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Walden University 2022

Abstract

Nontraditional Former Bachelor of Science Nursing Students' Perceptions of Academic and Social Support Services

by

Teresa Cowan

MS, Wayne State University, School of Medicine, 1991 BS, Dillard University, 1988

Dissertation Submitted in Partial Fulfillment
of the Requirements for the Degree of
Doctor of Philosophy
Education

Walden University

May 2022

Abstract

Higher education has responded to the nursing shortage by adopting academic and social support services that have increased student retention and promoted higher graduation rates. The purpose of this basic qualitative study was to explore the perceptions of experiences that led nontraditional former Bachelor of Science in Nursing students at a career college to switch from their nursing program to another program within the first 2 years of college, which has contributed to the nursing shortage. This study also explored the perceptions of the participants about the influences, if any, that academic and social support services at the college had in students' decisions to switch programs. Tinto's student integration model of academic and social integration was used as a lens to explore the views of the participants. Data were collected from semistructured interviews with eight nontraditional former nursing students; analysis included open coding. Codes were categorized from which nine themes emerged: (a) participants expressed feeling overwhelmed, (b) lack of career pathway assessments, (c) intrusive advisor, (d) family support and encouragement, (e) an effective academic coach, (f) financial resources, (g) coping strategies and studying skills, (h) not participating in nursing program events, and (i) reliable vehicle. The findings of the study revealed that nontraditional former BSN students' needs differs from traditional students. This study's findings could bring positive social change by helping college administrators to understand that these nontraditional nursing students' needs concerning academic and social support services are different from those of traditional nursing students.

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Dedication

This work is dedicated to the memory of my paternal great-great grandfather, Dr. Phillips. Also, this work is dedicated to the memory of my maternal grandparents, who were not able to attend k-12 schools. To my parents, thank you for serving the community; you've unknowingly provided social change in the area in which you served. I thank you'll for placing the resilience in my DNA to pursue a doctoral degree. I can only pray that my child and grandchildren continue your legacy. To my son, Cassly Sullen III, I pray that you watched me in my journal and realized that what it takes for a dream to come to fruition. To my sisters, nieces, nephews, and brothers-in-laws, thank you for always supporting my educational pursuits. To my nephew, Dr. Henry McCain III, I am forever proud of you. Keep reaching for the stars; I know that you will do well. I also dedicate this work to my undergraduate professors at Dillard University, who saw a vision of me receiving a doctoral degree, but my sight was blocked with personal gains. Lastly, to my support team, thank you for the late-night calls. "Give instruction to a wise man, and he will be yet wiser: teach a just man, and he will increase in learning" (Prov 9:9 KJV).

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Chapter 1: Introduction to the Study

Few occupations are more beneficial to the health and welfare of society than professional nursing, which includes licensed practical nurse, registered nurse (RN), nurse practical, and nurse practitioner. However, healthcare researchers and stakeholders in the United States have reported periodic nursing staff shortages (Flynn & Ironside, 2018; Gellasch, 2015; Snavely, 2016). During the COVID-19 pandemic, this shortage has affected the quality of health care for acute and chronic medical treatment (Garfin et al., 2020; Snavely, 2016). The U.S. Bureau of Labor Statistics' (2015) employment projections for 2014 to 2024 listed RNs as a high demand occupation; subsequently, job creation for RNs has been higher than all other healthcare occupations and the second highest among the main employment categories (Snavely, 2016; Spurlock, 2020).

Researchers have suggested that the greatest need for RNs is in the southern and western regions of the United States compared with the northeastern and midwestern areas (Spurlock, 2020; Zhang et al., 2018).

In addition to increased demand, there are other reasons for a future RN shortage. Approximately 1 million RNs will retire over the next decade, as many of these nurses were born during the 1946-1964 baby boom generation (Buerhaus et al., 2017; McIntosh & Thomas, 2018). In the meantime, the number of RNs in the workforce below age 35 years is steadily increasing, and many enter the profession with baccalaureate degrees rather than associate degrees (Buerhaus et al., 2017; McIntosh & Thomas, 2018); however, there are not enough nursing students graduating from nursing programs to meet the future demand for RNs (Kennedy, 2018). Therefore, this study addressed a gap

in the knowledge in this area by exploring the retention of nontraditional former Bachelor of Science in Nursing (BSN) students who switched from their program of study within their first 2 years of college.

The problem the study addressed is that nontraditional BSN students frequently switch programs within the first 2 years at Massani Career College (WMCC; pseudonym). In this qualitative study, I explored the perceptions of former BSN students who switched from the nursing program, which has led to a decrease in the nursing degree graduation rate and has contributed to the nursing shortage. I also explored if their decision to switch from the BSN program was a result of influence from WMCC's academic and social support services. This qualitative research is important as it may help WMCC's administrators gain a better understanding of the reasons for low BSN retention rates, which contributes to a lack of nurses. The social implications of this study include the potential for modification of academic and social support services to increase graduation rates, thus helping to meet the demand for qualified nurses in the United States.

In Chapter 1, I will provide a background for the study, a statement of the problem, the study's purpose, and the research questions (RQs). I will also discuss the nature of the research, list definitions of key terms, assumptions, scope, delimitations, as well as any limitations. Finally, I present the significance of the study that may help to advance knowledge in the area of BSN student retention at WMCC.

Background

The employment projections of the U.S. Bureau of Labor Statistics have prompted many college students to enroll in nursing programs nationwide (Girard et al., 2017; Lewis et al., 2018). Unfortunately, research studies indicate that 4-year higher education institutions struggle with retention, reporting a dropout rate of up to 40% in the first 2 years (Craft-Blacksheare, 2018; Dewitty et al., 2016; Fischer, 2016; Herrera & Blair, 2015; Salmond & Echevarria, 2017; Snavely, 2016). Studies have shown a positive link between student retention and regular participation in academic and social support services (Aruguete & Mwaikinda, 2016; Marra et al., 2015; Williams, 2015). Aruguete and Mwaikinda (2016) noted that students who have a positive image of a school's academic and social support services are more likely to utilize those services and tend to remain in their programs.

Previous studies support the view that multiple barriers affect students' abilities to stay in a college program. Two studies in particular, done by Peña-Calvo et al. (2016) and ten Hoeve et al. (2017), examined barriers affecting traditional students' decisions not to complete their nursing programs. Peña-Calvo et al. conducted semistructured interviews with 17 nursing students in their third year of a nursing program to identify their challenges in this area. The findings of this study revealed that traditional undergraduate nursing students perceived the lack of family and peer support hindered their academic success; however, the greatest obstacle was the lack of support from nursing instructional staff. Ten Hoeve et al. focused on traditional undergraduate nursing students' perception of clinical placements. The results of this qualitative study indicated that traditional

undergraduate nursing students perceived that working long hours in clinical placements interfered with their personal life, which led to switching from the nursing program to another field of study. Regarding future research, Pena-Calvo et al. and ten Hoeve et al. suggested that more studies be conducted to analyze the perceived supports and barriers to undergraduate nursing student retention. The current study took into consideration the research of Pena-Calvo et al. and ten Hoeve et al. by exploring the reasons why nontraditional former BSN students switched from the program during their first 2 years of college.

Qualitative studies conducted by Du Plessis et al. (2016) and Hicks and Wood (2016) explored diverse student populations in non-nursing majors and their perceptions of the academic and social support services the college or university provided. Du Plessis et al. investigated traditional student perceptions and experiences with 4-year college social and academic support services. Findings indicated that these traditional undergraduate nursing students had a positive experience with social support services (financial, family, and employer support); however, they believed that the institution could improve its academic support, such as better internet access, tutoring, and library resources. In a similar qualitative study, Hicks and Wood analyzed a group of first-generation student perceptions of academic and social support services at Historically Black Colleges and Universities. The findings suggested that first-generation college students needed counselors, tutorial and financial support, as well as mentorship programs to increase retention. Although these studies revealed positive student experiences with academic and social support services, both sets of researchers suggested

further exploration into understanding the role of academic and social support services in retaining first-year undergraduates. The findings of this current study suggest that the academic and social support services needed to keep nontraditional BSN students from switching programs during their first 2 years of college are different than those of traditional nursing students.

A thorough search of the relevant and current research literature yielded a large number of studies concerning the high demand for nurses in the United States (Kennedy, 2018; McIntosh & Thomas, 2018; Salmond & Echevarria, 2017; Snavely, 2016; Spurlock, 2020). Furthermore, these same studies demonstrated that there are not enough traditional students completing a BSN. A decline in students completing this degree led to studies that explored their experiences with academic and social support services and if they affected retention in this program. Although the literature addressed the concern for retention of traditional nursing students, there is a scarcity of qualitative research that has pursued the reasons for program change by nontraditional nursing students who utilized available academic and social support services within the first 2 years of their program. Therefore, this study addressed a gap in the knowledge in this area by exploring the retention of nontraditional former BSN students who switched from their program of study within their first 2 years of college.

Several studies concluded there is a link between academic and social support programs and increased student retention (Aruguete & Mwaikinda, 2016; Marra et al., 2015; Williams, 2015). Aruguete and Mwaikinda (2016) found that retention rates improved for science, technology, engineering, and mathematics (STEM) students when

the institution offered tutoring, mentoring, and financial assistance. Similarly, Marra et al. (2015) noted that engineering students in the first 2 years of their program were more likely to stay enrolled when they actively engaged in the academic and social programs offered by the school. While these authors looked at STEM students, Williams (2015) investigated the perceptions of undergraduate psychology majors with various grade point averages regarding the academic and social support services provided by the school. The results were consistent with the research findings of Aruguete and Mwaikinda (2016) and Marra et al. (2015) in that the students had a favorable impression of the school's academic and social integration program to which they attributed their positive retention rates. Much work remains to be done before there is a full understanding of the extent academic and social support service programs affect student retention.

Although the Du Plessis et al. (2016) study showed an increase in traditional nursing program retention due to positive experiences with academic and social support services, the study did not address nontraditional students' experiences with those same resources. Therefore, the purpose of this basic qualitative study was to explore the perceptions of experiences that led nontraditional former BSN students to switch from their nursing program to another program within their first 2 years of college. Also, in this study, I explored the perceptions of former BSN students at WMCC about the influences, if any, that academic and social support services at WMCC had in students' decisions to switch programs. The results of this study indicate that higher education institutions should revise their academic and social support services to address the needs

of nontraditional students as these have been identified as factors contributing to switching from a BSN program.

Although the relevant literature has addressed the concern for the retention of traditional nursing students, there is a scarcity of qualitative research that has explored the reasons for program changes by nontraditional BSN students who utilized available academic and social support services within the first 2 years of the program. The current crisis in healthcare emphasizes the importance of higher education institutions retaining nursing students and increasing graduation rates so this can positively impact the anticipated nursing shortage.

Problem Statement

Using a basic qualitative approach, this study addressed the propensity for nontraditional BSN students to switch programs within the first 2 years at WMCC. In this qualitative study, I explored the perceptions of BSN former students who switched from the nursing program, which has led to a decrease in the nursing graduation rate and has contributed to the nursing shortage. Even though the current literature has not clearly indicated why nursing students switch from their programs, a potential factor in their decision to leave may concern the academic and social support services available from the college or university (Northall et al., 2016; L. Smith et al., 2016). For that reason, many higher education institutions have adopted strategies designed to increase student retention (Northall et al., 2016; L. Smith et al., 2016). Some of the strategies include intrusive advising, tutoring services, financial aid support, transportation assistance, and partnership with human services agencies (Harrell & Reglin, 2018; Moody et al., 2018).

Harrell and Reglin (2018) conducted an evaluation of a nursing advising program and its effect on student retention. The results of the study showed that nursing advising increased student retention from 72% to 96% through mentorship programs, tutoring information, and community involvement opportunities. In a similar study, Moody et al. (2018) showed that nursing advisors positively affected student retention, encouraging students to complete their degrees. Mentorship programs have been identified as a necessary aspect of academic support programs because of their effectiveness in meeting students' needs and their positive impact on retention (Betts et al., 2017; Ceglie & Settlage, 2016; Freeman & All, 2017). Although proven strategies are available to nontraditional nursing students at WMCC, over 40% of the first-year nursing students continue to switch from the nursing program in their first 2 years of college.

Purpose of the Study

The purpose of this basic qualitative study was to explore the perceptions of experiences that led nontraditional former BSN students to switch from their nursing program to another program within the first 2 years of college. Also, in this study I explored the perceptions of former BSN students at WMCC about the influences, if any, that academic and social support services at WMCC had in students' decisions to switch programs. The findings in this study could be valuable to nursing school managers and educators responsible for developing and implementing plans for revising academic and social support programs to retain students, increase graduation rates, and address the nursing shortage.

Belser et al. (2017) and Mooring (2016) stated that nearly 40% of adult learners drop out, withdraw, or switch from nursing majors to non-nursing majors during their time in higher education. Despite higher education administrations' implementing retention practices, including integrating academic and social support services into nursing programs, students in their first and second year of college continue to switch from nursing to another degree program (Aruguete & Mwaikinda, 2016; Marra et al., 2015; Williams, 2015). Arifin (2018), Betts et al. (2017), and Freeman and All (2017) collectively stated that nursing students' consistent interaction with academic and social support services had a positive effect on the number of nurses who graduate, which helped remedy the nursing shortage.

Research Questions

The RQs addressed by this study are as follows:

RQ1: What are the perceptions of nontraditional former BSN students at WMCC concerning the experiences that led them to switch from their nursing program to another program within their first 2 years of college?

RQ2: What are the perceptions of former BSN students at WMCC about the influences, if any, that academic and social support services at WMCC have on nontraditional former BSN students' decision to switch from the nursing program to another program within the first 2 years?

Conceptual Framework

In this section, I describe the historical evolution of Tinto's (1975, 1993) student integration model (SIM) of academic and social integration. In 1975, Tinto developed

SIM to demonstrate that college students' dropout is directly connected to their academic attributes, commitment to the academic process, finances, and personal family support throughout their academic years. This is important as there are a number of different ways in which a student may choose or be forced to leave college.

Tinto (1993) found that a student's sense of belonging was increased or decreased through interactions with the academic and social environments of the university or college, which impacts retention and graduation. Tinto classified the two most important systems at college as academic and social and argued that dropout could occur through a lack of integration in either or both of these systems. This development led Tinto to revise the original SIM to include the institution's commitment to student achievement through integration of academic and social components, which is Tinto's SIM of academic and social integration.

Tinto's (1975, 1993) SIM of academic and social integration provides a means to evaluate retention through the commitment of the student and the institution. Williams (2015) used this model in a study of nursing student retention with findings indicating these students were only reasonably content with the levels of academic support, social support, and professional development they received. Mitchell (2018) also used Tinto's SIM of academic and social integration with findings demonstrating that nursing students who did not complete their program had emotional, social, and financial constraints that affected retention. The findings of both Williams's and Mitchell's studies are significant because both provided data that indicated mentorship programs and other social

interactions had a positive effect on academic success by attending to the social needs of nursing students.

In the past 100 years, college student populations have become increasingly larger and more diverse, which has left educational leaders faced with the problem of high attrition and low student graduation rates (Ellis, 2019; Markle, 2015; Tinto, 2017). Claybrook and Taylor (2016) used Tinto's SIM of academic and social integration to determine the relationship between student retention and enrollment in courses designed to achieve college success. The findings indicated that there was no significant difference in retention between students enrolled in college success courses and those who were not. In another study, Marra et al. (2015) demonstrated a positive relationship between college success courses and social and academic integration. Finally, Hlinka (2017) used Tinto's SIM of academic and social integration as a basis to explore the barriers experienced by first-year minority transfer students in undergraduate schools. Obstacles to success included family views of education, financial support, and college readiness. Lee and Matusovich (2016) also used Tinto's model as a lens to examine the effectiveness of academic and social support services on academic progress at four higher education learning institutions. The results of their study showed that support services had a direct effect on students' academic progress toward their college degrees. The studies by Claybrook and Taylor, Hlinka, Lee and Matusovich, and Marra et al. demonstrate current use of Tinto's model to determine the relationship between student retention and college success.

For this study, Tinto's (1975, 1993) SIM of academic and social integration was used as a lens to explore the experiences of nontraditional former BSN students who utilized available academic and social support services and switched programs within the first 2 years. In Chapter 2, I describe WMCC's commitment to student retention through their academic and social support services, such as providing a nursing adviser, mentorship programs, tutors, testing strategies, coping with balancing academic demands, financial support, textbook stipends, and public transportation. I selected Tinto's model for this study because it aligns with the institution's strategies to increase student retention by encouraging students to actively participate in purposeful healthcare activities associated with the curriculum.

Nature of Study

For this study, I used a basic qualitative approach to collect data from nontraditional former BSN students concerning the experiences that led them to switch from their nursing program to another program in their first 2 years of college. The results of this study could be useful to other 4-year colleges and universities that experience a similar phenomenon. The participants in this study were nontraditional former BSN students who switched programs during their first 2 years of school. Data were collected through semistructured interviews with open-ended questions during Zoom meetings as well as researcher field notes. I used the Zoom audio recording feature, which allowed me to review and verify notes taken during interview. Also, I kept a researcher journal for writing notes during the interviews and to analyze the data

obtained from the participants' responses, which helped me identify the themes that emerged as well as for triangulation of data results.

Definitions

Academic support services: Education support services funded by the college are specifically designed to assist students with their courses and adjust to college life. These services may include tutoring, intrusive advising, and mentorships programs (Batz et al., 2015; Tinto, 2017).

Career college: A public or private postsecondary learning institution that offers certificates, associate degrees, and bachelor's degrees in various areas as well as technical or vocational skill education that meets the public demands for employment (Audant, 2016; Pyram & Roth, 2018). Students who attend WMCC can earn a certificate or associate degree faster, pay less tuition, and become employed in their field sooner compared to attending many traditional 4-year colleges or universities.

