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Experiences of Baccalaureate Prepared Nurses on Their Transition to Novice Faculty Members

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Walden University

College of Nursing

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Theresa Lombardo

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Walden University
2025

Abstract

Experiences of Baccalaureate Prepared Nurses on Their Transition to Novice Faculty

Members

by

Theresa Lombardo

MSN, Walden University, 2020

BScN, Lakehead University, 2013

Dissertation Submitted in Partial Fulfillment

of the Requirements for the Degree of

Doctor of Philosophy

Nursing

Walden University

November 2025

Abstract

The shortage of qualified nursing faculty in Canada threatens the ability to educate sufficient numbers of nurses to meet healthcare demands. Despite this, limited research explores how baccalaureate-prepared nurses experience the transition into nursing faculty roles. The purpose of this qualitative study, guided by Schoening's nurse educator transition model, was to explore the experiences of baccalaureate prepared nurses on the transition to novice nurse faculty members teaching in 2-year diploma prepared nursing programs in Northwestern Ontario. Five semi-structured interviews were conducted with baccalaureate-prepared novice nursing faculty members, analyzed, and transcribed using Zoom. Data were coded and analyzed using Saldana's first and second cycle coding methods. Four major themes emerged: (a) anticipation of structured support and preparedness, (b) lack of orientation and institutional support, (c) the emotional weight of role unpreparedness, and (d) lack of accessible, comprehensive, and timely teaching resources. Participants entered their roles with expectations of structured support and resources, but instead encountered a lack of orientation, insufficient mentorship, and limited managerial guidance. These challenges contributed to role stress, identity conflict, and significant emotional strain, often leaving participants overwhelmed, discouraged, and questioning their preparedness for academic responsibilities. Findings highlight the need for formal mentorship, comprehensive orientation programs, and timely access to teaching resources to enhance role satisfaction and retention. Implications for positive social change include improving faculty retention, strengthening the quality of nursing education, and supporting a sustainable nursing workforce.

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Dedication

This dissertation is dedicated to my family, whose love, patience, and encouragement made this journey possible. To my husband – thank you for your endless love, unwavering support, and belief in me through every late night and long day. I would choose you in every lifetime. To my children - you are my greatest motivation, and my proudest accomplishment. I hope you always know that with hard work and determination, you can achieve anything you dream of. And finally, to my parents and grandparents who have always believed in me, even when I didn't believe in myself. This achievement is as much yours as it is mine.

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Chapter 1: Introduction to the Study

Introduction

The shortage of nursing faculty is a well-documented problem in many countries including the United Kingdom, the United States, and Canada with projections suggesting a continued upward trend (Boamah et al., 2021). In 2023, nursing schools across Canada reported being unable to fill a total of 78 full-time nursing faculty positions, which was further hindered by the simultaneous retirement of 77 permanent faculty members (Canadian Association of Schools of Nursing, 2024). Furthermore, the persistent nation-wide nursing shortage, and aging population have resulted in the Ontario government pushing to increase capacity in nursing programs to meet the continuous demand for a larger nursing workforce, further highlighting the nursing faculty issue (Boamah et al., 2023; Canadian Association of Schools of Nursing, 2022). Moreover, nursing schools require adequate numbers of nursing faculty to teach the students in their programs, and a lack of faculty can impede admission numbers to these programs, therefore impacting the number of nursing graduates entering the workforce. To help address the faculty shortage, some diploma nursing programs in Ontario have resulted in hiring baccalaureate prepared nurses to fill these vacant positions, which typically had been held by nurses with master's or PhD degrees.

Existing literature that focuses on the phenomenon of transitioning into nursing faculty describes it as primarily negative in nature, producing feelings of stress, role strain and feelings of unpreparedness (Boamah et al., 2021). While there is considerable literature describing the specific experience of transitioning into novice nursing faculty

positions, studies predominantly involve master's or PhD prepared participants rather than baccalaureate prepared nurses, and Canadian settings are largely underrepresented. This identified gap in the literature highlights the need for further research in these areas which is addressed by this study that seeks to explore the experiences of baccalaureate prepared nurses on the transition to novice nurse faculty members teaching in 2-year diploma prepared nursing programs in Northwestern Ontario.

