University
THUNDER BAY, ONTARIO
P7B 5E1

Dear Ms. Morrison:

Based on the recommendation of the Research Ethics Board, I am pleased to grant ethical approval to your research project entitled: "THE LIVED EXPERIENCE OF FIVE STUDENTS WHO CHOOSE TO REENTER A NURSING PROGRAM."

Best wishes for a successful research project.

Sincerely,

JOHN WHITFIELD
Interim Chair, Research Ethics Board

/lw

cc: Dr. F. Blaikie, Supervisor

Appendix E

Sample Conversation Transcript - Tina

Sample Conversation Transcript – Tina

First conversation with Tina.
Setting ... in a small office, no windows. Sitting facing each other with tape recorder on desk beside us. Environment quiet. Tina appeared genuinely interested and serious as we initially sat down.

Could you just start by telling me a little bit about yourself?

Ok. My name is Tina, I am supposed to graduate from the nursing program at the end of April...and I come from a family of four kids, I'm the eldest. I've got three brothers. ...My dad was a physician; my mom is a science teacher back home. They influenced me in a great way, especially my dad. You know the way he was and the way his motive was towards people... that really put a big influence on me. And I decided to get into nursing.

Hmm. So when did you start nursing?

I started nursing in 96.

96? So your dad inspired you to go.... Why nursing? Why did you pick nursing?

I liked what he did, ok? I liked what he did...took care of people. How he was with people. And everything about the field...medicine/ nursing it has connection between. So I thought I would go into nursing.

So you're not from BT originally?

No I'm not.

Where are you from?

I'm from G island.

Did you finish high school there?

I finished eleventh grade and twelfth grade I came and finished in California.

Oh, ok.

So after I finished twelfth grade in California, I took medical assisting which took me six months in a private college. I worked there for maybe a year for a family practitioner. She was also a gynaecologist...she had a nurse practitioner working with her. But I think six months later, I got married to a guy from Toronto so I ended up moving here. But when I started looking for jobs as a medical assistant I was having a great deal of problem because they did not recognize the license.

So I decided I wanted to go back to school.

So if you had found a job as a medical assistant, would you have gone into nursing?

To be honest with you , the jobs I did find were pretty similar but there was always an issue about... should she do injections? Should she do venipunctures? Should she do this? Should she do EKGs and I just didn't feel like I was getting the respect I should have got. SO I just thought that ...when I looked into the nursing field...I noticed there were much more opportunities...a higher salary, ..ok, .much more you can do and more job opportunities out there. So that made me decide ok now stop right here...I'm going back to school.

Describe your experience when you first came into the nursing program... How did you feel when you came into the nursing program?

It , it was...I didn't know what to expect but I kind of knew it would be in the health field because that's what we're getting into. But when I did get into it , I was really happy to come to a city like BT. People were very friendly and that really made it easier for me.

Were the courses what you expected?

Courses...I would say yes.

How did you feel as a student coming into first year? Starting in the program?

Starting in the program in the beginning, I didn't know anyone... and I just had to be ready for anything that came my way. And I basically prepared myself that ...be ready for whatever comes your way Tina.

And that helped me... I was being my own friend. And I worked hard.

Can you describe your experience as you went through in the program?

I would say as the semester progressed from one to the other, there were more expected of you. You were supposed to know more, learn more, do more reading...and that made sense to me. They were... a lot of heavy load of reading and doing assignments and projects but I planned it in a way that wouldn't get to me and that worked out well for me.

How did you do that?

How? Well usually what helped me was the evaluation criteria of each semester and what assignment or project is due when. So I marked it in my diary and I knew that since this test is coming first I'm going to work for it first. And then the second test I'm going to get prepared for it in between. So whenever there were care plans to be done I would get a few care plan books and I didn't care if I had to stay up late...I would do it. And it was a very good experience for me...going through different books and then trying to make sense out of it.

Hmm....Interesting.... pause

In terms of anything...while in the program is there anything that stands out in your mind that you remember?

Stands out? What I remember was...everything was gong pretty steady and when I entered fifth semester, which was before I left, I came really late because I was ill. When I came I wasn't too prepared to face the load....

This was in the hospital?

This was in the hospital. And the teacher that I had felt...it was too late for that teacher to evaluate me. And I sort of felt I was being overwhelmed by so much going on... not only with the clinical but knowing that all the projects, assignments, tests that are coming up...I just felt like...it was just overwhelming. I didn't know what to do...everything was being pushed at one time....I really wish I would have been there at the beginning of the semester...I would have been prepared and well planned for everything. Everything was just like a shock.