Nontraditional adult nursing students: Adult college students ages 25 to 55 years who are financially independent, have personal responsibilities, and are enrolled in an undergraduate nursing program (Cotton et al., 2017; McNeil et al., 2016; Strickland & Cheshire, 2017).

Social support service: These services include financial aid, financial information, emotional support services (e.g., information on coping strategies), counseling regarding tuition repayment options, textbook stipends, and adjustment to college life (Pierce, 2016; Rankin et al., 2018; Tinto, 2017). Mental health services are provided to WMCC students through partnerships with local agency support services. Additional coping strategies

include assistance with test taking, study strategies, and counseling concerning adjusting to college life. Currently, all these social support services are offered at WMCC.

Assumptions

One of the main criteria for admission to WMCC is that students must demonstrate college-level academic skills through an entrance exam. Within the past 5 years, the policy makers at WMCC decided to eliminate developmental courses in mathematics, writing, and English. Therefore, the first assumption for this study was that students entering the BSN program have the necessary mathematical, writing, and English proficiencies needed to be successful in the program.

Another assumption was that prior to enrollment, nontraditional students had support from close relationships. Nontraditional students enroll in college to further their careers and find to better a way to financially support their families. Some return to school for a promotion or a personal growth goal. Nontraditional students must balance family, work, and school commitments. Therefore, students enrolled at WMCC must have support from family and friends to help them fulfill their personal obligations.

Other assumptions of this study were that all students have knowledge of the services provided at WMCC, have access to these services, and, when appropriate, have scheduled appointments with individuals who provide these academic and social support services. Moreover, it was assumed that 60% of nontraditional students (which includes the participants in this study) utilized WMCC's academic and social support services during their time at school.

WMCC offers academic support in the form of program-specific academic advisers, mentorship programs, and college-sponsored tutorial services. The primary responsibilities of nursing advisers are to guide students in their educational pursuits, encourage students to make appointments with professional tutors, and oversee mentorship programs. Additionally, social support services are provided to all students, including access to financial assistance, textbook stipends, childcare, and community services programs that assist with off-campus housing and nutrition.

A portion of the WMCC orientation process is to introduce all students to its academic and social support services that include tutoring, mentorship, financial assistance, test taking tips, and coping strategies for adjusting to college and its challenges. Therefore, as previously stated, I assumed that the participants know, can access, and regularly participate in academic and social support services. This assumption was essential to understanding the perceptions of BSN students in their first 2 years of nursing school. Keeping students in the nursing program during their first 2 years has been linked to higher graduation rates and increased employment in the medical community (Belser et al., 2017; Harrell & Reglin, 2018; Moody et al., 2018).

In this study, I assumed that the nontraditional former BSN students would honestly share their experiences during their interviews. The participants who responded to the study's flyers were provided a letter of invitation, which contained information regarding the problem and purpose of this study. They were also given a letter of consent that indicated their responses may be quoted in this study. Eliciting honest responses during the interviews required developing trust; therefore, an assumption of this study

was that I could build a trusting rapport with the participants. These assumptions were essential for the collection of meaningful data regarding the perceptions of academic and social support services for undergraduate BSN students in their first 2 years of college.

WMCC recognizes that its BSN program has a rigorous and demanding curriculum and therefore developed specialized support services for the academic success of nursing students. Hence, an assumption of this study was that the participants had actively utilized tutorial services, mentorship programs, as well as heeded advice from the nursing adviser. Additionally, the nursing program has embedded community outreach services as a part of the core curriculum; therefore, nontraditional BSN students who serve in the community may experience a higher retention to graduation rate. This increase in the number of graduates has a direct effect on the growing demand for nurses in the medical community.

Scope and Delimitations

The specific aspects of the research problem this study addressed are that nontraditional BSN students have frequently switched programs within the first 2 years at WMCC. The specific focus of this study was to gain a better understanding of the reasons BSN students change from the nursing program to another program while matriculating at the same school. A decline in BSN graduates contributes to the lack of nurses, who are in high demand. The criteria for participation in this study was as follows:

- Nontraditional BSN students (ages 25 to 55 years).
- Nontraditional students who switched from the BSN program to another program within the first 2 years of enrollment.

 Nontraditional BSN students who utilized academic and social support services provided by WMCC.

The exclusion criteria for this study included:

- Traditional nursing students who switched from the BSN program within the first
 2 years of enrollment.
- Nontraditional BSN students who left the college rather than changed to a different program within the college.
- Nontraditional BSN students who were academically dismissed from the nursing program.

This study's findings revealed that allied health program policy makers should explore academic and social support services that are specifically designed to increase retention and promote graduation for nontraditional students. The results showed that nontraditional former BSN students utilized academic and social support services that have been identified in the literature to promote retention and graduation rates of all students; however, the needs for nontraditional students are different than traditional students. The study's findings could be used by college and university policy makers to adapt proven strategies to enhance the retention for both traditional and nontraditional students. Finally, the results are valuable for community and traditional 4-year colleges and universities challenged with low retention to increase nursing student graduation rates for the nontraditional BSN students.

Limitations

A strength of qualitative research is that it allows the researcher to study a subject in-depth. The disadvantage of exploring a subject through the participants' descriptions is that it does not determine a cause-and-effect relationship. For this study, I used a basic qualitative approach in exploring nontraditional former BSN students' experiences, if any, with WMCC academic and social support services. A limitation of this study was the small sample size of participants. The small sample size, however, allowed me to concentrate on the depth of data and complete an exhaustive analysis of the perceptions and experiences of nontraditional former nursing students. Even though a small sample size may be an advantage when using a qualitative approach, there are, however, disadvantages that need to be addressed. If a sample is too small, it could be difficult to find significant relationships from the data to be considered representative of the groups to whom results were generalized or transferred (Creswell & Poth, 2018). However, large amounts of data can lead to analysis errors (Flynn et al., 2019; Priode, 2019). In addition, analyzing large amounts of data are time consuming and can magnify researcher bias (Flynn et al., 2019; Priode, 2019). Thus, a smaller number of participants for this study was optimal to address the RQs, allow me to concentrate on the depth of the data, and perform an exhaustive analysis of the perceptions and experiences of nontraditional former BSN students who switched from a nursing program to another program in their first 2 years of college.

Another limitation of this study was that it took place at a career college rather than a large or university or across multiple campuses. A single site location used to

conduct research limits the number of participants and extends the time needed to conduct interviews and collect data to reach saturation (Braun & Clarke, 2021). In comparison to a state college with multiple locations and a large population of students. WMCC has a small number of students; it took 3 months to recruit, conduct interviews, and to reach saturation. One advantage of the career college selected was my close relationship with the academic and instructional staff. This relationship aided in recruiting participants for this research.

Significance

The problem this study addressed is that nontraditional BSN students have switched programs within their first 2 years at WMCC. The U.S. Bureau of Labor Statistics' (2015) employment projections for 2014 through 2024 listed registered nursing as a profession in high demand. These projections indicate that the greatest need for nurses is in the southern and western regions of the United States compared to the northeastern and midwestern regions (Gellasch, 2015). A contributing factor for this demand is the number of qualified nurses retiring compared to nurses entering the field (Snavely, 2016). The U.S. Bureau of Labor Statistics' employment projections prompted many college students to enroll in nursing programs nationwide (Girard et al., 2017; Lewis et al., 2018). Unfortunately, higher education institutions continue to struggle to meet the demand for qualified RNs (Fischer, 2016; Salmond & Echevarria, 2017; Snavely, 2016). Colleges and universities often lose 40% of nursing students during the first 2 years of their programs (X. Chen, 2015; Doerschuk et al., 2016).

Increased student retention in nursing degree programs may save the student time and money, as switching programs can delay graduation and increase associated costs.

Because students have left nursing programs, many higher education institutions have adopted strategies designed to increase retention (Northall et al., 2016; L. Smith et al., 2016). These strategies include providing proactive nursing advising, tutoring services, financial aid, transportation assistance, and establishing partnerships with human services agencies (Hepworth et al., 2018; Ishitani, 2016; Williams, 2015).

Researchers have found that students who continue to pursue their degrees during their first 2 years in nursing school have a higher completion rate; therefore, they have a positive effect on the nursing shortage (Belser et al., 2017; Buerhaus, 2017; Claybrook, & Taylor, 2016). The purpose of this basic qualitative study was to explore the perceptions of experiences that led nontraditional former BSN students at WMCC to switch from their nursing program to another program within the first 2 years of college. Also, in this study, I explored the perceptions of former BSN students about influences, if any, that academic and social support services at WMCC had in students' decisions to switch programs.

Nursing educators and college administrators could use the findings of this research to revise their school's academic and social support services to be more effective in supporting student retention in their first 2 years. Findings could also help in obtaining additional funding from other agencies or partnerships with hospitals to assist in retaining nursing students and promote increased graduation rates, which could have a positive effect on the nursing shortage. In addition, revision of a school's academic and social

support services could reduce the number of students who switch from a nursing program to another program at the college or university and therefore increase the nursing graduation rate. An increase in RN student graduation would create positive social change in the medical field by growing the number of qualified nurses. Additionally, an increase in nursing graduates can balance the nursing shortage as new nurses enter the field and others retire or leave the profession. The findings of this study could help higher education institutions increase the retention and graduation rates of nontraditional nursing students, thus helping to counteract this shortage.

Summary

Nursing schools throughout the United States struggle to increase graduation rates to meet the job market demand for nurses. Current research describes the role of student participation in academic and social support services to increase retention, decrease attrition, and an increase graduation rates. During the orientation process at WMCC, all students are informed of the importance of active participation in academic and social support services because of their positive influence on student retention. However, many nontraditional nursing students in their first 2 years of school, who are active participants in the support services, continue to switch from the BSN program to another field of study. The problem this study addressed is the propensity of nontraditional BSN students to switch programs within the first 2 years at WMCC.

In this study, I used a basic qualitative approach to explore the perceptions of the academic and social support services utilized by nontraditional former BSN students at WMCC. Tinto's (1975, 1993) SIM of academic and social integration was a lens to view

these perceptions. Key assumptions of the study were that students possessed the basic foundational knowledge in reading, writing, and mathematics; utilized nursing advisers, tutorial services, and mentorship programs; and received financial support, assistance with coping strategies and time management, and participated in campus-sponsored events. Integration of academic and social support can have a positive effect on BSN student retention and increase graduation rates, which may help alleviate the nursing shortage (Aruguete & Mwaikinda, 2016; Marra et al., 2015; Mudaly & Mtshali, 2018).

In Chapter 2, I describe previous studies using Tinto's (1975, 1993) SIM of academic and social integration as a lens to determine the effect of these services on student retention. I provide a thorough review of the current research literature associated with the nursing shortage, its effect on healthcare demands, and describe challenges to increase nursing student graduation rates. In addition, I discuss how higher education institutions are committed to improving student retention through academic and social support services. I review how regular participation and utilization of academic and social support services are linked to an increase in student retention. Finally, I present the characteristics of nontraditional students and their demographics at WMCC.

Chapter 2: Literature Review

The problem this study addressed is the propensity for nontraditional BSN students to switch programs within their first 2 years at WMCC. Therefore, the purpose of this basic qualitative study was to explore the perceptions of experiences that led nontraditional former BSN students to switch to another field of study within their first 2 years at WMCC. Also, in this study, I explored the perceptions about the influences, if any, academic and social support services at WMCC had in students' decisions to switch programs. In this chapter, I examine the literature associated with retention strategies in nursing education, academic support, social support services, and nontraditional students. I also discuss studies that used Tinto's (1975, 1993) SIM of academic and social integration that are related to academic and social support services.

A shortage of nurses in the United States has led to research that has provided data to develop strategies to increase nurses in the workforce; recruit, retain, and develop nursing faculty; and to improve nursing education. Park and Yu (2019) conducted a systematic literature review to evaluate the policies affecting the U.S. nursing workforce shortage. Park and Yu suggested strategies to remedy the shortage of nursing staff, including collaboration between the government and health institutions, healthcare personnel, and national regulation of investment in private healthcare programs. Feldman et al. (2015) took a different approach to study nursing shortages. The researchers described how a 4-year institution created alternative models for employing and growing

new nursing faculty and then implemented strategies to attract and develop their teaching attributes and retain newly hired nursing faculty.

Kukkonen et al. (2016) shed light on higher education's attempt to resolve the nursing shortage by concentrating on student attrition. According to Kukkonen et al., nursing student attrition has been studied, but only a few researchers have explored attrition from the perspective of the students' experiences. Kukkonen et al. used a descriptive qualitative approach and interviewed 25 nursing students from two universities to explore their experiences and reasons for leaving a nursing school. The results of the study revealed that nursing students left the program because of life crises, wrong career choices, or being distracted with personal challenges. The study concluded it was essential to identify students who are at risk of discontinuing nursing programs and develop support services designed to help increase retention, graduation, and assistance with entering the workforce. This current study expanded on the research of Kukkonen et al. by exploring nontraditional former nursing students' perceptions of WMCC's academic and social support services.

In this chapter, I provide the literature search strategy and the conceptual framework, which includes the current research using Tinto's (1975, 1993) SIM of academic and social integration and its role in an institution's commitment to student achievement. The chapter continues with a comprehensive review of the research literature that supports the need to address the shortage of nurses in the United States and the areas of the country most affected by the decline in nurses. I describe higher education's struggle to resolve the nursing shortage through intervention strategies,

including but not limited to student advising, tutoring, mentorship, financial support, and transportation.

Literature Search Strategy

To begin my literature review, I searched ProQuest, the Walden University

Library, and the career college's database for peer-reviewed journal articles. I also

utilized the Cumulative Index of Nursing and Allied Health Literature, Health Source—

Nursing/Academic Edition, and EBSCO Host Digital Dissertations. I searched Google

Scholar for journal articles and book excerpts and used government websites as well as the U.S. Census Bureau.

The key words used in the searches included, nursing student retention, nursing student attrition, academic achievement, mentorship, college-sponsored daycare, transportation, textbook stipends, and tutorial services. The combination of key terms included mentorship and nontraditional students, nursing student retention and nontraditional students, tutorial services and retention, academic achievement and nontraditional students, college-sponsored daycare and nontraditional students, transportation and nontraditional students and retention, textbook stipends and student retention.

I conducted an integrative review to synthesize literature published between 2015 and 2020 that addressed nontraditional BSN students' perceptions of their college or university's academic and social support services. Specifically, the literature search concentrated on nursing student retention, attrition, and retention strategies used in implementation of academic and social support services. Additionally, the literature

included articles related to the sample population of this study, nontraditional nursing student retention, and attrition and retention in undergraduate nursing programs.

ProQuest and Google Scholar yielded the most articles.

Unfortunately, the career college's library database was ineffective in providing enough research related to the study's problem and purpose. The terms I found most effective were nursing student retention, nursing student attrition, academic achievement, nontraditional students, and mentorship. When I reached a point where the literature did not yield articles related to my topic, I used common synonyms. For example, I used key term of adult students in place of nontraditional students, 5-year range for date of publications, graduation rate in place of retention, and Tinto's SIM of academic and social integration.

As I searched the literature, I learned that there were few current research articles, dissertations, conference proceedings, or reports concerning nontraditional nursing students who voluntarily switched from a nursing program to another program while matriculating at the same undergraduate institution. The literature search yielded articles on traditional students who dropped out of school, voluntarily left, were academically dismissed, or switched programs. However, there is a scarcity of research related to nontraditional students who voluntarily switched programs while matriculating at the same school. My search of the literature located articles pertaining to traditional students' perceptions of college and university's academic and social support services, although there was little research regarding nontraditional students' perceptions of academic and social support services.

The gap in the research literature addressed in my study is the lack of literature examining the perceptions of students who switched from one degree program of study to another field of study in their first 2 years. Also, there is a lack of literature exploring perceptions regarding an institution's academic and social support services on students' decision to switch from one degree program to another program within the first 2 years. This study adds to the existing research on the shortage of nurses in the United States and higher education institutions' attempt to resolve the problem. Furthermore, this study could be useful to higher education policy makers who are faced with nontraditional students voluntarily leaving nursing programs.

Conceptual Framework

The study addressed the propensity for nontraditional BSN students to switch programs within their first 2 years at WMCC. Research has shown a link between college student retention and academic and social support services (Claybrook & Taylor, 2016; Lee & Matusovich, 2016). Among higher education academic leadership, Tinto is highly regarded as a student retention theorist for research regarding understanding student behavior (Claybrook & Taylor, 2016; Lee & Matusovich, 2016). In 1975, Tinto created the original integration theory and expanded it in 1987 and 1993 to address student attrition as a combination of student characteristics and their involvement with a school's academic and social integration (Claybrook & Taylor, 2016). According to Tinto's (1975, 1993) SIM of academic and social integration, there are five areas that can contribute to a student's decision to drop out of school: (a) pre-entry attributes, (b) student intention and

commitment, (c) institutional commitment to student success, (d) academic and social integration, and (e) school commitment.

In the first stage of the model, Tinto (1975, 1993) notes that specific intellectual foundational traits and support systems are necessary for college student retention, including academic skills and support from friends and family. A student's decision to drop out can be attributed to the lack of emotional support from those in their personal life, lack of foundational knowledge, and an inability to handle rigorous coursework (Tinto, 1993). An assumption in the current study was that students enrolled at WMCC possess basic knowledge of reading, mathematics, and English, which were assessed prior to enrollment. Therefore, a student's decision to leave the program because they did not have the basic reading, mathematics, and English skills was not addressed in this study. Another assumption was that prior to enrollment, nontraditional students had support from close relationships. A student's commitment to their academic progress can be influenced by a sense of belonging to a school's culture. This can promote favorable grades on assessments as well as final grades and can lead to student satisfaction thereby increasing the student's level of commitment.