In Chapter 1, I provide background information for this study, including the gap in the literature it addresses, the problem statement and the purpose statement. The primary research question, theoretical framework, nature of the study, definitions, assumptions, scope, and delimitations are also discussed, culminating with the significance of the study and an introduction to Chapter 2.

Background

Canada, among many other countries, has been experiencing a significant shortage of nursing faculty (Boamah et al., 2021). Reports indicate that in 2023, 77 permanent nursing faculty members retired from Canadian nursing schools, when there was already a total of 45 vacant full-time nursing faculty positions. Projections for 2024 suggested that nursing schools would need to hire a minimum of 310 full-time faculty, 70 of which would need to be in the province of Ontario alone, and despite an alarming number of faculty positions remaining unfilled, almost 40% of Canadian nursing schools reported a significant lack of nurses with master's or PhDs applying to fill the vacancies (Canadian Association of Schools of Nursing, 2024). The nursing faculty shortage, along with the lack of national standard of education or professional requirements for nursing

faculty, has resulted in many nursing schools hiring experienced nurses with a bachelor's degree to fill in vacant positions in diploma-prepared nursing programs. This practice is to mitigate the effects of the global nursing faculty shortage.

The purpose of this overview was to explore the literature related to the experiences of nurses transitioning into novice nurse faculty roles in diploma prepared nursing programs in Canadian nursing schools. Diploma prepared nursing programs, while known as Associate Degree in Nursing programs in the United States, are referred to in Canada as practical nursing programs. This topic has not been examined in the nursing literature. Further exploration into this phenomenon identified a prominent gap that has not been explored in that while there is much evidence regarding the transition of nurses into novice nursing faculty roles, the literature predominantly identifies the faculty participants as being master's and PhD prepared.

Throughout the literature, transitioning from clinical nurse to novice faculty member is primarily described as being a negative experience with many experiential similarities to entering practice as a new graduate. Brown and Sorrell (2017) conducted a study to focus on the challenges encountered by novice nursing educators. Participants reported barriers and challenges to the nurse educator role of teaching unfamiliar content, lack of classroom skills, feelings of unpreparedness, lack of structure in the transition process, low level of self-confidence, lack of teaching skills and unfamiliarity with grading or evaluation methods.

A similar study by Bagley et al. (2018) explored the perceived barriers to the nurse educator role by nurses with graduate degrees. Participants reported lack of

confidence, nature of the job, job responsibilities, pressure and stress with things such as grading, and loss of self-identity as a nurse as barriers to entering nursing academia. Moreover, a study by Brower et al. (2022) explored the effect of transitioning from a clinical nurse to a nurse educator on the nurse's self-identity. Brower et al. found that the transition into a full-time educator role initially caused the participants to experience what they referred to as "transition to academia shock," with feelings of overwhelm due to their new obligations, and role expectations in areas of student advising, curriculum, and course components. Following the initial stage of transition to academia shock, Brower et al. found that the nurse educators identified two effects on their self-identity that were occurring simultaneously. These effects were reported as viewing themselves as being novices and viewing themselves as individuals who had undergone the loss of their professional identity as a nurse and the grief that accompanies that. The feelings of novice were reflected in the participants questioning their own knowledge, education and experience, and reporting feelings of starting over as a brand-new graduate in a new career (Brower et al., 2022). However, at a certain point, they began to see themselves as committed to a new purpose and professional identity with feeling the desire and ability to make a difference in nursing education and healthcare.