So how late into the semester? How long were you absent for?

I think it was about three to four weeks....So by the time it came I was so lost I just ...felt like... "Oh my God...why didn't I start earlier?" Why didn't I start on time. I was in a position were I didn't want to be.

You know...I felt I was fighting within myself and talking to myself..."You can do it, you can do it But I knew also that – No, I would rather have the time off. So in a way I regret graduating without my own class. You know...because I had memories with them ...we started ...they were buddies that we studied together...stayed late night and did assignments together, and you know...it was very different. I won't say I had anything against people you know when I went back to the forth semester ...

Umm, hmm.

But it just wasn't the same thing...it wasn't the same feeling...graduating with your own class? In a way it did help that I was able to...I decided...ok, I'm going to spend my time well.. I was able to take one class ..Professions...I couldn't take theory because they told me that it went along with clinical .. so they told me that you can take Professions. So I said ok...to make my time worth while for me I'm going to tutor students. So I ended up tutoring seven students.

Oh?

Yeah.
So you left in fifth semester.
Yes.
And you then took Professions and tutored during the fifth and sixth semesters then?

Sixth ...I never came up to sixth. Only the fifth .

Up until Christmas than?

Yes.

Oh I see.

Yes and then I went back to forth. Because my grades were good and because of the reason, I was told that it's ok I could audit forth semester...so that really helped me...In a way I look at it as an advantage of giving me more confidence. Going over the clinical areas again. You know it boosted my confidence more. I was able to ...I felt it in me...that I was better than I would have been.

Really?

That one extra year helped. But in one way I know I could have done it before too. If my health wasn't the way it was. Just I missed graduating with my own class. You know.

Did you have a lot of support from them?

With my own class , yes I did. But when I came to the new class I just felt...I don't know if I should use this...I'm going to be honest with you..

Sure.

I felt used in so many ...being used...like people would come to me if they wanted something from previous semesters from me...like something I've done or you know... I couldn't find a true friend you know...and that really hurt me in a way.
OH.
I didn't mind helping people but it wasn't the same thing. Everyone was new to me It felt like starting all over again. Sometimes I just regretted the fact that I didn't do it with my own class. But then in one way I like that I got double the experience. When I went to audit and I went to take the tests just to see ...the coordinator wanted to see how I performed...that helped...that helped me to absorb information better, recall information better and so there were pros and cons to what happened in my situation.

So you were able to do the clinical in semester four...repeat the clinical even though you had the credit for it.

Yes. That helped, that helped I'd say I guess because   the more you do something the better you get at it. So that was the case. SO I had the good parts to it and the bad parts to it.

Can you describe your experience during the time that you choose to return to the nursing program... when you came back into semester four?

I was very anxious about going to fifth...about getting to fifth. Because I won't say because I knew all the content and everything... it's just a matter of getting it done and moving on with my

life. I've been married, we've been married six years and you know, we just want to move on. Yeah.

So fifth was more of a challenge than forth for you?

Yes it was. But what kind of helped me was that I had the previous syllabus so I was studying that in the winter break and some in the summer so that helped me get prepared for the fifth semester.

Oh, so you worked during the summer as well on things?

Yeah, I was working as a health care aid but what I did ...since I had the syllabus with me I was reviewing all of the information and when I came I knew...I won't let anything come in my way.

You sound like you were really determined to ...

Yes I was. Ha, ha, ha

When the time off ... I had... in a way... I was telling you pros and cons about it...another pro about it was I had time to rejuvenate myself...get myself all together you know...be my own friend and treat myself. And the students I helped...it gave me great joy because they were having problems with classes like anatomy and physiology. It pushed me to review the material and get prepared for tutoring ... so deep in my mind I thought " I can still do it!" You know.

So the tutoring gave you some self-confidence?

It gave me self-confidence, it gave me the view that – No – don't give up. If you can do this you can move on...so that really helped. That really helped...and the students, it was amazing...they all said that we think that you should become a teacher. I said well, one thing at a time!
But anyway, I think that was quite a boost for me. You know, it boosted my confidence, it gave me a positive look. I am going to go into forth semester, I am going to be moving on, I'm not stopping right here!

Did you ever consider not going into forth semester and just going into fifth?