Another stage of the model is goal commitment. In this stage, Tinto (1975, 1993) discussed the impact of schools on student involvement in organizations, including campus events such as homecoming and sports. According to Tinto (2017), students who see themselves as a member of a community within the school were active participants in its activities, which leads to an increase in student retention. The research site selected for this study holds several events in which students could experience a sense of acceptance

and belonging. The college hosted its annual first-year student kick-off events to welcome back all students. They also hosted diversity and inclusion events, such as Gay Pride Week, Black history activities, exhibits for Women's Month, and Cinco de Mayo. The student nursing association held an annual event led by students, which included community health fairs, Breast Cancer Awareness Walk, March of Dimes Color Run, and bake sales to pay for nursing ceremony pens.

Institutional experience is the next stage of Tinto's (1975, 1993) SIM of academic and social integration. In this stage, Tinto (2017) discussed the purposeful integration of meaningful activities embedded in course curriculum. Nursing students' participation in school events can lead to a sense of belonging and increase student retention. In contrast, a student's belief that they are not a part of the school's community and negative external influences on goals and commitment can lead to decreased desire to attend school and withdrawal from classes, which can influence their decision to leave a college program (Tinto, 1993). Nontraditional BSN students who participated in school events made the choice to stay enrolled in WMCC; however, they switched from their program to another field of study.

The final stage in Tinto's (1975, 1993) SIM of academic and social integration has been extended to include the formal and informal aspects of a student's college experiences and the effects of the academic and social system. In this stage, Tinto (1993) describes students' interaction with academic and nonacademic support staff and takes into account the institution's characteristics and culture. Creswell and Poth (2018) stated that a student's involvement in the school's sociocultural and academic environment is

critical to college success. Similarly, Tinto (1993) found that a student's sense of belonging, achieved through educational and cultural experiences, impacts retention and graduation rates. Students who have positive experiences with campus activities tend to increase their integration with academic and/or social systems, whereas negative interactions weaken integration. Tinto (1993) emphasized that strong career aspirations can mute the effects of negative cultural experiences through extracurricular activities and program specific community projects. Specifically, Tinto (1993) incorporated the concept of student integration into the model of student retention and departure. Thus, understanding student retention is increased by cross-referencing approaches from both perspectives.

In this study, I used Tinto's (1975, 1993) SIM of academic and social integration as a lens to explore nontraditional former BSN students' perceptions of WMCC's academic and social support services and determine if these services had any influence on their decision to switch programs. As previously mentioned, Mitchell (2018) and Williams (2015) found that nursing students' psychological, social, and cultural retention were affected by college climate, mentoring programs, and social interactions. WMCC offers coping strategies, mentoring programs, intensive advising, and curriculum aligned with cultural and community activities. In the following paragraphs, I will describe similar research that used Tinto's SIM academic and social integration as a framework to explore students experiences at colleges and universities.

Claybrook and Taylor (2016) used Tinto's (1975, 1993) SIM of academic and social integration as a lens to determine the relationship between student retention and

college success courses. College success courses include remedial mathematics, English, and writing, which are designed to enhance student attributes and prepare them for college-level courses. The findings in Claybrook and Taylor's study showed that there was no significant difference in retention of students enrolled in college success courses and those not enrolled. College success courses are also designed to prepare students for the demands of the working world. WMCC was the site of this study; however, the College does not offer remedial courses. It is assumed that students acquired workforce skills through their coursework. Claybrook and Taylor's study is relevant to this research as their findings suggest that there is no significant difference in retention in students enrolled versus those not enrolled in college success courses.

Marra et al. (2015) conducted a study measuring the success of engineering students through integration of academic and social support services. The results indicated the students continued their commitment to the program with the services having a positive influence on retention. Hlinka (2017) used Tinto's (1975, 1993) SIM of academic and social integration to explore barriers of first-year transfer minority undergraduates. Obstacles to success included their family's views of education, financial support, and college readiness. Lee and Matusovich (2016) used Tinto's (1975) institutional departure model, which demonstrates the breadth of assistance required to comprehensively support undergraduate students, to develop a model of curricular support. According to this model, students' interactions and experiences with the educational system and academic and social integration directly impact persistence (Tinto, 1975). Lee and Matusovich used the model to construct and evaluate support

systems for engineering students at four higher education institutions. The results showed that support services had a direct effect in an increasing students' academic progress toward their college degree.

This study used Tinto's (1975, 1993) SIM of academic and social integration to explore nontraditional former nursing students' views of academic and social support services and why they transferred to another program within the college. This study focused on two of the five constraints: institutional commitment to student success and academic and social integration. The results of this study could benefit other career and community colleges that offer nursing programs as well as allied health programs struggling to increase graduation rates.

Literature Review

In this literature review, I provide summaries of scholarly journal articles, books, and government reports that give insight into the nursing shortage and the challenges faced by higher education in retaining and graduating nurses. I also discuss the adoption of proven strategies of academic and social support services linked to increased student retention and therefore higher graduation rates. These support services include advising, tutoring, mentorship programs, financial support, transportation, childcare, and psychological services. Finally, I describe the sample population (nontraditional students) and academic and social support services specifically designed to increase nontraditional student retention.

There has been an ongoing discussion about student retention and graduation rates by academic team leaders at WMCC of which I am a member. The annual report

indicated an influx of nontraditional BSN students enrolling at WMCC; however, the report also indicated that over 40% of nontraditional BSN students switched from the nursing program to another program in their first 2 years of school. Nontraditional BSN students switching programs was a concern to the academic team because WMCC offers both academic and social support services to all enrolled. Academic services offered at WMCC are advising, tutorial, and mentorship. Social support includes financial and disabilities services, counseling referrals, daycare assistance, transportation vouchers, and a textbook stipend. The annual report indicated that academic and social support services were utilized by over 80% of the students at WMCC.

I searched the literature to determine if switching to another program was a trend at other colleges and universities by nontraditional BSN students. In addition, I looked for a link between academic and social support services that had a negative effect on BSN student retention. Research indicated many higher education institutions have similar challenges with students switching from various allied health or STEM programs (Belser et al., 2017; Mooring, 2016). Several studies, however, used traditional students as their student population. The research literature demonstrated that academic and social support services had a positive effect on student retention and increased graduation rates (Aruguete & Mwaikinda, 2016; Marra et al., 2015; Williams, 2015). Because the WMCC annual report indicated that over 80% of the student population at WMCC utilized academic and social support services, it was unclear why nontraditional BSN students were switching programs. I also sought to discover if there was a relationship between academic and social support services and nontraditional BSN students switching

programs. Further search of the research the literature showed an increase in traditional nursing program retention due to positive experiences with academic and social support services (Du Plessis et al., 2016).

Retention in Nursing Education

To offset the negative effects of the nursing shortage, colleges and universities must increase the number of nursing graduates by 40-50% (Arifin, 2018; Betts et al., 2017; Markle, 2015). Therefore, it is critical to increase student retention, decrease attrition, and increase the graduation rates in nursing programs. Retention is the percentage of students who begin a program cohort and continue their education the next year (Arifin, 2018; Betts et al., 2017; Markle, 2015). For a student to persist, college resources must be reliable and practical and enhance academic skills in the student's pursuit of a degree (Arifin, 2018; Betts et al., 2017; Markle, 2015). This study's literature review focuses on studies that explored positive retention rates with active student involvement in academic and social support services.

Betts et al. (2017) noted that students had positive retention rates with active participation in a school's academic support and social support services. Betts et al. also found that students must be informed of a school's support services and actively use those services. Arifin (2018) noted that students who were at risk of failing and actively utilized support services improved academically, thus increasing retention and graduation rates. Support services included residential housing, transportation, advising, and professional tutors. Similarly, Betts et al. found that student retention increased when students had support with time management skills, study habits, finances, and

transportation. Markle's (2015) findings indicated that persistence and retention rates did not differ between genders; however, the factors that influenced student retention differed significantly. Grade point average, full or part-time designation, economic status, and confidence in graduating influenced persistence and retention.

Nursing program directors have the task of identifying students who are at risk academically, measuring student retention, decreasing student attrition, and increasing graduation rates, which has an impact on reducing the ongoing nursing shortage (Freeman & All, 2017; Schrum, 2015). According to Freeman and All (2017), throughout the semester, nursing instructors are urged to identify students who are at risk of failing one or more course exams, receiving a grade of less than a B- on two or more class assignments, or failing to attend class regularly. The role of the nursing advisor is to schedule an appointment with nursing students who are at risk of failing to propose an intervention plan that includes tutorial services and one-on-one mentorship with an advanced level nursing student (Freeman & All, 2017; Schrum, 2015). Additionally, the nursing adviser assists students with study skills, reading comprehension, strategies for test taking, time management, and coping with stress. Providing at-risk students with access to these resources could increase the likelihood of academic success and student retention.

Using a mixed-methods approach, Arifin (2018) found that student services played a pivotal role in undergraduate student retention. The findings of the study suggested that colleges and universities need to improve student support services to include advisers to assist students with emotional and intellectual support. A retention

study conducted by Betts et al. (2017) examined nursing student retention to help identify factors that led to a risk of failing and lack of social support. These factors included poor time management skills, stress regarding the ability to provide financial support for the family, and perceptions of the nursing program, which played pivotal roles in nursing student retention. Freeman and All (2017) similarly found that the nursing adviser had a role in providing study skills and time management strategies as well as directing students to key staff to assist with financial support.

Markle (2015) explored retention of male and female nontraditional college students who utilized academic and social support services. Markle's investigation found no significant difference in retention of either gender; however, grade point average and confidence in academic ability was an influence. In addition, nontraditional college students who were enrolled part-time were more likely to continue compared to full-time students. Markle found that women in the study who were full-time students, heads of households, and working expressed conflict in balancing work-life, family, and school, which led to withdrawal from college. In summary, many nursing students failed to complete their program because of their lack of participation in academic support programs, financial restraints, and lack of personal support, all of which decrease student retention (Arifin, 2018; Betts et al., 2017; Cotton et al., 2017; Markle, 2015).

Attrition is the number of students leaving a program either by choice or involuntarily (Adrogué & García de Fanelli, 2018; De Leon, 2018; Mudaly & Mtshali, 2018). In the United States, the National League of Nursing Accrediting Commission defines the attrition rate by the number of students who leave a BSN program before they

have finished—within 6-years of a 4-year program (Adrogué & García de Fanelli, 2018). However, Adrogué and García de Fanelli (2018), De Leon (2018), and Mudaly and Mtshali (2018) stated that the difference between student completion, dropout, and withdrawal needs to be adjusted for nursing students transferring to other programs at the same school.

Nursing student attrition, dropout, and shortages have been explored by several experts. According to Adrogué and García de Fanelli (2018), nursing attrition is the cumulative effect of numerous factors, such as the lack of support from faculty and nursing staff, disillusionment with campus life and its environment, and stressors in the external environment. De Leon (2018) found that the lack of support from family and friends can be attributed to nursing attrition. Mudaly and Mtshali (2018) combined the work of both Adrogué and García de Fanelli and De Leon and found that a shared common vision, encouraging guidance, partnerships, and investing resources in a student support program could directly reduce nursing student attrition and dropout rates. Mudaly and Mtshali's study is significant because it concentrated on resolving the nursing crisis. My study also contributes to resolving the nursing crisis by identifying nontraditional former nursing students' perceptions of academic and social support services that were specifically designed to retain nursing students at their college.

Students are more likely to persist toward a degree when they receive good grades, family support, financial assistance, and develop coping strategies to balance work and life with education (X. Chen, 2015; Fischer, 2016; Mudaly & Mtshali, 2018). Mudaly and Mtshali's (2018) research indicated that students who consistently have low

grades, disengaged in class participation, struggle with balancing family responsibilities, or lose the desire to enroll in school are more likely to drop out of the nursing program. These findings are significant and provide insight into the low retention rates in nursing programs. Current research demonstrates that nearly 50% of potential baccalaureate nurses drop out of the program during their first 2 years of college (X. Chen, 2015; Fischer, 2016). Mudaly and Mtshali stated that remaining or dropping out of the program is related to multiple factors and not a single student attribute. X. Chen (2015) and Fischer (2016) noted that higher education attrition rates are directly connected to the quality of education.

The current nursing shortage highlights multiple issues that need to be addressed in three factor-levels: institutional/program, professional/societal, and personal/student, which are associated with the field of nursing education (García-Ros et al., 2018; Gellasch, 2015; Kennedy, 2018). According to García-Ros et al. (2018), nurses are leaving the profession because of work demands and suggested that colleges and universities offer courses with the psychosocial and emotional effects of nursing aligned with the institutional/program. Nurses face physical, mental, and social stress, such as encountering life-threatening acute emergencies, irate patients and family members, exposure to threats and violence in the workplace, sleep and relaxation disturbance on major holidays and weekends, long work hours, discord with physicians, and lack of teamwork. García-Ros et al. suggested that nursing programs provide real life experiences for nursing students through clinical placements.

Gellasch (2015) noted that the nursing shortage was due to societal factors that included an increasing number of individuals insured through the Affordable Care Act, the healthcare demands from the elderly population, and the retiring baby-boomer workforce. Kennedy (2018) disputed the views of Gellasch and García-Ros et al. (2018) regarding the nursing shortage and stated it was due to nursing graduates taking jobs in noncritical shortage areas such as nursing homes, which correlates to the personal/student level. According to Kennedy, nursing graduates are accepting jobs within the profession that are less demanding. This finding is significant because all three levels identified by Gellasch, García-Ros et al., and Kennedy have influenced the nursing shortage. The current research literature stresses the importance of colleges having standardized academic and social support services, which should be available to address areas that affect attrition.

Academic Support Services

The research literature also addresses the importance of nursing advisers being proactive in identifying students who may be at risk of dropping out and ensuring they participate in programs that enhance academic abilities to prevent them from leaving the program. One-way schools can demonstrate their commitment to student success is by hiring a nursing adviser. Harrell and Reglin (2018) and Moody et al. (2018) discussed the importance of the nursing advisor's role in assisting students with study skills, time management, course selection, and personal issues, such as socialization challenges that impact academic performance. Harrell and Reglin stated that the role of a nursing adviser is to provide counseling, advise students regarding academic decisions concerning course

schedules, help students navigate academic demands, and connect them with other support programs that aid in retention toward graduation. Harrell and Reglin found an increase of 24% in nursing student retention each semester the student interacted with the nursing advisor. These findings encouraged Moody et al. to study the importance of providing nursing advisors with critical knowledge that had a positive effect on student retention. Moody et al. found that identifying and interacting with students at risk of failure and promoting supportive academic resources increased student retention.

Commitment to student success in hiring a nursing advisor who interacts with students has had a positive effect on student retention, which has led to an increase in graduation rates (Harrell & Reglin, 2018; Moody et al., 2018).

Higher education institutions have invested resources to improve the academic performance of all students regardless of whether they are characterized as being at risk of failing or performing below mastering level (Atkins et al., 2016; Guerra-Martín et al., 2017). A commonly used strategy to improve the academic performance of all students is peer tutoring in which undergraduates help one another learn with clearly defined tutor and tutee roles (Batz et al., 2015; Guerra-Martín et al., 2017). Batz et al. (2015) noted another common strategy is to hire content professional adjunct instructors to work directly with students to identify areas of weakness and use proven best practices to enhance their knowledge. A key component in determining the effectiveness of tutorial services is student participation. Guerra-Martín et al. (2017) studied the effectiveness of tutorial services through a student satisfaction survey and found that students who had

been identified as at risk of failing but regularly participated in tutorial services improved their academic performance.

Batz et al. (2015) investigated the effectiveness of tutorial services on student retention. The findings showed that struggling undergraduate biology students who regularly attended tutoring sessions scored 17% higher on observations, portfolios, projects, and exams compared to their colleagues who were not attending peer tutoring sessions. Findings in a study by Mendes et al. (2017) showed that regular participation in tutorial services led to the development of a rapport with colleagues and institutional support staff and a willingness to participate in the school's mentorship program. The findings of Mendes et al. are significant as student participation in support services, such as tutoring, can lead to an increase in academic performance, student retention, and graduation rates.

Mentorship through academic support programs can be an appropriate intervention for the nursing student at risk of academic failure (ten Hoeve et al., 2017; Vinales, 2015). Atkins et al. (2016), Betts et al. (2017), Ceglie and Settlage (2016), Freeman and All (2017), and Kramer et al. (2018) stated that mentorship programs are an effective strategy to enhance student success and have had a positive effect on nursing student retention rates. Collectively, these researchers noted that academic mentors help students with test taking skills, critical thinking activities, coping strategies, and, if needed, writing activities; however, they differed in their methods of how the mentormentee are paired together. Atkins et al., Betts et al., and Ceglie and Settlage stated that mentors should be experienced faculty who have a job-related responsibility to create and

foster a mentor-mentee relationship. Freeman and All and Kramer et al. supported the idea that upper-level classmates in the nursing program should serve as academic mentors to underclass mentees. Kramer et al. also stated that mentees who regularly participated in a mentorship program gained confidence in their coursework, developed better test taking strategies, and performed better on formal course assessments.

Vinales (2015) provided details on trained mentor and mentee relationships.

Vinales noted the value of a trained mentor who was familiar with nursing course formative assessments, such as essays, and unit objectives compared to summative assessments, such as a midterm exam, final exam, or final project. This type of mentormentee relationship can be used to motivate students to improve their overall academic performance and persist in the nursing program. If the mentor does not have course information to share with a mentee, the mentor-mentee relationship can have a negative impact on the mentee's academic performance. This type of mentor-mentee relationship can also have a negative effect on student retention.