Existing literature on the transition to nursing faculty describes the experience as predominantly negative accompanied by a plethora of barriers and challenges, including feelings of overwhelm and unpreparedness, as well as self-confidence issues perpetuated by a reported lack of teaching skills (Bagley et al., 2018; Brower, 2022; Brown & Sorrell, 2017). In addition, research on the transition to nursing faculty is extremely limited in

Canadian settings. As Canada grapples with the persistent shortages of nurses and nursing faculty members, there is a strong need for research conducted in Canadian settings on the experiences of nurses transitioning to nursing faculty. Furthermore, as nursing faculty have historically been required to hold a master's or PhD degree, existing literature does not include research on the transition to nursing faculty as experienced by registered nurses holding only a baccalaureate degree. Exploring the baccalaureate-prepared nurse's experience of transitioning into a faculty role in Ontario colleges will provide much needed insight into the barriers and facilitators that impacted their transition into a nursing faculty position. The potential findings of this study can be compared against what is known about other nursing faculty populations in the existing literature to offer valuable insight for recommending programs that may aid in the development of recruitment and retainment strategies, as well as the implementation of specific orientation or mentorship programs for this unique population of nursing faculty. Furthermore, study findings may offer suggestions for facilitating a seamless, successful transition into the novice faculty position, increasing faculty role satisfaction, and improving the quality of instruction that nursing students in Ontario colleges receives.

Problem Statement

Little is known on the baccalaureate prepared nurse's experiences of transitioning into nurse faculty roles in 2-year diploma prepared nursing programs in Northwestern Ontario. Understanding the experiences of this unique population of nurse educators may provide valuable insight into strategies and content that can be incorporated into orientation and onboarding programs for newly hired baccalaureate prepared nursing

faculty members. With the continued projections of nursing faculty shortages, and ever-increasing demands for a larger nursing workforce, the potential for baccalaureate prepared nurses to continue filling vacant faculty positions in diploma-prepared nursing programs remains high.

It is essential to understand the experiences of baccalaureate prepared nurses on their transition into nursing faculty roles. Strategies for support, mentorship, and professional development accurately reflect what nursing programs must provide to retain these current faculty members is essential for exploration (Halton et al., 2024; McPherson & Wendler, 2023; Owens, 2017). The experiences of the baccalaureate prepared nurse on the transition into a nursing faculty role remain a meaningful gap in the literature that needs to be addressed.

Purpose of the Study

The purpose of this qualitative study was to explore the experiences of baccalaureate prepared nurses on the transition to novice nurse faculty members teaching in 2-year diploma prepared nursing programs in Northwestern Ontario. A descriptive qualitative approach was used to describe and understand their experiences. To accomplish this, I conducted audio-recorded semi-structured, in-depth interviews of community college nurse educators in Northwestern Ontario through Zoom.

Research Question

RQ: What are the experiences of baccalaureate nurses as they transition into faculty members teaching in 2-year diploma prepared nursing programs in Northwestern Ontario?

Conceptual Framework for the Study

The conceptual framework that guided the study was Schoening's nurse educator transition (NET) model, which was created to describe the social processes that occur when a nurse transitions to a nurse educator role (Schoening, 2013). The model identifies four key phases that occur during the role transition: 1) The Anticipatory/Expectation Phase; 2) The Disorientation Phase; 3) The Information-Seeking Phase; and 4) The Identity Formation Phase.

The first phase, Anticipatory/Expectation Phase, begins before the role transition commences, most often when the nurse has made the decision that they wish to pursue a role or career in academia (Schoening, 2013). The flexible lifestyle and career progression are often what appeals to the nurse in this phase and they are expected to look at their potential future role in academia with anticipation and excitement and look forward to being able to make a positive difference or influence on future generations of nursing students (Schoening, 2013).

The second phase, Disorientation, typically begins once the nurse has formally entered their new academic role, as a nurse educator where they commonly feel uncertainty regarding expectations, concerned about their place within academia, how they fit into this new career and from whom or where they can seek assistance or support within their new workplace (Schoening, 2013). Other key aspects of this phase include role ambiguity, the switch from clinical expert to novice educator, feelings of lack of mentorship, structure or support, and experiencing negative student encounters (Cangelosi, 2014).