What I was told was that there are only two criteria. Either I do everything over again or there is no way you can go right to fifth.
I was told you can't...either take everything over again or get audited. I asked for auditing because I knew I did very well and I would rather just come and attend all classes. So that's the deal I made with the coordinator. And I did all the tests and that really helped me too.

Describe Tina at the current time. How do you feel right now?

How do I feel?

Yeah.

I feel really happy because I know it's close to over and I'm proud of myself...that I hung in...I didn't give up or I didn't switch to RPN. I'm really proud of myself that I hung in the program and I'm graduating in two months!

Great!

So I think if a person really wants to do something, they can do it. And there has to be some kind of a light that has to help them. Either a supportive friend or you know something that they start doing...friends, family...

Who/What was your biggest support?

My biggest support was.... my husband really supported me. In a way first it was getting really frustrating for him, I could tell because he had to deal with his own studies.

He's a student as well?

Yes, he's a student as well. So it was very difficult for him in a way. And then my brothers were here. They really supported me. They were always there for me you know and they knew that I was sick and they were always right there for me. And the good thing was they lived with us at that time. They paid their way through but they lived with us and really supported me and that helped a great deal. And plus the fact that I decided to do tutoring....that just boosted everything .... You know...just totally made me feel like you know what I can do it. If I can tutor, I can still go on with the program.

In terms of support...you mentioned that you had a bond with the classmates that you had. Did they support you as well?

To be honest with you, yes they did. There were a couple... I would say that there were a few that were really good...and there was a couple of them, they would keep calling me and getting me stuff ...before I came into the fifth semester – late... I was at home...they would bring the assignment and would say "we can do the assignment together – you can still do it". They would call me during the breaks and say hey, don't worry... we are here for you ...we will help you out...you can do it...If anyone can you can do it. They gave me that confidence...and that made me feel so good but I knew deep inside that I don't think it's going to work... I'm too late...the teacher was helpless. He felt like he couldn't evaluate me. But I tell you ...and I still do talk to my fellow classmates from before and they really felt that if everything was fine, they wished that I could have graduated with them. That was kind of really sad for me.

Did you go to their graduation?

No.

It would have been difficult.

Actually by that time I think I was gone from here...I was gone to Toronto. I worked as a health

care aid and I was reviewing material.
Pause

You mentioned something about study groups. Did you work with others studying?

You know when you're in a class you meet all kinds of students. There are some students that want to study on their own, there are some students that don't want to share anything with anyone...ok ... they want to stick to themselves. So it was very hard in the very beginning – you slowly... when you start with one class you get to know people and people get to know you. So there were a couple who approached me...to be honest with you we were doing one to one with one...she used to come over and we would study late nights and you know...ask each other questions. And there was one we always used to ask each other on the phone...we had a phone thing going on...

Oh?

I would call, then she would call...maybe...we would be on the phone really late sometimes on the day before the test.
Another one was...she would come over one to one. So I think this one to one helped more. Because I think that what happens...when you have three different ones, or three different coming together, unless they think the same way or do things the same way.... It would be difficult,. So what helped with us was one to one studying....so that's how I did it.

Did you feel part of the class?

To be honest with you right now when I was in fifth semester, no one included me. No one asked me... "Would you like to come in our study group?" You know. You know what ...that was really making me sad. I felt like, you know what, I just wish I was with my own class right now.

Hmm.

Because that was so sad for me... I loved that...that really got you to think, and you had fun doing things. Because when I was auditing forth semester people would always come for something that I'd done previously, or help them out and stuff. But once I went to fifth semester, everything changed. Yes... and even when it came to doing group projects, I cooperated, I did stuff, I never backed out of anything that was assigned to me as part of a group. But one thing I did miss, that I felt sad about, was that no one asked me.... Hey, do you want to join our group? Hey do you want to can we study together? And that was kind of sad for me. So I just ugh...was my own friend. I studied on my own.

Did that group socialize a lot among each other? Were they a tight knit group?

Yes. Pretty much, I would say. We still communicate with each other.

And the second class that you were in?

The second class they were socialistic with their own group because they started together. And with me they would talk nicely because they knew I would talk nicely back to them.
I had no problem talking to anyone, I didn't have any grudge against anyone nothing. But I just wished that someone would include me as part of the group. I felt left out. And that was kind of hard. I just wished that there would have been someone....sometimes it just takes one person to make everything better....and I just wish someone in that group would have thought...hey... you know what? She's here, we can tell she works hard too, lets give her a chance, Why treat her left out you know? She came from a different class. She's new to our group, we should make her feel welcome. I didn't get that feeling.