Factors that limit nursing students' program continuation include student and faculty availability, faculty commitment, student willingness to participate, and sustainable funding (Boyraz et al., 2016; Freeman & All, 2017). Students' perceptions of academic support services could lead to a greater understanding of its effectiveness in student retention. As previously stated, academic support services have a positive effect on nursing student retention, reduce attrition, and increase graduation rates. Boyraz et al. (2016), Freeman and All (2017), and ten Hoeve et al. (2017) agreed that personal factors, not being able to pay for college tuition, challenges with childcare, the inability to afford

textbooks, and lack of transportation affected student retention rates. Freeman and All found that the absence of guidance, lack of finances to sustain home and college, and the absence of emotional support from close relationships were perceived as barriers to nursing student success. Ten Hoeve et al. found that many students who left the nursing program had unrealistic expectations of the profession, lacked support from professors, and struggled with clinical sites rotations.

Social Support Services

Financial difficulties decrease student retention and have led to nursing student attrition (Atkins et al., 2016; Hlinka, 2017; Zolot, 2017). Some nursing students withdrew from nursing programs due to constraints regarding finances, childcare, transportation, and housing (Atkins et al., 2016; Carter, 2016; North et al., 2016; Wladis et al., 2018). Hlinka (2017) found that many nursing students left their program because of the increasing academic demands, which took time away from their family financial obligations. A similar study was conducted by Atkins et al. (2016) who discovered that poor nursing student retention was linked financial barriers. The researchers found other areas that affected nontraditional student retention, including a lack of guidance, being academically underprepared, and the mental challenges of adult learners with family responsibilities compared with traditional learners who did have these duties. Research by Zolot (2017) also found financial difficulties contributed to nursing students leaving the program. Zolot noted that inadequate advising and coaching for nursing students led to withdrawal. To resolve financial challenges faced by nursing students, Atkins et al. and Zolot asserted that financial aid packages that allow for the purchase of textbooks and

other course resources may influence nursing student retention. Both studies also indicated that campus-based loans and grants have had positive effects on nursing student retention regardless of the type or amount of the aid.

Personal, family, social, and academic conflicts are contributing factors to nursing student attrition (Atkins et al., 2016; Diefenbeck et al., 2016; Zolot, 2017). The multiple demands of nursing school often have unexpected adverse effects on the student's family, personal relationships, and work. Atkins et al. (2016) and Diefenbeck et al. (2016) found issues, including situational crises during time in the nursing program (e.g., family illness and pregnancy), when compounded with other factors, may affect attrition.

Time management and commitment concerns become more evident as the nursing courses become more complex and the program progresses. Bishop (2016) stated there is a significant difference in retention between students at risk for dropout who used counseling services compared to those who did not. Dalky and Gharaibeh (2019) found many college students, especially nursing students, have a moderate form of depression, anxiety, and stress associated with rigorous coursework. Additionally, over 54% of college students are not aware of the supportive campus resources available. Many higher education institutions have strategies to promote awareness of their resources for emotional support through their mentorship programs and community partnerships (Dalky & Gharaibeh, 2019).

Higher education administrators have been concerned with the psychological distress experienced by traditional and nontraditional student nurses and its potential to adversely impact academic performance, retention, and attrition rates (Atkins et al., 2016;

Mitchell, 2018; Poynton & Lapan, 2017). Deasy et al. (2016) found that because of high levels of psychological stress and its impact on student retention, higher education institutions have collaborated with local mental health agencies to help students coordinate school, work, and personal life stress. Similar studies by Atkins et al. (2016) and Stoffel and Cain (2018) found that academic failure was influenced by several factors, including financial stress, personal difficulties, and academic and professional challenges. Any combination of unresolved academic, personal, and economic difficulties was associated with a higher risk of dropout (Atkins et al., 2016; Deasy et al., 2016; Stoffel & Cain, 2018). A low education level and a low socioeconomic status are also related to a high risk of dropout (Stoffel & Cain, 2018).

Atkins et al. (2016), Diefenbeck et al. (2016), and North et al. (2016) found that many nontraditional nursing students possess resilience when challenged with escalating distress concerning lack of financial resources and inadequate academic knowledge when pursuing a college degree. Resilience is defined as the ability to recover from difficulties caused by environmental and academic stress (Stoffel & Cain, 2018). Mwangi et al. (2015) and Van Hoek et al. (2019) described academic resilience, a type of resilience specific to education, as increasing the probability of academic success despite stressful events and conditions. A key factor is the ability to effectively cope with coursework demands (Chung et al., 2017; Deasy et al., 2016; Mwangi et al., 2015; Van Hoek et al., 2019).

To increase nontraditional student retention, colleges should adopt social support programs that help nursing students overcome academic stress (Atkins et al., 2016; Deasy

et al., 2016). Atkins et al. (2016) studied the potential impact of the Robert Wood Johnson Foundation initiative at five colleges in New Jersey. In the first year, the Foundation provided mentoring, tutoring, and financial and psychosocial support for adult nursing students who were identified as having an array of challenges. At the end of the first year, 92% of adult nursing students who used the services stayed with their program.

Deasy et al. (2016) investigated the mental distress experienced by college students and its impact on academics, retention, mental health, and lifestyle. The study used the General Health Questionnaire to obtain self-reported mental distress and the Lifestyle Behaviour Questionnaire to analyze the sources of distress, lifestyle, and demographic variables. The results showed that 42% of the participants exceeded the General Health Questionnaire threshold, which signified distress as a result of academic, financial, and psychosocial factors. Deasy et al. concluded that higher education institutions need to provide psychological support to students. This finding is important because nursing students, in comparison to other students majoring in the allied healthcare field, tend to experience substantial amounts of stress from emergencies, personal relationships with classmates and instructors, and rigorous coursework (Deasy et al., 2016; Van Hoek et al., 2019).

College social support programs are designed to help students adjust to college life and balance work and school (Jones et al., 2016). Jones et al. (2016) found that participation in a social support program led to developing a rapport with instructors and effective coping strategies to handle feelings of failure and the strain it placed on the

student's family and social life. Studies by Boyraz et al. (2016) and North et al. (2016) have shown that students who did not seek support were more likely to disengage in classroom discussions, which could lead to missing class, and, ultimately, to academic failure and an increase in the nursing student attrition rate.

According to the National Center for Educational Statistics, nearly 50% of undergraduate students have minor children, and 70% of those minor children are under the age of 6 years and enrolled in daycare (Carter, 2016; Wladis et al., 2018). College students without family responsibilities are often able to focus on academic pursuits and participate in social, academic, professional, and civic organizations (Carter, 2016; Wladis et al., 2018). Nontraditional students with nonschool-age dependent children are a growing population on college campuses across the country, yet there is limited research regarding their needs while enrolled in undergraduate studies (Roy et al., 2018).

Carter (2016) and Wladis et al. (2018) found that increasing access to higher education for parents and high-quality childcare could have a positive effect on retention and therefore increase graduation rates. Several top research universities have college-sponsored childcare centers on campus. Carter and Roy et al. (2018) found daycare centers on campus were linked to increased student retention by providing nontraditional students with the opportunity to attend school without being concerned with who was caring for their young children. The investment in campus childcare centers can benefit students' families by reducing financial stress and increasing student retention (Carter, 2016). Roy et al. noted that parents expressed a sense of relief to have reliable childcare on campus. Many of the social support resources can help increase student retention;

however, this study's focus was on nontraditional students with family responsibilities, who may have been married or employed while attending nursing school.

Nontraditional Students

The majority of U.S. colleges and university campuses are filled with adult students, and research indicates that this enrollment is growing (Hlinka, 2017; Kearney et al., 2018; Markle, 2015; Tinto, 2017). Nontraditional students are aged 25 to 55 years, may be married, have family responsibilities, live independently, may be members of an underrepresented race or ethnicity, or return to college to increase salary opportunities and/or change of careers (McNeil et al., 2016; J. Smith, 2015). Traditional college students are recent high school graduates aged 18 to 24 years, financially dependent on their parents, and may live on campus (McNeil et al., 2016; J. Smith, 2015).

McNeil et al. (2016) conducted a longitudinal study with academic records from nontraditional and traditional undergraduate students from 11 public research universities in the United States over 28 years. Once students selected a major, there were no differences in the mean grade point average or final cumulative grade point average between nontraditional and traditional students. Markle (2015) conducted a mixed-methods study to determine a consistent pattern of 494 nontraditional college undergraduate students. The study discovered that 60% of the students were full-time, 81% of the students had children under the age of 18 years, and the average grade point average of the participants was a B-. At the conclusion of the study, 70% of the students persisted, and 30% were no longer enrolled and had not graduated (Markle, 2015). The findings revealed that demographics, which included gender, ethnicity, age, and income

status, had no significant effect on student retention. However, the course grade, family support, and enrollment status played an important role in nontraditional student retention.

Nontraditional students have the challenge of balancing personal obligations and maintaining a sustainable income while taking on rigorous coursework (J. Smith, 2015; ten Hoeve et al., 2017). J. Smith (2015) found that nontraditional students' family responsibilities preclude participation in community service activities or extracurricular events outside of class. J. Smith used the Wellness Evaluation of Lifestyle survey, a holistic wellness model, to measure student engagement. The survey revealed that 45% of the nontraditional students were less likely to participate in community service compared to 69% of their traditional colleagues. In regard to extracurricular activities, nearly 70% of traditional undergraduates participated, whereas only 30% of nontraditional students were involved.

Adult students have challenges adjusting to college and balancing family and work (J. C. Chen, 2017; J. Smith, 2015). J. C. Chen (2017) stated that unlike traditional students, nontraditional students tended to have life skills that are useful when confronting learning stress. Their worldview originates from life experience. Moreover, nontraditional students seek to understand a concept compared to traditional students, who are more concerned about grades (J. Smith, 2015). Nontraditional students, on average, participate in class discussions more often and are more conscientious regarding their work. The results of the Wellness Evaluation of Lifestyle survey of student engagement indicated that 80% of older adult students asked questions and participated in

class discussions, compared to only 70% of younger adult students (J. Smith, 2015).

Also, one fourth of the traditional students surveyed regularly attended class unprepared, whereas nearly 90% of nontraditional students came ready with completed assignments and readings.

Resilience has been listed as one of the characteristics of nontraditional college students (J. Smith, 2015; Stoffel & Cain, 2018). Nontraditional students have resilience; the trait that helps individuals with setbacks and may impact dropout (Stoffel & Cain, 2018). Studies have demonstrated that an essential quality of highly resilient people is the way they balance their lives by doing stress-reducing activities. Stoffel and Cain's (2018) study focused on the resilience of nontraditional pharmacy students and is useful as it describes the rigorous coursework associated with allied health programs. Stoffel and Cain found that resilient students tended to take part in positive stress-reducing activities and had the capability to endure the rigidities of school and life. In this current study, I examined the willingness of nontraditional nursing students to use coping strategies provided by the college to manage family life while pursuing a nursing degree.

Academic and Social Support in Nontraditional BSN Student Retention

Despite nontraditional nursing students' participation in tutorial services, mentorship programs, financial assistance, and school events, undergraduate nursing programs continue to face growing concerns regarding high attrition rates, indicating a need to collect additional data on attrition (Stewart et al., 2015). Attrition rates in the United States are 50% for students enrolled in baccalaureate nursing programs and 47% for students enrolled in associate degree nursing programs (De Leon, 2018). Attrition

studies conducted with STEM majors by De Leon (2018) and X. Chen (2015) have shown that approximately 50% switched to non-STEM majors within their first 2 years of school.

Higher education policy maker perspectives regarding student success may not always align with student views. For example, nursing students might view success as earning a particular grade point average, obtaining a degree, or having a job with a high salary (Denham et al., 2018). In the research literature, student academic success is defined as educational achievement, attainment of learning objectives, acquisition of desired skills and competencies, retention, and postcollege performance (Denham et al., 2018; Woods & Frogge, 2017). However, Woods and Frogge (2017) found that students might view academic success as earning a passing grade. Students struggling to achieve a grade higher than a B- may have a negative perception of themselves and are more likely not to return to that learning institution (Woods & Frogge, 2017). These negative perceptions are consistent with a lack of self-confidence, which may lead to decreased student retention (Woods & Frogge, 2017).

Since its inception in the 1990s, the nursing program at WMCC has experienced steady growth. Denham et al. (2018) and Woods and Frogge (2017) found that the current low retention rate of first and second-year nursing students posed a problem at their studies' sites as well as in nursing programs nationally and internationally. The findings of these researchers need further investigation; therefore, this study explored the reasons for the low retention rates of first and second-year nontraditional nursing students at WMCC.

Summary and Conclusions

For more than 50 years, the United States has been experiencing a nursing shortage; as a result, this has affected the quality of care in the medical community. Unfortunately, institutions of higher education continue to struggle to increase the number of nursing graduates to meet the job market demand. This study adds to the existing research regarding this shortage and the efforts of colleges and universities to resolve the problem.

In this chapter, I described higher education's commitment to improving nursing student retention through academic and social support services, which have been linked to increased student retention. I discussed each aspect of academic and social support services and their roles in retaining nursing students. Even though students utilize academic and social support services, nearly 40% of first and second-year nursing students switched from the nursing program to another program while enrolled at WMCC. I also provided a description of how I used Tinto's (1975, 1993) SIM of academic and social integration a lens to determine the effect of these services on student retention.

In Chapter 3, I will describe the methodology I used in this study and my role as a researcher in interviewing and asking follow-up questions regarding nontraditional former BSN students who switched from their nursing program and their perceptions of the WMCC's academic and social support services. The methodology includes procedures for recruitment and participation and instrumentation for data collection and analysis. Finally, I will describe the study's trustworthiness and ethical procedures.

Chapter 3: Research Method

The purpose of this basic qualitative study was to explore the perceptions of experiences that led nontraditional former BSN students to switch from their nursing program to another program within the first 2 years of college. In addition, Also, in this study, I explored the perceptions of former BSN students at WMCC about the influences, if any, that academic and social support services at WMCC had in students' decisions to switch programs. To achieve this, I interviewed eight nontraditional former BSN students who were currently enrolled in other programs at WMCC, focusing on their perceptions of the academic and social support services, which may or may not have influenced their decision to switch programs.

This chapter includes a description of the qualitative research design and rationale to be used in this study, my role as researcher, and methodology, including procedures for selection, participation, and data collection. I also provide a data analysis plan and discuss issues of trustworthiness: credibility, transferability, dependability, and confirmability. Finally, I detail the ethical procedures to be put in place for this study.

Research Design and Rationale

I used a basic qualitative approach to address the following RQs:

RQ1: What are the perceptions of nontraditional former BSN students at WMCC concerning the experiences that led them to switch from their nursing program to another program within their first 2 years of college?

RQ2: What are the perceptions of former BSN students at WMCC about the influences, if any, that academic and social support services at WMCC have on nontraditional former BSN students' decision to switch from the nursing program to another program within the first 2 years?

Traditionally, quantitative research has been used for statistical analyses of satisfaction surveys regarding academic and social support services. For this study, I chose qualitative methodology to gain insight into nontraditional former BSN students' perceptions of a career college's academic and social support services. A basic qualitative design is appropriate for exploring participants' views compared to quantitative research, which is used to discover facts about a phenomenon and uses a larger sample size. (Charmaz, 2004; Creswell & Poth, 2018).

There are different approaches in qualitative research that could be used to research the study's phenomenon, BSN students switching from the program to another program while matriculating at WMC. I choose a basic qualitative approach rather than grounded theory, case study, or an ethnography. A basic qualitative study is a general summarization, in everyday terms, of specific phenomenon experienced by individuals or groups of individuals (Charmaz, 2004; Creswell & Poth, 2018). My decision to select a basic qualitative approach was because, through this study, I sought to understand why nontraditional BSN students switched from the nursing program using the participants' responses to interview questions.

The grounded theory approach is a systematic procedure of data collection and analysis that allows the researcher to develop a theory about a phenomenon (Charmaz,

2004; Creswell & Poth, 2018). Grounded theory is used to explain a phenomenon rather than describe the participants' experiences. Another research design that was eliminated was case study. A researcher uses case study to focus on how and why a phenomenon occurred, studying an observed behavior that is not manipulated to understand it, and if the borders between the environment and the behavior are not well-defined (Charmaz, 2004; Creswell & Poth, 2018). Finally, I did not choose ethnography because this design helps the researcher to explore, in-depth, the participants' cultural experiences regarding the topic of study (Charmaz, 2004; Creswell & Poth, 2018). This purpose of this study was not the exploration of nontraditional former BSN students' cultural experiences with academic and social support services, rather, its focus was on their perceptions of these services.

I used a basic qualitative study approach in this study to allow the participants to describe their experiences to answer the RQs (see Burkholder et al., 2016). I did not select quantitative methodology as the number of students enrolled in the college will not yield a large enough sample for this type of study. In the past 5 years, WMCC has undergone several infrastructure reorganizations, including the elimination of certificate programs and developmental courses for students who score low on college entrance exams. Students who do not meet the minimum score on the entry exam are instructed to enroll at another college and take developmental courses there. After completing these courses, students may return to WMCC and retake the entry exam. As a result of the elimination of development courses, the student population has decreased, which may

affect the number of potential participants for a quantitative study. Therefore, a basic qualitative research design is a suitable choice for this study.

Role of the Researcher

My role as the researcher is to interview nontraditional former BSN students who switched from the nursing program to another field of study regarding their perceptions of the career college's academic and social support services. I have worked in higher education for more than 25 years and been employed at WMCC for 13 years. In my current position, I work as an adjunct health science instructor, a full-time health science teacher, and chair the department of health sciences. A part of my responsibilities, I address the concerns of nursing students enrolled in introductory nursing courses to resolve issues with absences, failure in standardized assessments, disputes with instructors, and other course concerns. After completing the introductory nursing science courses, students enroll in the professional nursing track courses. Once they have enrolled in these courses, I have no further association with these students.