In the third phase, Information Seeking, the nurse will have been working diligently to gather or seek information that they feel is required for them to adequately meet what is expected of them in their new role. This may involve having located a peer in the workplace to mentor them, asking specific questions to other employees in the organization, gathering various facts and information that pertain to their new role, as well as beginning to apply any past skills or knowledge that may relate to their new role (Schoening, 2013). Nurses in this stage often seek faculty development opportunities that may be offered at their workplace and may also over-prepare for the courses they teach.

In the fourth and final phase, Identity Formation, the nurse has begun to come into their own through the formation of their new identity as a nurse educator. They can recognize the distinct differences and similarities in the characteristics of relationships between nurse to patient and student to teaching and have learned to establish effective boundaries with their students (Schoening, 2013). The nurse is also able to begin focusing on their newly acquired teaching skills, refining their teaching style and progressively becoming more comfortable within their role as a nurse educator as they gradually accept new responsibility. This conceptual model is used in this study to help navigate interview questions as the four phases directly describe the social processes that occur during the transition from nurse-to-nurse educator, which is the main concept of interest.

Schoening's NET model has been used to better understand the role transition experience of nurses working in academia in various capacities. Wenner et al. (2020) validated all four phases of Schoening's model in their research on the work-role

transition of nurses who held part-time clinical educator positions, whereas Ambusaidi and Almaskari (2021) used the model to guide their study on understanding the transition from clinical nurse to nurse educator in Oman. More detail on Schoening's NET model is presented in Chapter 2.

Nature of the Study

To address the research question presented in this study, I used the descriptive qualitative method to gain insight regarding the experiences of baccalaureate prepared clinical nurses who transitioned into novice nurse faculty members teaching in 2-year diploma prepared nursing programs in Northwestern Ontario. I explored their experiences of transitioning into the novice nurse faculty role by conducting one-on-one semi-structured in-depth interviews utilizing a researcher-developed interview guide. Participants were asked open-ended questions to ensure they could provide as much detail as possible (Patton, 2015) on topics including their transition experience, role as nursing faculty, and barriers and support to the role transition.

Descriptive qualitative research is best suited for researchers seeking descriptive validity or an accurate description of an event that the majority of people who observed or participated in, would agree to be true (Sandelowski, 2000), making it an appropriate choice to address this research question that sought to obtain knowledge and understanding of the experiences of baccalaureate nurses as they transition into faculty members teaching in 2-year diploma prepared nursing programs in Northwestern Ontario. Data analysis occurred concurrently while the data collection was taking place and was manually coded using Saldana's descriptive coding to obtain code, categories and themes

that were reflective of the data and keeping with the descriptive qualitative approach (Kahlke, 2014).

Definitions

The following key terms were used frequently throughout this study:

Novice nurse faculty: A beginning nurse educator who has worked in the role for three or less years (Kumi-Yeboah & James, 2012; Miner, 2019).

Practical nursing program: The name of the diploma-prepared nursing programs offered at colleges in Ontario, Canada.

Transition to faculty: a change or shift in career to a position of teaching in an educational institution.

Assumptions

Assumptions are true, however cannot be verified (Polit & Beck, 2012). The primary assumption for this study was that baccalaureate prepared nursing faculty members would be interested in partaking in this study. As the participants are nursing faculty members, they may be on their vacation time when interviews are able to be schedules and may not be willing or available to participate at that time. I also assumed that the participants chosen for this study would be truthful in identifying themselves as a novice nurse faculty member who had been teaching for three or less years, while having a Bachelor's degree as their highest level of educational attainment. Another assumption was that the study participants would be open and honest in sharing their experiences about transitioning to the novice faculty role. Due to the subjective nature of the questions, some participants may be more inclined to share the negative aspects of their

transition if they had a particularly difficult semester teaching. Similarly, participants may also provide positive answers and experiences due to my presence as the researcher and awareness of my professional role as a nursing faculty member at a local college. These assumptions were necessary in the context of this study to explore the transition experiences of Bachelor's prepared nurses working in novice nurse faculty positions in diploma prepared nursing programs. These assumptions also supported the decision to use a descriptive qualitative method to study this population of nursing faculty members.