But you seemed to manage on your own? You found your own way to deal with it.

Yes. That's how I had to do it. Because I got myself prepared for it. I'm like...you know what...it's almost over...you can tackle it...so I did it on my own....If people needed help from me, I would help them out. But I didn't get that back you know. So I think someway the message should be conveyed in semesters where they're getting older students back...that please include everyone ....everyone should work as a group...you're all a team.

Mmm, Hmmm. Interesting.
Pause.
Is there anything that stands out now in your experience that you remember? An event or anything specific that you remember?

With the new program or the old one?

New.

Good?

Or Bad or whatever.

Ok. Like I was talking about the study group thing. I remember when we were doing group projects there was lots ...there was a lot of individual group work were we were supposed to present stuff. There was a lot of communication going around were we would study tonight and you would come over...and no one ever asked me.... And those were the times that would really make me down. And sometimes I would go home upset about it. And by husband ...don't worry...you can do it ...don't let that get to you....I said yeah, I know...it's sometimes easy to say but it's hard to deal with. Cause I knew that those few people that were with me previously...it wouldn't be the same. Because I think even right now...a lot of the students that are going to graduate...it happened because of team effort. Helping each other out...no one is born smart....But I just wished that people would be more mature especially when they are going to become nurses. And are going to take care of people in the outside world. Dealing with people's problems. So those were times...and that happened a lot . Actually in every group I was a part of that conversation would come up. ...Are we going to study tonight. I don't know...I didn't know how I could say to them, hey can I come in? You know? I just...

That was difficult for you?

That was difficult for me. And I just wished that the class would have been more understanding towards me in a way I don't blame them, they don't really know me*...but still I think that it should be clear ...that if a new person is there....please make them a part of your group.

You were mentioning about your self confidence....in clinical how do you feel? You said that you have done some extra time in clinical...

Yes.

How do you feel now when interacting with the patients?

It really helps. Part of what helps is me working as a medical assistant previously. That background that I had really helped me when I interacted with patients....And now I can really make sense out of things. Whereas I can remember when I did the medical assisting course at the beginning. Everything was new, and I don't think I was as serious as I am now. I think that it makes a difference... how much I have been through in life.... I have lived without my parents for quite a few years...since age sixteen till I got married. And then I was serious, and the fact is that we had been married for six years and we had to get going with our life. And I think that all that really affects a person. And I love working with people...I think it's really fun. I get a real joy out of it...when you can help someone out. And make a difference in someone else's life. So now I know that sometimes you have to be your own best friend...you can do it...you have obstacles coming your way, you'll meet all kinds of people in this world, but hey...no one is perfect in this world.

You set your goal and you achieved it!

I achieved it!

Good for you!! Is there anything else that you would like to tell me?

Ok. Like what?

Anything that comes to mind about the program, your experience in the program?

I had a good experience otherwise in the program. It was set nicely, ok, the teachers were all great, they were very supportive. I think that really makes a difference. I never saw any teacher discriminate towards me as my own experience and that really helped. And what really helped me communicate with teachers was my background experience or what I had been through in life. And coming from G, we were always taught to respect teachers you know? It was kind of a culture shock for me coming to California seeing students just standing up and telling teachers to shut up or didn't care. They didn't respect the teacher , they didn't acknowledge the teacher at all. And that I found was very hard to take...I as so happy and so telling myself that I was so fortunate that I went to school in G where they teach discipline and you can hit students. AND it was so different for me...totally... YOU can't imagine...it was so different...like a total culture shock for

me.

So when you came back into the program...how did the teachers interact with you?

Everyone was very good. Everyone was very supportive. I remember even before leaving the program, the coordinator tried her best to keep me. But she knew that I could do better if I had A little time off...this way I could get myself together...my health will be better and I can come back into the program. But I felt that the support that was given...I had great support. The teacher who was evaluating me at that time ...in a way I was getting upset with him, I felt that he wasn't giving me a chance to move on. And in a way I agreed with him, because it was hard for him to evaluate me and he...and I felt, I think he noticed that I wasn't all there. I knew and I think he knew that I could do better if I had the time off. ....

Pause...

Shall we end this now?
Yes.