Participant bias can occur if there is a relationship with the researcher or direct or indirect contact. To prevent participant bias, I wrote a statement in the letter of invitation that identified my role at WMCC and any possible relationship I might have had to the participants. Also, the letter identified my role in this study. I elicited the support from the director of student affairs for permission to post my recruitment flyer on the WMCC learning management system and on bulletin boards throughout campus. Each participant who responded to my flyer through email received a letter to participate and a letter of consent via my Walden University email. Potential participants were asked to sign and

return the informed consent form indicating that they volunteered to participate in the study. The sample size of eight may have represented diversity in gender, age, and ethnicity, but I interviewed the first individuals who respond to the invitation and who meet the criteria. The invitation stated there was a \$10.00 electronic gift card from Starbucks as thanks for participation in the study. For those students who agree to participate, I scheduled a Zoom interview.

Methodology

In this section, I describe the participant selection logic and the instrumentation—semistructured interviews using questions that originated from a similar study—and permission to use this as an instrument to collect data. Next, I discuss the procedures for recruiting participants and the interview process. Finally, I present the data analysis plan.

Participant Selection Logic

Nontraditional former BSN students who switched from the nursing program to another field of study and currently enrolled at WMCC were the participants in this study. Nontraditional students were selected to participate because the majority of college campuses in America are filled with this growing population (see Hlinka, 2017; Kearney et al., 2018; Markle, 2015; Tinto, 2017). I used purposeful sampling to recruit participants to obtain in-depth data that reflected the perspectives of eight nontraditional former nursing students. The criteria used for selecting participates were as follows:

- Nontraditional BSN students (ages 25 to 55).
- Nontraditional students who switched from the BSN program to another program within the first 2 years of enrollment.

- Nontraditional BSN students who utilized academic and social support services provided by WMCC.
- Nontraditional former first-time students at WMCC who were enrolled in the BSN program between 2017 and 2021 and currently pursuing another program at the College.

The exclusion criteria for this study included:

- Traditional nursing students who switched from the BSN program within the first
 2 years of enrollment.
- Nontraditional BSN students who left the college rather than changed to a different program within the college.
- Nontraditional BSN students who were academically dismissed from the nursing program.

The rationale for a small sample size was to gain an in-depth understanding of the participants' perspectives. In qualitative studies, generalization is not the primary focus; therefore, a large sample is not necessary to identify themes and patterns (Charmaz, 2004; Creswell & Poth, 2018). I originally sought 20 nontraditional former BSN students who switched from the program to participate in the study with a goal of using eight to 10 students; however, I accepted all interested participants to reach saturation in case some were not available to meet via Zoom.

Instrumentation

Creswell and Poth (2018) provided a roadmap with several steps for conducting semistructured interviews through Zoom meetings. The meetings took place at the end of

the 16-week semester of WMCC. I used a semistructured format to gather data from the participants regarding their perspectives and thoughts as they occurred during the interviews (see Creswell & Poth, 2018). Each volunteer received a copy of the interview questions via email. These questions were open-ended and written so the participants could provide complete, concise, and descriptive responses. After being informed of the purpose of and need for the study and that their information would be kept confidential, the participants were asked to sign an informed consent form. Semistructured interviews provided the participants with the opportunity to share their stories and unique experiences related to the College's academic and social support services (see Creswell & Poth, 2018). I used journal writing (memos) to record and assist with analysis of data throughout the process until themes emerged.

The instrument used in this investigation was a set of interview question derived from a previous study conducted by Du Plessis et al. (2016). I obtained permission to modify the open-ended questions located in interview guide. I used the guide to promote consistency across all interviews as the same questions were asked of each participant. The interview guide contained 12 questions developed to assist in answering the two guiding RQs.

A semistructured approach allows for probing questions to prompt elaboration of ideas that participants express compared with structured interview formats (Creswell & Poth, 2018). I used an observation sheet to make notes regarding the participants' voice inflections and reactions to specific issues concerning the staff or academic and support services schedule relevant to the study's RQs. The interview guide was used to aid in data

collection and assist with preserving details regarding interactions during the Zoom meeting. According to Creswell and Poth (2018), the use of an observation sheet is to ensure there is equal attention to each interview dynamic, creating consistency and thoroughness in data collection.

Du Plessis et al. (2016) interviewed traditional BNS students to explore their perceptions of academic and social support services at two campuses of the University of Namibia. I gained permission from Du Plessis to use and modify the interview questions used in the study. The study is applicable to the current research because it explored the integration of academic and social support services implementation and its positive effect on traditional nursing student retention. In this study, I explored the perceptions of nontraditional former BSN students at WMCC about the influences, if any, that academic and social support services at WMCC had on their decisions to switch programs. I modified the instrument by altering the questions to apply to nontraditional former BSN students who voluntarily left the nursing program for another field of study in the first 2 years while matriculating at WMCC.

Procedures for Recruitment

I elicited participant recruitment support from the director of student affairs at WMCC to post a research flyer throughout campus and on its learning management system. The flyer specified the purpose of the research and identified the target population of currently enrolled nontraditional BSN students who switched from the nursing program within their first 2 years at WMCC. Also, the flyer shared the potential benefits of the study, the amount of time needed for an interview, and the incentive for

participating in the study. Each student who responded to the flyer via email received a letter of invitation and consent. The letter of invitation described the problem and purpose to the study. It also noted that the interview would be conducted through Zoom for 60 minutes. The letter of invitation stated that if a follow up interview was necessary, another Zoom meeting would be scheduled for 30 minutes. Finally, the letter indicated that participation in the study was voluntarily and withdrawal from the study was possible at any time. As a thank you, each participant received an electronic gift card from Starbucks.

Students who responded to the flyer simultaneously received a letter of consent with the letter of invitation. The letter of consent contained similar information to the letter of invitation and described the study's background, including the research problem and purpose. It also repeated the statement that the participant could withdraw from the study at any time. The letters differed in that the letter of consent had a paragraph describing the study's background. Finally, this letter discussed the risks and benefits of the study as well as how privacy would be maintained.

Procedures for Participation

Nontraditional former BSN students willing to participate in the study who emailed for more information received letters of invitation and consent. If the participant agreed to take part in the study, they were asked to reply to the email with the statement "I consent." After receiving the volunteer's reply, I scheduled a 60-minute audio-recorded Zoom interview at the date and time that accommodated their schedule. A Zoom invitation link with meeting ID, password, and toll-free telephone number was emailed

each participant with the day and time agreed upon for the interview. In preparation, the participants needed to locate a quiet space in their personal environment free from distraction and download the Zoom application on their computer or mobile device.

Many of the participant did not feel comfortable interviewing via Zoom; therefore, they used the toll-free telephone number provided in the email.

Procedures for Data Collection

I obtained data for this basic qualitative study from semistructured interviews using open-ended questions and journal notes written during the interviews for coding and analysis of data. Upon receiving consent forms from eight participants, I scheduled interviews through Zoom. Because of the COVID-19 pandemic, I was unable conduct inperson face-to-face interviews. Researchers have previously used Zoom as a method of collecting data through interviews (Creswell & Poth, 2018). Each interview lasted approximately 60 minutes. I conducted the interviews in an area free from distractions. At the time of the interview, the participants were given an opportunity to ask questions about the study and reminded of their right to withdraw at any time. I audio recorded the interview and wrote field notes that I used when analyzing the participants' responses.

Zoom is a web-based application that can be downloaded onto laptops or computers through Windows, Mac, Linux, and mobile devices across iOS, Android, and Blackberry (Archibald et al., 2019). Archibald et al. (2019) used Zoom to collect data from nursing participants to explore its feasibility and acceptability in a qualitative study. The results in this study indicated that ZOOM is easy to navigate, cost effective, and has several security measures. In this study, I only used the audio recording feature of ZOOM

rather than the video. The participants were contacted through email with a meeting ID, secure numerical password, and date with time of the meeting. The website application is also user friendly for participants who are not technologically astute by allowing them to dial in to the meeting using a toll-free telephone number, meeting ID, and secure numerical password. Zoom offers free recording of a single conversation up to 40 minutes; additional fees apply for conversations over this limit (Archibald et al., 2019).

An email reminder was sent out 1 week prior to the interview to confirm the Zoom date. None of the participants needed to reschedule. During the interview, I reviewed of the purpose of the study, discussed the participant's role, reviewed the confidentiality statement, and reminded the interviewee to contact me via email or telephone should they have questions related to the study; however, none did so. Also, I began each interview with a set of broad questions, which helped the participant relax and reflect on their perceptions of experiences that led them to switch programs within their first 2 years at the college and the influences, if any, academic and social support services at WMCC had on their decision. These initial questions were related to the two RQs and can be found in the interview guide (see Appendix A). After the end of each interview, I read the responses from each participant for clarity. The Zoom audio closed caption was turned on and used to transcribe each interview. No follow-up questions were necessary to clarify or expand upon vague or unfamiliar language, I sent an email to the participant to check their responses. At the conclusion of the study, I sent an email to each participant thanking them for their time and participation with a \$5.00 electronic gift card from Starbucks as was stated in the letter of invitation.

Data Analysis Plan

In this basic qualitative study, the data were collected through semistructured interviews and a researcher journal to identify the perceptions of nontraditional former BSN students regarding their experiences that led them to switch from the program. To answer RQ1, the first set of interview questions were designed to elicit responses to obtain in-depth perceptions of the participants' perceptions of experiences at WMCC that led them to switch from the BSN program to another program within their first 2 years. The second set of interview questions prompted the participants to provide information regarding their perceptions about the influences, if any, that academic and social support services at WMCC have on their decisions to switch from the BSN program, which aligned with RQ2. As I examined the data to address each RQs, I used open coding, reviewing the participants words for patterns, groups, subgroups, themes, and commonalities allowing the themes to emerge as recommended by Saldaña (2016).

In qualitative research, the purpose of data analysis is to identify convergent and divergent themes within and across interviews and observations through a series of coding the data (Creswell & Poth, 2018; Rose & Johnson, 2020). Coding is a process that involves several cycles, which I completed to analyse the study's data. During my initial coding cycle, I used open coding using words as codes derived from the perspectives of the interviewees. In the next step in the coding cycle, I triangulated the data through isolating each participant's response for analysis and comparison concerning each RQ for comparison and generation of categories.

After the triangulation, I organized patterns, commonalities, and life experiences into similar categories, subcategories, themes or concepts, and statements using the interviewee's words or short phrases (see Creswell & Poth, 2018; Saldaña, 2016. After each interview, I download and read the closed-captioning transcription feature from Zoom. I also listen and compared the Zoom audio-recording to ensure accuracy. As I read each transcript and analyzed the participant's words for meaning, I manually coded and sorted these into categories (see Creswell & Poth, 2018; Saldaña, 2016). As categories appeared, I classified the participants' perceptions by frequency of occurrence, organizing the codes into groups from broad to narrow categories and making sure not to insert bias by continuously referring back to my notes, transcripts, and memos (see Saldaña, 2016). After I categorized codes from the interviewee's responses, I used open coding and compared the coded phrases or sentences to show a relationship until themes emerged.

After the development of themes, I performed triangulation of the data (see Creswell & Poth, 2018; Saldaña, 2016). In this step, I triangulated the data using my researcher journal and memos to compare with the study's RQs. In keeping with qualitative research, I used a journal to acknowledge and set aside my personal biases to allow the participants to respond to the interview questions honestly and accurately. At the conclusion of each interview, I wrote about my experiences with the process, positive or negative, in my reflective journal. I also wrote what that experience meant, and what I learned from it (see Creswell & Poth, 2018; Saldaña, 2016). I organized the data by the primary meanings of the participants' impressions and answers to the interview questions

by labeling and grouping these into categories or themes (see Creswell & Poth, 2018; Saldaña, 2016). I made notes of insights and outliers that emerged in the data.

Next, I developed a summary statement from the emergent themes generated from the codes (see Creswell & Poth, 2018; Saldaña, 2016). Emergent themes served as explanations of the interviewees' interpretations of their feelings about a particular matter described in the study. I included discrepant data so as to include the perspective of all interviewees' because in this study, I sought to understand why nontraditional former BSN students switched from the program to another program and if MWCC's academic and social support services played a role in their decision. In case of discrepancies, I reviewed my notes to make certain that I read the Zoom closed captioned recording of the transcripts accurately, tagged the responses correctly, and grouped them appropriately (see Rose & Johnson, 2020; Saldaña).

Issues of Trustworthiness

Trustworthiness in qualitative research demonstrates that the study's results are reliable and authentic (Guba & Lincoln, 1998). In this section, I provided a description of several methods used to promote the study's trustworthiness. The first, creditability, includes the strategies used to ensure confidence in the study's findings. The second, transferability, includes evidence that this study's results could be used in other settings and with other participants (see Creswell & Poth, 2018). The third criteria, dependability, is a description of the procedures I used in this study so other researchers can follow and critique the research process (see Guba & Lincoln, 1998; Lorenz & Holland, 2020).

Finally, I discuss confirmability, which concerns how the study's findings are sustained

(see Creswell & Poth, 2018). Each of these components are necessary to promote trustworthiness and build confidence in my study.

During interviews to explore the participants' perceptions of the study's phenomenon, there was the potential for bias. Participant bias, for example, can occur when they choose to agree with the researcher (structured interviews with yes/no answers) to complete the interview, which typically happens once the participant is fatigued. To avoid participant bias, I wrote open-ended questions to stimulate conversation. Also, I guided the participant to provide truthful and honest answers by reframing each question, if necessary, for clarity.

The researcher may have their own bias(es). Leading questions demonstrate researcher bias where the questions can take the participants in the direction in which the researcher believes may provide them with favorable responses (Creswell & Poth, 2018). To avoid this, I kept the interview questions simple with special attention to words that could introduce bias. Additionally, I did not write questions that could prompt the participant to respond in favor of a particular assumption.

Another type of researcher bias is question-order bias, which concerns arranging questions to influence the responses to following questions. As a result, the participants may compare, and judge subsequent questions based on their response to the preceding question resulting in a biased and inaccurate answer. To avoid this, I asked general questions first before moving to specific or sensitive questions (see Creswell & Poth, 2018).

Credibility

Credibility is the confidence that can be placed in the truth of the research findings (Guba & Lincoln, 1998). To establish credibility, I used purposeful sampling, audit trails, and triangulation. With these strategies in mind, the participants selected for this study were nontraditional former BSN students who switched from the nursing program who met the study's criteria. I also used an audit trail, which provided transparency regarding the steps used to obtain the study's findings and included a record of narratives and descriptions of how I collected and analyzed the data (see Guba & Lincoln, 1998). Finally, I ensured credibility through triangulation by using the transcribed recorded interviews and my notes taken during the interviews regarding the perceptions of nontraditional former BSN students (see Guba & Lincoln, 1998).

Transferability

This study is credible but also transferable to other higher education institutions. According to Creswell and Poth (2018), transferability is established by providing readers with proof that the research findings could be applicable to other contexts, situations, times, and populations. In this study, I provide detailed descriptions of nontraditional former BSN students who switched from the nursing program during their first 2-years in college. I conducted this study and reported its findings in detail so researchers can make comparisons with other BSN nursing students at career colleges or undergraduate colleges and universities. I describe how findings could be applicable to other career colleges that offer bachelor's degrees in nursing and have graduation rate challenges among nontraditional nursing students. In addition, I address transferability by providing

an audit trail, a description of the career college involved, criteria for participants, number of participants involved, data collection methods, length of the interviews, and when data were collected.

Dependability

I followed the strategies for ensuring dependability as described by Creswell and Poth (2018) and Du Plessis et al. (2016) by documenting research procedures for others to follow, provide an audit trail, and evaluate the research process. Guba and Lincoln (1998) indicated that audit trails might be used to journal the progression of the researcher's thought processes during the data collection and analysis processes. Lorenz and Holland (2020) stressed that audit trails offer transparency through the management of a study's journal. I maintained an audit trail to illustrate how the findings of the study were based on the participants' responses as well as a description of how I collected and analyzed the data. To ensure dependability in this study, I used my journal throughout the data collection and analysis process.

Confirmability

Confirmability concerns the accuracy of the study's findings demonstrated by the data (Guba & Lincoln, 1998). To achieve this, I provided each participant with a transcript of their responses for verification of accuracy (see Creswell & Poth, 2018). None of the participants indicated their responses were inaccurate and no changes were made or placed in the audit trail. I asked my committee methodologist to determine whether my audit trail supported my findings; I demonstrated how each code was generated and how the final themes evolved.

Ethical Procedures

I adhered to the Walden University IRB's guidelines to gain access to the participants. In the IRB application, I stated that I requested assistance from the provost to send the study's recruitment flyer to the director of student affairs at WMCC to place it on the school's learning management system and post on campus announcement boards. The flyer had the title of the research, criteria for involvement in the study, incentive to be received at the conclusion of the study, and my contact information. Interested potential participants who emailed me received a letter of invitation and informed consent form via their school email address from my Walden University email address.

Throughout this study, I treated the participants with respect. They were provided with an informed consent letter and instructed that participation was voluntary and their privacy would be protected. The letter explained the study's purpose, procedures, risks, benefits of participation, and a description of confidentiality measures. This was emailed to the student and returned to me with the words "I consent" before the interview. The letter of consent also addressed my potential bias(es) by stating that I am a doctoral student at Walden University who currently works at WMCC; however, my roles at the College are separate from the circumstances surrounding the study.

Confidentiality of participant data was maintained by using pseudonyms when publishing the results and storing data in locked files or password-protected electronic files. In addition, interview transcripts and observation notes were identified by the participant's pseudonym. Identifiable data was not used in publication of this study's findings.

Prior to collecting data, I obtained permission (IRB approval number: 08-11-21-0561724) to conduct research from Walden University and WMCC. In accordance with WMCC's IRB, I signed a confidentiality statement not to disclose the participants' information to the College's faculty or staff. Additionally, as an employee of the college, I assured the participants that I would not disclose their responses to other faculty and staff, or any information derived through observation or interviews in the informed consent form. After 5 years from the conclusion of study, I will shred the hard copies of the materials and destroy all data, deleting electronic files on my password protected personal computer in my home office.