Scope and Delimitations

I conducted a qualitative study to obtain in-depth data about the experiences of bachelor's prepared clinical nurses that transitioned into novice nurse faculty positions in diploma prepared nursing programs. I chose the descriptive qualitative method.

Delimitations are restrictions that the researcher imposes in a study to determine what to include or exclude (Theofanidis & Fountouki, 2019). The scope of this study was limited to baccalaureate prepared novice nurse educators teaching in nursing diploma programs in Northwester Ontario; these individuals did not have any post graduate education such as a Master's or PhD degree and only had been in their faculty role for three or less years. Novice nurse educators were chosen because the experience of transitioning into their role would be more recent and easier to recall compared to more seasoned faculty members. In addition, the hiring of baccalaureate prepared nurses into faculty vacancies was not a common occurrence many years ago. Theoretical foundation of this qualitative study focused on the social processes that occur as a nurse transitions into a nurse educator role.

The theoretical framework for this study was the NET theory which outlines the social processes that occur as a nurse transitions from clinical practice into a nurse educator role. Initially I considered using Schlossberg's transition theory (1981), which analyzes human adaptation to transitions, including the relationships between the individual's perception, pre- and post- transition environments, the individual's characteristics, the transition itself and how they adapt as they move through specific phases following the transition (Schlossberg, 1981; Lindstrom, 2019). Schlossberg's transition model was not chosen as I felt Schoening's NET model was a closer fit for the purpose of the study as it was developed specifically about the transition to the nurse educator role. The findings from this study should be evaluated in baccalaureate prepared nurse educators in other areas of Canada to determine the transferability of the experiences of baccalaureate prepared nurse educators teaching in diploma prepared nursing programs.

Limitations

Limitations of this study included the challenges of recruiting appropriate participants, potential for researcher bias and likelihood of generalizability. A small sample size was collected of baccalaureate prepared novice nursing faculty teaching in diploma prepared nursing programs in Northwestern Ontario. Northwestern Ontario is a large geographical area that is quite remote and is secluded from the rest of the province of Ontario. As a result, accessing participants from the region was difficult. To address this issue, participant recruitment and data collection methods took place online to accommodate participants who did not live in the same location as myself.

As this study used a qualitative approach, it was important to be aware of and overcome bias and to ensure that I remained completely focused and present during each interview to obtain the most accurate understanding of what each participant said, and the information being collected. Since I am a nurse educator myself, the study had the potential to be vulnerable to researcher bias, which I addressed by using a journal as a tool in which I identified and put aside my own experiences of transitioning into academia. This ensured that past experiences, views and opinions were not imposed on the participants in any way.

Finally, due to the nature of qualitative research, the results of the study are not generalizable to all nursing programs, as faculty participants teaching at different academic institutions in the region may have varying experiences contingent on the policies and procedures at the institutional level. Despite this, the richness of the data allows for transferability.

Significance

This study is significant in that the findings contribute to filling a gap in understanding the experiences of baccalaureate prepared nurses on the transition into novice nurse faculty roles in diploma prepared nursing programs in Northwestern Ontario. Currently there is very minimal literature regarding the experience of novice nurse educators in Canada, and none that is specific to the Northwestern Ontario region. This study focused on faculty participants without graduate education and excluded any who had not taught didactic courses, therefore effectively obtaining data on the role transition experience of this particular faculty population, in an understudied region.

This research is important as understanding the transition experiences of this nursing faculty population provides insight into strategies that may help the development of faculty recruitment and retainment initiatives, as well as onboarding and orientation programs tailored to new nursing faculty with a baccalaureate degree. In addition, the isolation of Northwestern Ontario can impact the number of nursing faculty candidates, compared to larger regions, making it increasingly difficult to fill job vacancies. Obtaining a greater understanding of the role transition experience of nurses entering novice faculty positions in Northwestern Ontario can positively impact faculty retainment initiatives by ensuring support for faculty development in areas that struggles may be identified and continuing to improve in areas that are identified as being beneficial as the transition takes place.

Finally, the literature suggests that current and projected nursing faculty shortages impact the overall enrollment capacity of nursing programs and the quality and consistency of the nursing education the students receive, and ultimately the care that is provided to clients and families. In a time where the healthcare system in Canada is struggling, and more nurses are leaving the profession, there is a need to increase the nursing workforce to meet the demands of the aging population. A key piece to achieving this is by ensuring adequate enrollment in nursing programs, and the provision of quality nursing education, neither of which is possible without qualified, competent, and satisfied nursing faculty. The results of this study sheds light on the experience of transitioning into a novice faculty role as a baccalaureate prepared nurse and uncovers aspects of the transition that they felt supported in as well as aspects where they experienced

challenges. By using these findings to then improve programs, policies or procedures that impact the transition of nurses into novice faculty roles, nursing schools can then effectively improve the experience of faculty, ultimately leading to an improved quality of education for the nursing students. This leads to positive social change, as when faculty are feeling competent and supported, literature shows that more time is spent teaching and engaging with the students and therefore can lead to improved client experiences, equity, and safety in clinical and healthcare settings.

Summary

In this chapter, I provided introductory information to describe the gap of the experiences of baccalaureate prepared nurses on their transition into nursing faculty roles. In Chapter 2, I will discuss the literature search strategy, present a detailed explanation of the conceptual framework of this study and present a review of the literature on the experiences of nurses transitioning into faculty roles.

Chapter 2: Literature Review

Introduction

The purpose of the basic qualitative study was to identify and report the experiences of baccalaureate prepared nurses on the transition to nursing faculty members in diploma prepared nursing programs. In this literature review, I explore the experiences of graduate-prepared nurses on the transition into new nursing faculty positions. In Chapter 1, I presented the research question, the significance of the study and theoretical basis of this study. Chapter 2 includes literature search strategy, the theoretical foundation, the literature review related to the key variables and concepts, as well as a summary, and conclusion.

Literature Search Strategy

I conducted a literature search using the databases at the Walden University Library, Lakehead University Library and Confederation College Library. The following search engines were used: ProQuest Nursing & Allied Health Database, PubMed, MEDLINE, CINAHL Plus with full text, and Google Scholar. The following keywords were used to identify specific literature related to nursing educators: “novice nurse (ing) educator,” “novice nurse (ing) faculty,” “nurse (ing) faculty,” “nurse (ing) professor,” and “academic nurse educator.” The key word “baccalaureate prepared” was used to identify literature with participants who were not master’s or PhD prepared faculty members. To identify specific literature related to the act of transitioning into the faculty role, the following key words were used: “transition theory,” “transition to faculty,” “transition to academia,” “nurse educator transition,” and “role transition.” The key

words “Canada” and “Associate Degree in Nursing” were also used in conjunction with all key words to identify literature pertaining to Canada and the type of nursing program that faculty participants would be teaching in. Search parameters were narrowed to include only those publications in the English language. Studies were included from the disciplines of nursing, education, healthcare, and leadership. The keywords selected for this literature review were in alignment with the research question and included the inclusion and exclusion criteria. The abstracts of each article were reviewed to determine relevance.

Conceptual Framework

The conceptual framework for this study was Schoening’s (2013) NET model which was developed through a qualitative study and provides the basis for understanding the transitional processes that nurses experience as they transition from a role in clinical practice to a role in nursing academia. According to Schoening, there are four key phases that occur during the role transition: 1) The Anticipatory/Expectation Phase; 2) The Disorientation Phase; 3) The Information-Seeking Phase; and 4) The Identity Formation Phase.