Summary

In this chapter, I discussed the manner in which I collected data from eight nontraditional former BSN students who switched programs within the first 2 years of enrollment at WMCC while currently matriculating at the College in another field of study. I used a basic qualitative approach to address the RQs, using semistructured interviews. After I completed the interviews, I transcribed the participants' responses and coded the data until themes emerged.

In Chapter 4, I will provide details of the study's setting and the participants' demographics. I will also describe specific codes, categories, and themes that emerged from the data. Additionally, the next chapter will address the patterns and themes developed from the responses associated with each RQ from the data analysis. Finally, I provide evidence of trustworthiness of the study related to credibility, transferability, dependability, and confirmability.

Chapter 4: Results

The purpose of this basic qualitative study was to explore the perceptions of the experiences that led nontraditional former BSN students at WMCC to switch from their nursing program to another program within the first 2 years of college. Also, in this study, I explored the perceptions of former BSN students at WMCC about influences, if any, that academic and social support services at WMCC had in the students' decisions to switch programs. To achieve this, I recruited eight nontraditional former BSN students to be interviewed in this study. I conducted semistructured interviews with questions designed to help answer the two RQs to explore the experiences that led to them to switch from the BSN program. Also, I sought to determine if there was a relationship between academic and social support services and their decision to switch from the BSN program. In this chapter, I discuss data collection and analysis and the results of my study.

Setting

After receiving IRB approval (No. 08-11-21-0561724) from Walden University and WMCC, my study's flier was emailed to the director of student affairs by the provost to post throughout the campus and its learning management system. There were two circumstances that changed in my procedures for recruitment and contact with the participants. First, the provost sent an email to the director of student affairs and included me in the correspondence. The second was the procedure for contacting participants. Initially, I planned that the participants would email me indicating that they would volunteer to participate in my study. However, all participants contacted me via my mobile phone number listed on the flier, indicating their willingness to participate in my

study. They also indicated they preferred to be contacted by telephone because they were not comfortable using technology and did not use email as a form of communication. However, I asked that they respond to my email, consenting to participate in my research study. Each participant gave me an email address to which I sent a letter of consent. I asked if they had replied with the words, "I consent" when we spoke again to set an interview date and time.

Demographics

I invited eight participants who were nontraditional former BSN students who switched from the program to another program during the first 2 years at WMCC. Semistructured interviews revealed that many of the participants had participated in several of WMCC's academic and social support services. The participants also discussed their sources of revenue to cover the cost of tuition. All interviews took place between September 11, 2021, and November 6 of the same year. I assigned alphanumeric identifiers to each participant to protect their identities and ensure confidentiality (P1-P8).

Data Collection

I obtained data for this basic qualitative study from semistructured interviews using open-ended questions and journal notes written during the interviews. After I received approval from Walden and WMCC, I emailed the study's flyer to campus provost who sent it to the director of student affairs, and it was posted throughout the campus and on WMCC's Canvas learning management system. I received telephone calls from eight nontraditional former BSN students indicating their willingness to participate in my study. After replying "I consent" to participate, I scheduled interviews through

Zoom. Because of the COVID-19 pandemic, I was unable to conduct in-person face-to-face interviews. Each interview lasted approximately 60 minutes. I requested that the participants find an area free from distractions for the interviews; some chose their home or car. The interviews were scheduled within 2 weeks after receiving the participants' consent to participate in the study. At the time of the interview, each participant was given an opportunity to ask questions about the study and reminded of their right to withdraw at any time. I audio recorded each interview and wrote field notes in my researcher journal that were used for analysis of the participants' responses.

The participants were contacted through email and text messaging with a meeting ID, secure numerical password, and date with the time of the meeting. The website application was user friendly for participants who were not technologically astute, allowing them to dial into the meeting using a toll-free telephone number, ID, and password. Zoom allows the recording of a single conversation up to 60 minutes. All eight participants used the toll-free number provided in the email on their scheduled date and time. An email reminder was sent out 1 week prior to the interview to confirm the Zoom date. None of the participants needed to reschedule. During each interview, I reviewed the purpose of the study, discussed the participant's role, reviewed the confidentiality statement, and reminded the interviewee to contact me via email or telephone should they have questions related to the study. Also, I started each interview with a set of broad questions, which helped the participant relax and reflect on their experiences with WMCC's academic and social support services.

Zoom audio closed captioning was used to transcribe each interview. After the end of each interview, I read a summary of each response for clarity. No follow-up questions were necessary to clarify or expand on a response. At the conclusion of the study, I sent an email to the participants thanking them for their time and participation in the study with a \$10.00 Starbucks electronic gift card as noted in the study's flier.

Data Analysis

In this basic qualitative study, data were collected through semistructured interviews and a researcher journal to identify the perceptions of nontraditional former BSN students regarding the experiences that led them to switch from the program. To answer RQ1, the first set of interview questions were designed to elicit responses to obtain in-depth perceptions of the participants' concerning the experiences that led to them switch from the BSN program to another program within their first 2 years in college. The second set of interview questions prompted the participants to provide their perceptions regarding what influence, if any, that academic and social support services at WCCC had on their decision to switch from the BSN program to another program within their first 2 years, which aligned with RQ2. Appendix B provides examples of the frequency of the 33 codes generated from the interviews arranged from the most recurring to the least. As I examined the data to address each RQ, I used open coding to identify patterns, groups, subgroups, themes, and commonalities, allowing the themes to emerge as recommended by Saldaña (2016).

I went through several steps in the coding process to analyze the study's data.

During the initial step, I generated open codes from each participant's response. In the

next step, I triangulated the data and isolated each participant's response for analysis and alignment with the RQs to generate categories. I calculated the frequency of each code and established categories to determine their meaning and generate themes. After the development of themes, I performed a second round of data triangulation (see Creswell & Poth, 2018; Saldaña, 2016). In this step, I triangulated the data using my researcher journal and memos, comparing these with the study's RQs. Appendix C shows codes, their frequency, the categories in which they were grouped, and the themes that emerged from the participants' responses. I will discuss each theme as it pertains to the study's two RQs and describe how these reflect the participants' experiences.

Evidence of Trustworthiness

Credibility

To establish credibility, I used purposeful sampling, audit trails, and triangulation of data. The participants were nontraditional former BSN students who switched from the nursing program who meet the study's criteria. I used an audit trail to provide transparency regarding the steps used to obtain the study's findings and included a record of narratives and descriptions of how I collected and analyzed the data (see Guba & Lincoln, 1998). I ensured credibility through triangulation by using the transcribed recorded interviews and my researcher journal with notes taken during the interviews regarding the perceptions of experiences of nontraditional former BSN students (see Guba & Lincoln, 1998).

Transferability

According to Creswell and Poth (2018), transferability is established by providing readers with proof that the research findings could be applicable to other contexts, situations, times, and populations. In this study, I describe how it could be applicable to other career colleges that offer bachelor's degrees in nursing and have graduation rate challenges among nontraditional nursing students. I addressed transferability by providing an audit trail, rich descriptions of the organization involved, restrictions regarding the type and number of participants, data collection methods, length of interviews, and when data were collected.

Dependability

I followed the strategies for ensuring dependability as described by Creswell and Poth (2018) and Du Plessis et al. (2016) by documenting research procedures, providing an audit trail, and evaluating the research process. Guba and Lincoln (1998) indicated that audit trails might be used to journal the progression of the researcher's thoughts during the data collection and analysis processes. Lorenz and Holland (2020) stressed that audit trails offer transparency through the management of a study's journal. I maintained an audit trail to illustrate how the findings of the study were based on the participants' responses as well as a description of how I collected and analyzed the data. To ensure dependability in this study, I used my researcher journal throughout the data collection and analysis processes.

Confirmability

Confirmability concerns the accuracy of the study's findings as demonstrated by the data (Guba & Lincoln, 1998). To achieve this, I provided each participant with a transcript of their responses for verification of accuracy (see Creswell & Poth, 2018). None of the participants indicated their responses were inaccurate and no change was placed in the audit trail. I also demonstrated how each code was generated, categories created, and the final themes evolved. I increased study credibility by exploring the perceptions of eight nontraditional former BSN students' real-life experiences with academic and social support services at WMCC using semistructured interviews. I triangulated the data collected from eight participants' interview responses with my researcher journal and memos. I reached study saturation with a sample size of eight participants. According to Charmaz (2004) a sample size of six to twelve participants is typically recommended for saturation in a study based on individual perspectives.

Results

I used a researcher journal to acknowledge and set aside biases to allow the participants to respond to the interview questions honestly and accurately. At the conclusion of each interview, I wrote about my experiences with the process, positive or negative in my researcher journal, what it meant, and what I learned from it (see Creswell & Poth, 2018; Saldaña, 2016). I organized the data by the participants' impressions and answers to the questions by labeling and grouping these into categories or themes (see Creswell & Poth, 2018; Saldaña, 2016). I made notes of my insights and outliers that emerged from the data.

After using my memos and participants words for initial codes, I developed a summary statement from the emergent themes generated from the codes and categories (see Creswell & Poth, 2018; Saldaña, 2016). The emergent themes represented the participants' interpretations or the meanings they ascribed to their perceptions regarding the subjects discussed in the interviews. I included discrepant cases to represent the perspectives of all interviewees as I sought to understand why nontraditional former BSN students switched from the program to another program, and if WMCC's academic and social support services played a role in this decision. When I encountered discrepant data, I reviewed my notes to make certain I read the Zoom closed captioned audio recording transcript accurately, tagged the responses correctly, and grouped them appropriately (see Rose & Johnson, 2020; Saldaña, 2016).

After the interviews with eight nontraditional former BSN students, I transcribed each interview to organize the data, searching for the meaning of words, which I then coded, and categorized by similarities and differences. Nine themes emerged from data analysis:

- Theme 1: Participants expressed feeling overwhelmed
- Theme 2: Lack of career pathway assessments
- Theme 3: Intrusive advisor
- Theme 4: Family support and encouragement
- Theme 5: Academic coach
- Theme 6: Financial resources

- Theme 7: Coping strategies and studying skills
- Theme 8: Not participating in nursing program events
- Theme 9: Reliable vehicle

Tables 1 and 2 demonstrates how the themes were generated from codes and categories and their correspondence to each RQ.

Table 1

RQ 1, Themes, Categories, and Codes

RQ	Themes	Categories	Codes
RQ1: What are the perceptions of nontraditional former BSN students at WMCC concerning the experiences that led them to switch from their nursing program to another program within their first 2 years of college?	Participants expressed feeling overwhelmed.	Personal reasonings	I tried every resource offered by the college to stay in the BSN program. I rarely have time to myself. I don't like online school. I don't want to take the [COVID-19] vaccine.
	Lack of career pathway assessments	New degree program	My new program coursework is easier than the BSN program. No one influenced my decision to switch from the program. There are several job opportunities in my new program.

Table 2

RQ 2, Themes, Categories, and Codes

RQ	Themes	Categories	Codes
RQ2: What are the perceptions of former BSN students at WMCC about the influences, if any, that academic and social	Intrusive advisor	Counseling	I met with my advisor to switch programs. I had met with the nursing advisor to discuss my class schedule.
support services at WMCC have on nontraditional former BSN students' decision to switch from the nursing program to another program within the first 2 years?	Family support and encouragement	Family nurturing	My family using my notes to perform a mock quiz. My children want to see my A papers to put on the frig. I have a room in my house for me to study. My husband checks on me every day about my schoolwork. My family reads my papers to ensure they make sense. I did not have time to spend with my family. My dad bragged to his buddies about me going back to school.
	Academic coach	Educational guidance	I met with my professor before or after classroom [sic]. Studying the definitions of terms did not help me in anatomy and physiology. The lecture portion of anatomy and physiology assessments were difficult to pass without the assistance of my tutor or professor.
	Financial resources	Revenue to cover tuition	I receive financial aid. I took a personal loan to pay for the cost of tuition. I received tuition reimbursement from my employer.

RQ	Themes	Categories	Codes
	Coping strategies and study skills	Academic support resources	I have been out of school for more than 10 years. I used the studied [sic] skills helped me prepare for all my exams. I had trouble with preparing for college class, so I attended the library coping and study skills online sessions. The program course was time consuming and difficult to balance the coursework with my personal demands. I did not know that coping and study skill sessions were offered.
	Not participating in nursing program events	Mentorship	I was assigned a mentor by the nursing advisor. I attended the Color Run, Breast Cancer Awareness 3K Walk, and blood pressure screening. I did not have time to participate in the mentorship program. I don't have time for extracurricular activities; I have to focus on passing my classes.
	Reliable vehicle	Transportation	I have a reliable car that I drive to school. I did not drive; my husband drops me off at school.

The participants described their perceptions of experiences with WMCC's academic and social support services. The nine themes represent the thick, rich descriptions provided by the participants of their experiences related to each RQ. The results are discussed using Tinto's (1975, 1993) SIM of academic and social integration as a lens to answer the study's RQs.

Results Related to RQ 1

RQ1: What are the perceptions of nontraditional former BSN students at WMCC concerning the experiences that led them to switch from their nursing program to another program within their first 2 years of college?

Former nontraditional BSN students were interviewed to describe their perceptions of experiences that led to their decision to switch from the program. Two themes emerged that applied to RQ1.

Theme 1: Participants Expressed Feeling Overwhelmed

The first theme, the participants expressed feeling overwhelmed, was derived from the group of codes in the category of personal reasoning and were less frequent than other participants' responses. Key phrases included, "I don't want the vaccine," "I don't like online classes," and "I tried every resource offered by the college to stay in the BSN program." Two of the participants, P4 and P8, did not want to take the vaccine. P6 and P7 stated they used all resources offered at WMCC to help them stay in the program. The other participants had other circumstances that led them to switch from the BSN program. P2 recalled,

The pandemic! Once the school went virtual. I left the program. If I wanted to go to an online school, I would have signed up for an online school. We met through Canvas Live, but I was no longer interested in the class. I met with the teacher and discussed my concerns about the class online. I need human interaction. My grades were good in the class, I got As on my tests and quizzes. I am someone who needs human interaction.

P3 stated.

I can say that the pace was too fast for me. Too many lessons in one day. I did not understand what was going on before she talked about something else. Let me say this, I followed the syllabus and read the chapter before class.

P5 noted, "I found that the program courses were time consuming and difficult to balance the coursework with my personal life demands." Each participant recalled their experiences that led them to switch from the BSN program.

Theme 2: Lack of Career Pathway Assessments

The second theme, lack of career pathway assessments, emerged from the participants' responses to interview questions regarding switching from the BSN program to another program. The codes were grouped into the category: a new degree program. The key phrases were (a) easier than the BSN program, (b) influences to switch programs, and (c) job opportunities. Each participant compared their experience with the BSN program and their current program. P1 stated,

The classes in early childhood education are far easier than the nursing course. I was so happy that I left that program! I understand the courses. I do not have [to]

see my teacher after class or schedule to meet with a tutor. Wow! I was so happy to get the feedback from my papers. I received positive feedback, sometimes with a star! I felt so good! I felt like a dummy in the nursing program. Did I tell you that I was glad that I left?

P3 recalled.

The special education program is far easier than the BSN program. I don't have to meet with the tutors as much as I did before. I still see her but not as often. I still make my notes before class while I read my textbook. I speak with my teacher after class to discuss the projects and group assignments, but the work is far easier and at a slow [sic] pace than the nursing classes.

Results Related to RQ 2

RQ2: What are the perceptions of former BSN students at WMCC about the influences, if any, that academic and social support services at WMCC have on nontraditional former BSN students' decision to switch from the nursing program to another program within the first 2 years?

Using Tinto's (1975, 1993) SIM of academic and social integration as a lens, the results of the study were divided into two subtopics: academic support services and social support services. Seven themes emerged from the data as I analyzed participants' responses to RQ2. In the following sections, I detail the categories and key phrases generated for each theme.

Theme 3: Intrusive Advisor

The third theme, intrusive advisor, applies to academic support services and was derived from the data as I analyzed interviewees' responses to communication from the nursing advisor. The key phrases used to group codes into the category of counseling were (a) I was assigned a mentor by the nursing adviser, (b) meeting to discuss class schedule, and (c) meeting to switch programs. All interviewees stated that the nursing advisor communicated through email regarding their class schedules, the mentor program, and program activities. Each participant recalled their interaction with the nursing advisor. P1 stated,

She would send an email to meet with me to pick up my schedule. When I met with her the last time, I told her that I was leaving the program because it was too hard. She asked me why I was leaving the program, I told her that I went to tutoring all that time just to get a B. We talked about the courses in the professional track and clinical experiences were going to be easier once I had the foundation courses. I just believe that the classes will be harder [than they were] going to be in the professional track courses. She understood finally understood that I was not going to change my mind. She asked which career path I wanted. I told her that I want to take classes in early childhood development. She helped me register for education classes and set up an appointment to meet with the education advisor.

P2 noted,

I believe that twice a semester that I would get an email from the nursing advisor. She wanted to set up an appointment to go over my schedule for the next semester. She gave me possible days and times that we could meet. I usually choose the earliest date and time. The last time, I emailed her to tell her that I was leaving the nursing program. She sent an email for a meeting. When we met, I told her that I was leaving the program because I do not like online school. She said that it was only because the governor of the state closed schools and limited social interaction because of the pandemic and wanted me to think about my decision to leave the program. I told [her] that I wanted to become a paramedic, but I would think about not leaving. After our call, I emailed her and told her that I was still leaving the program.

Theme 4: Family Support and Encouragement

The fourth theme, family support and encouragement, emerged from the data as I analyzed participants' response to family support when they decided to enroll in the BSN program. This theme was associated with the subtopic of family nurturing. The key phrases used to group codes into the (a) family used my notes to quiz me, (b) my children want to see my grades, (c) I have a room in my house to study, and (d) My dad brags to his buddy about me going back to school. Each participant fondly recalled their family memories of their family support. P1 recalled,

Oh, my! It's been extremely difficult. I have been married over 30 years. My husband understands that I want to go back to school to be a nurse. He made a study room in the house so I can do my homework and prepare for class. My

oldest grandchild encourages me. He calls and asks about my grades. He wants me to put my A papers on the refrigerator; I don't have any papers on the frig. I told him that the teacher kept my A papers to show them off. He just laughs.

Truth be told, I do not have any As on any of my assignments.

P2 explained,

My dad was so happy that he would have a college student in the house. He bragged to his buddies about me going to back to school. He was so happy that he drove me to school the first day and packed me a lunch like I was in elementary school. He's a good guy. I love him so much. That's why I had to take care of him when he got COVID.

P3 recalled,

I really did not have any challenges with my family life. My husband is supportive of me going to school. He made an office for me to study. He asks me about my school. I work at a job that does not require too much thinking. I can study at work, so I do not have any issues balancing school, work, and home.

P6 noted, "My oldest child uses my notes to quiz to see how much I know. One time, she brought a skeleton from the Dollar Tree to quiz me on bones. I did really well." P7 stated,

I remember I had to write a paper in English. My husband read my paper to make certain that it made sense. He has a good ear for listening to my problems adjusting to school. He made me a room in the basement for studying.

Theme 5: Academic Coach

The fifth theme, academic coach, developed from the data as I analyzed participants' response to the academic resources they used while enrolled in the BSN program. This theme also fell under the subtopic academic services. The educational guidance category was derived from the key phrases (a) definitions of terms did not help, difficulty of understanding the anatomy and physiology concepts, and (b) medical terminology did not help. Several of the participants (P1-P6) expressed difficulties understanding anatomy and physiology course concepts and spent at least 1 hour per week for 16 weeks receiving help with either a tutor or their professor. P5 shared,

While the teacher was talking, I had no idea what she was talking about. The cell is the basic unit of all life. What does that mean?" I had to get a better understanding of the cell function from my tutor.

P6 stated, "Actin and myosin contraction was too confusing. I watched several videos about muscle contraction, but I was still confused. The tutor helped with muscle contraction; I just never heard of those words before." Likewise, P3 stated, "Diffusion was so confusing until we talked about the respiratory and digestive system, which was in the second semester of anatomy and physiology. I met weekly with my instructor to review concepts that I did not understand."

Several of the interviewees expressed that the scientific physiological concepts were not easily understood without the help of a tutor or attending office hours with their professors. The use of study skill sessions and meeting with a tutor enhanced several of the interviewee's academic performance. P3 stated,

Before meeting with the tutor, I prepared for the anatomy and physiology test by studying the definition. My test scores were terrible, so I was embarrassed to discuss my score with anyone. This led me to set up weekly appointments with the tutor. I am so happy that I made that decision.

Similarly, P4 explained, "I failed the first two tests in anatomy and physiology until I met with a tutor. After meeting with the tutor, all my test scores were B's." P6 had a similar experience:

My first anatomy and physiology test score was a D. I met with my teacher who suggested tutoring. I set up an appointment with the tutor. We went over my notes and helped me study for my anatomy and physiology test. My teacher was happy that my test scores remained a B average.

Many of the participants stated that the lecture portion of anatomy and physiology assessments were difficult to pass without the assistance of a tutor or professor. All participants were enrolled in a beginning science course titled Introduction to Healthcare Careers. According to the participants, medical terminology was a large component of the course. P4 explained,

Medical terminology taught me prefixes and suffixes used in the medical profession. But what it does not teach is the understanding of medical concepts like cell function, muscle contraction, and nerve excitation. Those concepts were hard for me until I saw a tutor.

P6 noted,

Medical terminology helped with the anatomy and physiology lab but not the lecture. The word parts give a better understanding of what the science words mean but do not help with understanding cell function, muscle function, and nerve excitation. I had to go to a tutor to understand how the nerve excites.

P8 stated, "I did extremely well with the medical terminology, which helped with reading my anatomy and physiology textbook. Weekly tutoring helped me with muscle contraction and nerve excitation."

A few of the interviewees expressed that medical terminology was helpful, but they needed additional assistance with anatomy and physiology concepts.

Theme 6: Financial Resources

The sixth theme, effects of financial resources, emerged from the data as I analyzed participants' experiences with WMCC financial support services. This theme reflected the subtopic of social support services. The category of effective revenue to cover the cost of tuition included the key phrases (a) Free Application for Federal Student Aid (FAFSA), (b) tuition reimbursement, and (c) personal bank loan. The results showed that 87.5% of the participants had obtained financial resources from the federal government to assist them with college tuition. Only one participant did not qualify for financial aid and declined a government student loan to pay tuition.

All participants noted that the financial application process was easy. According to the eight participants, the financial aid process began after they were accepted to WMCC. Each participant met with the financial aid advisor, who reiterated the cost of tuition and discussed means for covering the cost through FAFSA. The participants were

escorted into a private room with computers to apply for financial assistance on the FAFSA website. Within a week, each was emailed a letter from FAFSA indicating their eligibility to receive financial assistance. One participant, P2, received tuition via employer-sponsored reimbursement. P2 shared, "At the end of each semester I have to complete a form for tuition reimbursement along with my school's transcript and highlight my grades. I will receive 25% of my tuition and 100% of my school fees."

All participants, except for P3, stated that they qualified for financial assistance to cover the cost of tuition. P3 explained,

I did not qualify for financial assistance through FAFSA because my husband and I make too much money. It would be cheaper for me to take a personal bank loan than pay the interest on government loans to pay for my tuition. I can pay the loan off with installments from my payroll check. So, I took a personal bank loan to cover the cost of tuition.

The interviewees were able to describe their experiences receiving financial resources to pay for their college tuition.

Theme 7: Coping Strategies and Studying Skills

The seventh theme, coping strategies and studying skills, emerged from data concerning the participants' responses to academic supportive resources. The key phrases used included in this category included, (a) graduated from high school 10 years or more ago, (b) I need help with studying, and (c) online study sessions. Several of the participants stated that it had been over 10 years since they were last in a formal education setting. Because of this, the participants relied on WMCC's study skills

sessions to help them improve in this area. Several of the interviewees had similar experiences adjusting to college. P3 recalled,

They had four sessions online. I watched all four sessions. They were extremely helpful. I remember one is about time management, uh, the other one was about class preparation, study skills, and making appointments for help in the class.

They were each 20 minutes long. I rewatched them and took notes. One of the best strategies that I could have used since I returned to school.

P4 stated,

I graduated high school more than 20 years ago. So, I had to find ways to improve my study skills. I heard about the study skills online sessions. I went to WMCC's library website and watched the videos. I learned how to write notes [and] read my syllabus for due dates and tests.

Another interviewee had similar experiences. P5 stated,

I helped my children with their homework, I thought I knew how to study, but I was struggling understanding anatomy and physiology. I had been out of school for 20 years, so I needed help. I watched the library videos through online study skills. I found them extremely useful. I brought a planner to help me stay organized with all my class assignments, due dates, and tests.

P6 explained,

I've graduated from high school over 15 years ago. I had good grades but I forgot how to study. I found the school's online study session useful. I learned how to

use the class syllabus to organize my time to read before class and prepare for tests.

P8 noted,

I graduated high school more than 10 years ago. I watched those study skills sessions that the library had online. Yeah. I went to those sessions. They were helpful. I used those strategies to set appointments for the tutor and speak with my teacher. I learned how to study for my classes by reading the syllabus and wrote notes and questions for my teachers. And I learn [sic] time management skills for each class that means I set aside 2 hours per day for each class. That's why when I am at work, I will work on two classes while I sit down. I answer the phones at the call center, so I when I am not answering phones, I read my books and take notes.

The participants discussed their experiences returning to school using online study skills resources to help organize their course work, manage time, and seek academic support.

Theme 8: Not Participating in Nursing Program Events

The eighth theme, not participating in nursing program events, was derived from the data as I analyzed interviewees' response to their involvement in the mentorship program. This theme also applies to the subtopic of social support services. The key phrases were grouped into the category of mentorship and included, (a) I did not have time to participate in extracurricular activities, and (b) I attended some of the events. All of the interviewees stated they received an email from the nursing advisor assigning them

a mentor in the nursing program. All interviewees stated that they received a follow-up email from the mentor to meet for lunch. P1 stated,

Oh. That girl emailed me so much! I really did not mind. She helped me to get to know the school and invited me out for nursing events. I really did not have the time to meet with her. I was focusing on passing my classes.

P2 noted, "I did not have time to participate in the mentorship program. I have to focus on passing my class, anatomy and physiology. It was too hard, but I managed to get a B with the help of my tutor." P4 shared,

I received an email from the nursing advisor about the mentorship program along with my mentor. He contacted me through email with his phone number wanting to set up a time and date when we can meet. I met with him for lunch; we had a good talk. He told me about his experiences in the nursing program and which teacher to take. His advice was helpful but once we had to go online, I could not stay focused at home. It was so hard to take my classes online.

P5 recalled,

Before the school shut down in March, I met with my mentor for lunch regularly. Every time I see him in the cafeteria, we meet at the lunch table and talk. He's a good dude. I bounced my ideas off about writing English papers or dissections in the anatomy lab. He said that in the nursing labs there are simulations instead of dissections. We talked about our families and how we don't have time to play video games anymore.

Some participants met with their mentors for lunch to discuss upcoming nursing events; however, P3 commented, "I could not participate in all the activities because I had to study, but I did go to the Breast Cancer Awareness and blood pressure screening nursing events." P8 stated, "I attended the Color Run and Breast Cancer Awareness events." P7 added, "I attended three of the events: Breast Cancer Awareness, Color Run, and Walk 4 Warmth."

Theme 9: Reliable Vehicle

The ninth theme, reliable vehicle, was derived from the data I analyzed the interviewees' responses concerning their transportation to the WMCC campus. This theme also applies to the subtopic of social support services. The key phrases were grouped into the category of transportation During the interviews, all eight participants recalled there was no public transportation to WMCC. Additionally, the participants stated that WMCC was not located in an area where riding a bicycle or walking was feasible for pedestrians; therefore, each of the eight participants described their means of transportation to the WMCC campus. Seven participants used their own transportation to compute to campus. One participant stated that her husband brought her to WMCC.

Summary

The purpose of the basic qualitative study was to explore the perceptions of the experiences that led nontraditional former BSN students at WMCC to switch from their nursing program to another program within the first 2 years of college. Also, in this study, I explored the perceptions of former BSN students at WMCC about the influences, if any, academic and social support services at WMCC had in students' decisions to

switch programs. To achieve this, I conducted a basic qualitative study with semistructured interviews using the study's interview guide with eight nontraditional former BSN students who switched from a nursing program to another program within their first 2 years of college. I transcribed the interviews and analyzed the data using open coding. The codes were organized into categories from which I identified nine themes that aligned with the two RQs. Two themes emerged from the data that addressed RQ1: participants expressed feeling overwhelmed and lack of career pathway. Seven themes emerged that aligned with RQ2: intrusive advisor, family support and encouragement, academic coach, financial resources, coping strategies and study skills, not participating in nursing program events, and reliable transportation. In the next chapter, I will discuss the interpretations of the findings, the study's limitations, recommendations for further research, and its implications.

Chapter 5: Discussion, Conclusions, and Recommendations

The purpose of this basic qualitative study was to explore the perceptions of experiences that led nontraditional former BSN students to switch from the nursing program to another program within the first 2 years of college. Also, in this study, I explored the perceptions of former BSN students at WMCC about the influences, if any, academic and social support services at WMCC had in students' decisions to switch programs. To achieve this, I conducted a basic qualitative study using semistructured interviews of eight nontraditional former BSN students who switched from a nursing program to another program. Tinto's (1975, 1993) SIM of academic and social integration was used as a lens to explore the views of the participants. This study was conducted to fill a gap in the research literature examining the perceptions of students who switched from one degree program to another in their first 2 years. The participants provided several reasons why they left the BSN program, some of which were not related to Tinto's SIM of academic and social support services.

Interpretation of the Findings

I used Tinto's (1975, 1993) SIM of academic and social integration as a lens to explore nontraditional former BSN students' perceptions of WMCC's academic and social support services. I analyzed the data collected from semistructured interviews for RQ1: What were the perceptions of nontraditional former BSN students at WMCC concerning the experiences that led them to switch from their nursing program to another program within the first 2 years of enrollment? The participants' perceptions of their

experiences that led them to switch from the BSN program included: "I did not want to go online to take classes," "I do not want to take the vaccine," "I worked too hard for a B," "The pace was too fast," "I tried every resource offered by the college," and "I rarely have time to myself." The participants explained that their new degree program was much easier than the BSN program, and that there were several job opportunities in their current field of study. The participants also stated it was a personal decision to switch from the BSN program. The findings indicated that each participant had personal reasons that led them to switch from the BSN program.

I also used the semistructured interviews to collect data to answer RQ2: What are the perceptions of former BSN students at WMCC about the influences, if any, that academic and social support services at WMCC have on nontraditional former BSN students' decision to switch from the program to another program within the first 2 years? Findings of the study determined that these services did not have any influence on nontraditional former BSN students' decision to switch programs. The findings also demonstrated that Tinto's (1975, 1993) SIM model of academic and social integration applied regarding student retention at WMCC.

In the following sections, I provide a discussion of the study's findings and their connection to the nursing advisor, tutoring, mentorship, financial resources, coping strategies and studying skills and family support.

Nursing Advisor

Harrell and Reglin (2018) and Moody et al. (2018) discussed the importance of the nursing advisor's role in assisting college students with study skills, time

management, course selection, and personal issues that can impact academic performance. Harrell and Reglin stated that the role of a nursing adviser is to assist students by providing counseling, direct academic decisions pertaining to course schedules, offer guidance to navigate academic demands, and connect learners with other support programs that aid in retention toward graduation. Moody et al. noted the importance of providing nursing advisors with the critical knowledge that may have a positive effect on traditional college student retention. Commitment to student success in hiring a nursing advisor who interacts with students has had a positive effect on retention, leading to an increase in graduation rates (Harrell & Reglin, 2018; Moody et al., 2018). Findings of this current study showed that all eight nontraditional college student-participants interacted with the nursing advisor for class scheduling.

Tutoring

Batz et al. (2015) investigated the effectiveness of tutorial services on college student retention. Findings demonstrated that struggling traditional undergraduate biology students who regularly attended tutoring sessions scored 17% higher on observations, portfolios, projects, and exams compared to their colleagues who did not attend peer tutoring sessions. Results of a study by Mendes et al. (2017) showed that regular student participation in tutorial services led to the development of a rapport with colleagues and institutional support staff and a willingness to participate in the school's mentorship program. The findings of Mendes et al. are significant as traditional college student participation in tutoring can lead to an increase in academic performance, retention, and graduation rates. This current study's findings showed the nontraditional

college-student participants used tutorial services at least 5 hours per week for a 16-week semester. Although seven of the eight participants' course grades increased by using the tutorial services at WMCC.

Mentorship

Vinales (2015) provided details on trained mentor and mentee relationships and noted the value of a trained mentor who was familiar with nursing course formative assessments (e.g., essays and unit objectives) compared to summative assessments (e.g., midterms, final exams, or final project). This type of mentor-mentee relationship can be used to motivate students to improve their overall academic performance and persist in the nursing program. Mitchell (2018) and Williams (2015) found that nursing students' mentoring programs increased their social interactions at a higher education institution and promoted retention. At WMCC, the nursing program offers mentorship programs aligned with the curriculum and community activities. The findings in this study indicated that mentors were assigned to motivate and inform the mentees of nursing events. Six of the eight participants noted they participated in mentorship activities, but two declined to participate in the mentorship program. The nontraditional BSN students in this study who participated in school events remained at WMCC.

Financial Resources

Financial difficulties decrease traditional undergraduate student retention and have led to nursing student attrition (Atkins et al., 2016; Hlinka, 2017; Zolot, 2017).

Zolot (2017) found financial difficulties contributed to nursing students leaving the program. To resolve financial challenges faced by nursing students, Atkins et al. (2016)

and Zolot asserted that financial aid packages that allow for the purchase of textbooks and other course resources, which may influence retention. Both studies also indicated that campus-based loans and grants have had positive effects on traditional nursing student retention regardless of the type or amount of aid. Seven of the eight nontraditional student-participants in the current study qualified for government student loans; one acquired a bank loan to pay for college tuition. All the participants used some form of financial assistance to cover the cost of tuition.

Coping Strategies and Studying Skills

College social support programs are designed to help students adjust to college life, meet course syllabus deadlines, develop time management skills and study habits, as well as balance work with school (Betts et al., 2017; Jones et al., 2016). Betts et al. (2017) and Jones et al. (2016) found that college students' participation in a social support program led to development of a rapport with instructors and effective coping strategies to handle feelings of failure and the strain this placed on the student's family and social life. In the current study, seven of the eight nontraditional students utilized WMCC's online study skills strategies to help prepare for class exams and time management. One participant recalled not knowing about the coping and study skills sessions. Although most participants took advantage of the coping strategies and studying skills offered by the college.

Family Support

Family and academic conflicts are contributing factors to nursing student attrition (Atkins et al., 2016; Diefenbeck et al., 2016; Zolot, 2017). In this present study, the

findings showed that all eight participants received support from their spouse and children. Two participants recalled having daily conversations with their spouses regarding their classes. Two participants mentioned that their children wanted their graded papers to be posted on the refrigerator so they could be viewed by everyone in the family. Two participants stated that since returning to school, a room was created as a quiet space for them to study. One recalled that their family used notes to help them study and create a mock quiz. One spoke of family members reading their papers to help them gain clarity of the topics they were studying. The study's findings demonstrated that all eight participants had family support, which encouraged them to remain at WMCC.