The Anticipatory/Expectation phase takes place before the transition occurs, when the nurse initially expresses excitement about pursuing a career in academia, often drawn in by the idea of a flexible lifestyle and the potential to influence and shape future nursing students (Schoening, 2013). The second phase, Disorientation, begins once the nurse enters into the academic role, marked by uncertainty about role expectations, role ambiguity, and the shift from clinical expert to novice educator. Nurses in this phase

often feel unsupported, experience a lack of mentorship, and may struggle with negative student interactions (Cangelosi, 2014). In the Information Seeking phase, the nurse actively seeks information to meet role expectations, which may involve seeking a mentor, looking to colleagues for guidance, and pursuing professional development opportunities. Nurses in this phase may also over-prepare for their teaching responsibilities (Schoening, 2013). Finally, in the Identity Formation Phase, the nurse begins to develop their identity as a nurse educator. They refine their teaching style, establish boundaries with students, and grow more confident in their new role, taking on additional responsibilities as they adapt to their academic career (Schoening, 2013).

The use of Schoening's NET model has been gaining popularity in recent literature, either as the conceptual framework for which a research study is based on, or as a point of reference within the findings and results (Ambusaidi & Almaskari, 2021; Brown & Sorrell, 2017; Cangelosi, 2014; Carr, 2020; Owens, 2017; Shapiro, 2018; Summers, 2017; Wenner et al., 2020). A 2017 phenomenological study by Owens' explored and interpreted the perceptions of nurses on their need to learn pedagogical skills during their transition from expert clinician to part-time clinical instructor in a 2-year community college nursing program. The researchers used Schoening's (2013) study in their discussion of the findings as they indicated similarities between the phases of the NET model and participants reported role transition experiences and clinical instructor identify formation (Owens, 2017).

The validity of using the NET model for part-time nursing faculty transitional experiences was further corroborated with the qualitative, phenomenological study by

Wenner et al. (2020), which looked at the unique work-role transition that is experienced by nurses working simultaneously in both a clinical position and an academic clinical instructor position. Study findings validated each of the four phases of the NET model, with multiple participants reporting feeling that the start of new semesters or new courses cause them to cycle back to the first two transitional phases (Wenner et al., 2020). Comparatively, a qualitative study by Shapiro (2018) used the NET model in its conceptual framework to explore the role transition experiences of 14 full-time associate degree nursing faculty members.

While not used as the framework, the NET model is identified and referenced in similar studies that explore nurse educator role transition and the accompanying challenges, barriers and supportive strategies (Booth et al., 2016; Brown and Sorrell, 2017; Cangelosi, 2014; Summers, 2017), and is also featured in multiple reviews pertaining to similar topics including those by Ambusaidi and Almaskari (2021), Halton et al. (2024), and Summers (2017).

The use of Schoening's (2013) NET model for the conceptual framework of this study was solidified by the frequency of which the model was simply referenced throughout the literature regarding transition to nursing academia in various capacities. This model was used to make the connection between the experiences of the understudied population of baccalaureate prepared nurses on their transition into novice nursing faculty roles in 2-year diploma prepared nursing programs. During data analysis, the social processes that typically are shown in the model appeared in the coding of baccalaureate prepared nurses in the transition to nurse educator. Connection to the research purpose

was demonstrated through aiming to address the large gap in the literature concerning the transition experience of this unique nursing faculty population, and Schoening suggested that successful transition to a nursing faculty role is reliant on the nurse progressing through each of the four phases of the NET model. Utilizing this model provided guidance during the exploration of the transition experience of this population and was used in the formation of interview questions.

Literature Review Related to Key Variables and/or Concepts

The purpose of the literature review was to highlight the transition from clinical nurse to novice nurse educator, and the experiences of those nurses who make that transition. There has been much research conducted on the transition to faculty concerning nurses with either a master's or PhD degree, but there is minimal research conducted concerning nurses transitioning into faculty with a bachelor's level of education. In addition, there is minimal research concerning the transition from clinical nurse to novice nurse educator in Canadian settings.