Limitations of the Study

One limitation of this study was that it was conducted at single-site—a private not-for-profit career college rather than at an institution with multiple campuses, such as a public university. A single site location used to conduct research limits the number of participants, extends the time to conduct interviews, and collect data to reach saturation (Braun & Clarke, 2021). In this study, it took three months to recruit, conduct interviews, and to reach saturation.

Another limitation of this study was the small sample size of participants. In comparison to a state college with multiple locations and a large population of students, WMCC has a small enrollment. The small sample size, however, allowed me to concentrate on the depth of the data and complete an exhaustive analysis of the perceptions and experiences of nontraditional former nursing students. Even though a small sample size may be an advantage when using a qualitative approach, there can be

disadvantages. If the sample is too small, it will be can difficult to find significant relationships from the data to be considered representative of the groups to whom results will be generalized or transferred (Creswell & Poth, 2018). In this study, I conducted eight semistructured interviews with nontraditional former BSN students.

Recommendations

I recommend that there be additional investigation be conducted as a quantitative or mixed method approached to help determine why nontraditional former BSN students switched from their program to another program within the first 2 years of school. I also recommend that the participants be nontraditional students who have prior knowledge of the healthcare industry or have graduated from high school within 10 years. These studies might provide different findings regarding the participants' experiences with the nursing program's mentorship services, which are designed to motivate and encourage students to remain in this field of study.

The human anatomy and physiology class is generally accepted as a challenging course, often indicated by high drop-out rates, withdrawal, and failure (Slominski et al., 2019). This study's findings revealed that nontraditional former BSN students struggled with anatomy and physiology. Participants explained that they sought academic support with their instructor and made weekly appointments with a tutor. The academic support helped the participants to earn a passing grade in the course. Future studies might explore why nontraditional former BSN student switched from the program although they received academic support.

Gao et al. (2019) demonstrated that career pathway assessments provide evidence that career counseling assessments aid in determining if a career in nursing is the right choice for college students. Addressing college student career choices can help students select a pathway that can promote their well-being and positive outlook on future endeavors (Arslan, 2022). This study's findings demonstrated that the participants switched from the BSN program to pursue other careers. Seven of the eight participants transferred from the BSN program to non-healthcare careers. One of the eight participants enrolled in paramedic program while pursuing a bachelor's degree in healthcare administration. Further studies could be conducted to determine if career counseling would have a positive effect on nontraditional BSN student retention.

Implications

The participants in this study stated that multiple reasons and circumstances led them to switch from the BSN program to another program with in the first 2 years in college. The study's findings imply that nontraditional BSN student needs are different from those of traditional students. Nursing advisors, for example, help with course scheduling and organizing the mentorship program. Nontraditional BSN students may need additional support, which should be investigated. Also, the literature has indicated that a mentor-mentee relationship can have a positive effect on all students' academic performance and persistence in nursing programs (Mitchell, 2018; Williams, 2015). The findings in this study indicate that nontraditional BSN students who used tutoring services and utilized strategies to manage their time to adjust to college life spent less time in the mentorship program. As a recommendation for practice, the results shown that

nursing advisor should develop a partnership between mentor-mentee pairing with similar academic experiences and lifestyles that would help the mentee understand the importance of the mentorship program. Further investigation should be conducted to better understand mentorship needed for the nontraditional BSN student.

Also, the findings in this study imply that nontraditional BSN student needs for academic support differs from traditional students. Mendes et al. (2017) found that regular student participation in tutorial services led to a rapport with support staff. This current study showed that nontraditional former BSN participants who had been out of school 10 years for more utilized tutorial services regularly. The findings also indicate that the participants were academically deficient in foundational science, which led to spending more than 5 hours a week with a tutor or their instructor. As a recommendation for practice, tutorial service should use specific proven practices that are designed for nontraditional students that have been out of school for 10 years or more that would enhance their academic attributes. Research should be done regarding the types of tutorial support needed for nontraditional students who have been out of school for a decade.

Another implication of this study's findings is that nontraditional BSN students did not experience financial challenges. Difficulties paying for tuition and textbooks can have a direct effect on undergraduate student retention and have led to nursing student attrition (Atkins et al., 2016; Hlinka, 2017; Zolot, 2017). In this study, all eight nontraditional students had financial resources to pay for college tuition, fees, and textbooks. None of the nontraditional students switched from the BSN program for financial reasons; each participant pursued another degree program at WMCC. This study

findings recommendation for practice is to offer scholarships for nontraditional BSN students to help with college tuition in place of taking a personal loan to cover college expenses.

Finally, this study's findings indicate that traditional and nontraditional BSN students' needs differs with family support and coping and study skills. Coping strategies and study skills are offered to all students and are designed to help them adjust to college life, understand course syllabi deadlines, develop time management skills and study habits, and balance work with school (Betts et al., 2017; Jones et al., 2016). Nontraditional former BSN students utilized the strategies provided by WMCC for class organization and to improve study skills. These strategies maybe useful for traditional BSN students, but the study's findings suggest that additional resources maybe needed for nontraditional BSN students to remain in the nursing program. As a recommendation for practice, this result shown that proven strategies coping skills, time management skills should be adapted for nontraditional students that have been out of school for 10 years or more. Finally, the literature had demonstrated that family support is essential for college student to be retain (X. Chen, 2015; Fischer, 2016; Mudaly & Mtshali, 2018). All eight nontraditional former BSN students in this study received family support; however, more was needed for them to remain in the nursing program.

This study findings may bring positive social change by helping career college and other undergraduate college and university administrators and nursing directors to understand that nontraditional BSN students' academic and social support service needs are different from the traditional BSN student. The findings also imply that nontraditional

former BSN students had personal reasons why they switched from the nursing program, which were not directly related to the career college or academic and social support services. Furthermore, the study's findings may be significant to undergraduate higher education leadership to develop practices for nontraditional students who have been out of school for a decade or more to increase student retention. Finally, this study's findings could be used by higher education institutional leadership to adapt proven academic and social support services specially designed to increase the retention and graduation rates of nontraditional nursing students. An increase in nontraditional BSN student graduation will counteract the nursing shortage.

Conclusion

Few occupations are more beneficial to the health and welfare of society than professional nursing, which includes licensed practical nurse, RN, nurse practical, and nurse practitioner. Higher education is struggling to graduate sufficient number of BSN students to help balance the number of retiring nurses. Studies have shown there is a link between positive student retention and academic and social support services. However, a significant number of nontraditional BSN students who utilize academic and social support services are continuing to switch from the nursing program. The purpose of this basic qualitative study was to explore the perceptions of experiences that led nontraditional former BSN students to switch from their nursing program to another program within the first 2 years of college. Also, in this study, I explored the perceptions of former BSN students at WMCC about the influences, if any, that academic and social support services at WMCC had in their decisions to switch programs.

The study's findings showed that nontraditional former BSN students expressed feeling overwhelmed, which led them to switch from the nursing program. These experiences included unwillingness to get vaccinated, refusal to attend school online, and exhausting all resources available at WMCC. Also, the results indicated that nontraditional BSN students need to have career counseling to aid in their selection of a degree program that aligns with their educational attributes. The nontraditional former BSN students in this study utilized academic services, including nursing advising and tutoring. Tutoring benefited many of the participants and increased their overall academic performance. However, many of the participants did not regularly participate in the mentorship program because they were focused on improving their course grades. Students received financial aid or had the resources to cover the cost of tuition, had family support and encouragement, and utilized the coping and study skills strategies available at the school. The findings imply that academic and social support services are not specifically designed for nontraditional student retention. More studies are needed to determine what types of academic and social support resources are needed to retain nontraditional students in BSN programs.

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Appendix A: Interview Guide

RQ1: What are the perceptions of nontraditional former BSN students at WMCC concerning the experiences that led them to switch from their nursing program to another program within their first 2 years of college?

Interview Question 1: Tell me about your experiences in the BSN courses at

WMCC that led you to switch from the BSN program.

Possible Probe: Can you discuss your coursework experience with feedback

regarding exams and projects? Describe how, it any, the feedback led to your decision to switch from the BSN

program.

Possible Probe: If you received negative feedback from course assessments,

did you seek assistance from your professor or tutors? If so, can you describe your experiences with the professor or the

tutors?

Possible Probe: Can you describe your experience with the rigor in the BSN

program compared to your current program?

Interview Question 2: Can you discuss influences, if any, from close

relationships, colleagues, instructors, and advisor on your

decision to switch from the BSN program?

Interview Question 3: In your current program, can you describe any influences,

on job opportunity and/or job placement that may have influenced on your decision to switch from the BSN

program?

RQ2: What are the perceptions of former BSN students at WMCC about the influences, if any, that academic and social support services at WMCC have on nontraditional former BSN students' decision to switch from the nursing program to another program within the first 2 years?

Interview Question 4: Can you describe your experience with the nursing advisor?

Possible Probe: How often did you meet with the nursing advisor? How

would you describe your meeting?

Interview Question 5: Describe your experiences, if any, with financial services at

WMCC. Tell me about how you are paying for the cost of tuition, including class resources, household expenses, and

transportation.

Interview Question 6: Can you describe your experiences, if any, with WMCC's

mentorship program?

Possible Probe: How often did you meet with your mentor? How would

you describe your meeting?

Interview Question 7: Can you discuss some challenges you have experienced

balancing your course work demands and family life?

Possible Probe: Can you discuss the role of your family in your academic

endeavors?

Interview Question 8: Can you discuss your experiences, if any, with WMCC's

program coping strategies and study skills?

Possible Probe: How often, if any, did you attend the coping strategies and

study skills program seminars offered to every BSN

student?

Interview Question 9: Describe how the college integrates social service

projects into the curriculum.

Possible Probe: Can you discuss your experiences with the nursing

association's social service activities and how they relate to

the nursing program initiatives?

Interview Question 10: What support or resources do you think would have helped

you remain in the nursing program?

Interview Question 11: Is there anything else you'd like to tell me about your

experience with the College's nursing advisor, tutorial service, mentorship program, financial assistance, coping

strategies resources, and social service projects?

Appendix B: Codes and Order of Their Frequency

Codes	Code frequency
I met with my advisor to switch programs.	100%
I have been out of school for more than 10 years.	100%
I met with my professor before or after classroom	100%
I don't have to see the tutor as much.	100%
No one influenced my decision to switch from the	100%
program.	100/0
My new program coursework is easier than the BSN	100%
program.	100/0
I had met with the nursing advisor to discuss my	100%
class schedule.	100/0
There are several job opportunities in my new	100%
program.	100/0
I tried every resource offered by the college to stay	100%
in the BSN program.	10070
I was assigned a mentor by the nursing advisor.	100%
Studying the definitions of terms did not help me in	87.5%
anatomy and physiology.	0,1 0 ,0
I had a difficult time understanding the concepts in	87.5%
anatomy and physiology.	
The lecture portion of anatomy and physiology	87.5%
assessments were difficult to pass without	
the assistance of my tutor or professor.	
Anatomy lab was easy but the lecture was too much	87.5%
work.	
I had hope that introduction to healthcare which	87.5%
taught me medical terminology would have helped	
me understand anatomy and physiology.	
I needed a biology class that would prepare me for	87.5%
anatomy and physiology.	
I thought the anatomy and physiology course pace	87.5%
was too fast.	
I used the studied [sic] skills; they helped me prepare	87.5%
for all my exams.	
I saw a tutor weekly.	87.5%
I have reliable transportation.	87.5%
I receive financial aid.	75%
I had trouble with preparing for college class, so I	75%
attended the library coping and study skills online	
sessions.	
I attended the Color Run, Breast Cancer Awareness	62.5%
3K Walk, and blood pressure screening.	
I rarely have time to myself.	62.5%
I did not have time to participate in the mentorship	37.5%
program.	
My family using my notes to perform a mock quiz.	37.5
I did not know that coping and study skill sessions	25%

were offered.	
Codes	Code frequency
I don't like online school.	25%
My children want to see my A papers to put on the	25%
frig.	
I have a room in my house for me to study.	25%
My husband checks on me every day about my	25%
schoolwork.	
The program course was time consuming and	25%
difficult to balance the coursework with my personal	
demands.	
I don't have time for extracurricular activities; I have	25%
to focus on passing my classes	
My family reads my papers to ensure they make	12.5%
sense.	
I don't want to take the vaccine.	25%
I did not need to see a tutor to pass my classes.	12.5%
I did not have time to spend with my family.	12.5%
I took a personal loan to pay for the cost of tuition.	12.5%
I received tuition reimbursement from my employer.	12.5%
I do not drive; my husband drops me off for school.	12.5%
My dad bragged to his buddies about me going to	12.5%
back to school.	

Appendix C: Codes and Their Frequency, Categories, and Themes

Codes	Code frequency	Categories	Themes
I tried every resource offered by the college to stay in the	100%	Personal reasons	Participants expressed feeling overwhelmed
BSN program.			C
I rarely have time to myself.	62.5%		
I don't want to take the vaccine.	25%		
I don't like online school.	25%		
My new program coursework is easier than the BSN program.	100%	New degree program	Lack of career pathway assessments
No one influenced my decision to switch from the program.	100%		
There are several job opportunities in my new	100%		
program.			
I don't have to see the tutor as much.	100%		
I met with my advisor to switch	100%	Counseling	Intrusive advisor
programs. I had met with the nursing	100%		
advisor to discuss my class	10070		
schedule.			
My family using my notes to	37.5%	Family nurturing	Family support and
perform a mock quiz. My children want to see my A	25%		encouragement
papers to put on the frig. I have a room in my house for	25%		
me to study. My husband checks on me every day about my	25%		
schoolwork. My family reads my papers to	12.5%		
ensure they make sense. I did not have time to spend with my family.	12.5%		
My dad bragged to his buddies about me going to back to	12.5%		
school.			
I met with my professor before or after classroom.	100%	Educational guidance	Academic coach
Studying the definitions of terms did not help me in	87.5%		
anatomy and physiology. The lecture portion of anatomy and physiology assessments were difficult to pass without	87.5%		

the assistance of my tutor or professor.

nursing advisor. I attended the Color Run, Breast Cancer Awareness 3K Walk, and blood pressure screening. I don't have time for extracurricular activities; I have to focus on passing my classes. I have a reliable car that I drive To school. I did not drive; my husband program events program events Fransportation Reliable vehicle Reliable vehicle	Codes	Code frequency	Categories	Themes
Anatomy lab was easy, but the lecture was too much work. I needed a biology class that would prepare me for anatomy and physiology. I did not need to see a tutor to pass my classes. I receive financial aid. 75% Revenue to cover tuition 12.5% I received financial aid. 12.5% I received financial aid. 12.5% I received financial resources 12.5% I received tuition 12.5% I received tuition 12.5% I received tuition 12.5% I received tuition 12.5% I received financial resources 12.5% I received	understanding the concepts in	87.5%		
would prepare me for anatomy and physiology. I did not need to see a tutor to pass my classes. I receive financial aid. I took a personal loan to pay for the cost of tuition. I 22.5% I received tuition I 23.5% I received tuition I 24.5% I received tuition I 25.5% I Revenue to cover tuition I 25.5% I received tuition I 25.5% I Revenue to cover financial resources I tuition I 25.5% I Revenue to cover financial resources I tuition I 25.5% I Revenue to cover financial resources I tuition I 25.5% I Revenue to cover financial resources I tuition I 25.5% I Revenue to cover financial resources I tuition I 25.5% I Revenue to cover financial resources I tuition I Revenue to cover financial resources I tuition I 25.5% I Revenue to cover financial resources I tuition I 25.5% I Revenue to cover financial resources I tuition I 25.5% I Revenue to cover financial resources I tuition I 25.5% I Revenue to cover financial resources I tuition I 25.5% I Revenue to cover financial resources I tuition I 25.5% I Revenue to cover financial resources I development financial resources I tuition I 25.5% I Revenue to cover financial resources I tuition I 25.5% I Revenue to cover financial resources I tuition I 25.5% I Revenue to cover financial	Anatomy lab was easy, but the	87.5%		
I did not need to see a tutor to pass my classes. I receive financial aid. I 2.5% I academic supportive resources at study skills I study skills I seources I value financial aid. I 2.5% I had resources I value financial resources I value financial aid. I 2.5% I academic supportive resources I value financial resources I value financial aid. I 2.5% I academic supportive resources I value financial academic supportive resources I value financial and study skills I academic supportive resources I value financial and study skills I value financial academic supportive resources I val	would prepare me for anatomy	87.5%		
I receive financial aid. 75% Revenue to cover tuition I took a personal loan to pay for the cost of tuition 12.5% I received tuition 12.5% I lave been out of school for more than 10 years. I used the studied [sic] skills helped me prepare for all my exams. 87.5% I had trouble with preparing for 75% college class, so I attended the library coping and study skills online sessions. The program course was time consuming and difficult to balance the coursework with my personal demands. I did not know that coping and study skill sessions were offered. I was assigned a mentor by the nursing advisor. I attended the Color Run, 62.5% Breast Cancer Awareness 3K Walk, and blood pressure screening. I don't have time for 25% extracurricular activities; I have to focus on passing my classes. I have a reliable car that I drive To school. 87.5% I did not drive; my husband	I did not need to see a tutor to	12.5%		
for the cost of tuition. I received tuition I received I resources I resou	I receive financial aid.	75%		Financial resources
reimbursement from my employer. I have been out of school for more than 10 years. I used the studied [sic] skills helped me prepare for all my exams. I had trouble with preparing for college class, so I attended the library coping and study skills online sessions. The program course was time consuming and difficult to balance the coursework with my personal demands. I did not know that coping and study skill sessions were offered. I was assigned a mentor by the nursing advisor. I attended the Color Run, Breast Cancer Awareness 3K Walk, and blood pressure screening. I don't have time for extracurricular activities; I have to focus on passing my classes. I have a reliable car that I drive To school. I did not drive; my husband		12.5%		
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