Transition to Faculty

As a concept, *transition* can be described as a change in the field or career of practice (Barrow & Xu, 2021). For this prospective study, the concept *transition to faculty* will therefore be defined in simple terms as a change or shift in career to a position of teaching in an educational institution. While there are sparse studies on the experience of transitioning to nursing faculty in Canadian settings, this topic has been well studied in other countries in recent years, most notably the United States. The use of

the studies from the United States assumes generalizability of these findings to comparative Canadian population.

Transitioning into the faculty role is a concept that has been studied extensively in past and current literature, especially as the nursing faculty shortage remains a looming concern for the healthcare industry (Hoeksel et al., 2019; Stamps et al., 2021; Wenner et al., 2019). Hoffman (2019) suggested that the negative experiences that clinical nurses face as they transition into novice faculty roles may perpetuate the shortages of nursing faculty. This transition has been predominantly described as a difficult experience involving negative emotions, and a loss of identity that are fueled by a lack of preparation and a lack of support (Harper-McDonald & Taylor, 2020; Hunter & Hayter, 2019; McDermid et al., 2016; Schoening, 2013; Shapiro, 2018; Singh et al., 2022). The literature suggests that a seamless transition into a faculty position in nursing academia is the foundation to success as a nursing educator and is possible when appropriate support is in place. To summarize, the literature consistently describes the initial transition from clinical nurse to novice nursing faculty as a challenging and negative experience, characterized by stress, anxiety, low confidence, confusion, and feelings of overwhelm and unpreparedness (Anderson, 2009; Duffy, 2013; Halton et al., 2024; Harper-McDonald & Taylor, 2020). Many new nurse educators experience role confusion and stress as they are thrust into an academic environment without clear expectations or guidance, despite their clinical expertise (Schoening, 2013; Summers, 2017). Studies such as those by Shapiro (2018) and Mutenga et al. (2023) further highlight the emotional turmoil of the transition to novice nursing faculty, describing it as chaotic, intimidating,

and full of uncertainty, with many new educators feeling largely unsupported in their new role. This internal struggle is compounded by a sense of returning to a “novice” status, despite being clinical experts in the field which leads to a role identity crisis (Harper-McDonald & Taylor, 2020; Ross & Kerrigan, 2020). Researchers liken this experience to “transition shock” (Duchscher, 2009), which is similar to the challenges faced by new nursing graduates entering clinical practice for the first time, further emphasizing the emotional and identity-related aspects of the transition.

Negative Emotions/Transition Shock

Throughout the literature, the initial transition into a faculty role has been predominantly described as a negative experience riddled with unpleasant feelings such as stress, anxiety, low confidence, confusion, overwhelm, doubt, unpreparedness and shock (Anderson, 2009; Duffy, 2013; Halton et al., 2024; Harper-McDonald & Taylor, 2020; Hoeksel et al., 2019; Majers, 2022; Owens, 2017; Schoening, 2013; Summers, 2017). Stress, perpetuated by hastily transitioning into the faculty role, and feelings of not knowing what to do, are prevalent (Owens, 2017). Anderson (2009) echoed this finding by metaphorically likening the experience of transitioning to nursing academia to that of drowning.

An integrated review of 27 articles focused on identifying factors that facilitate or impede a nurse educator’s transition into an educational role (Summer, 2017). The author concluded that novice nurse educators predominantly experience feelings of stress, role confusion, and a sense of overwhelm, which is compounded by a general lack of knowing what is expected of them in their new role. The author also notes that while the

participants in each study were considered to be experts in their clinical roles, and held graduate level education, difficulty adapting to their new role was a common finding.

All novice nursing faculty participants in a basic qualitative study by Shapiro (2018) echoed previous findings that the transition to a faculty role was difficult and challenging, further describing it as frightening, tough, overwhelming and chaotic. Similarly, Wenner and Hakim (2019), found that while the feelings and experiences nurses transitioning to a novice faculty role varied, there was a consensus that initial feelings were that of “anxiety, uncertainty, insecurity, and being overwhelmed” (p. 218). Likewise, Mutenga et al. (2023) conducted a qualitative study that focused on the experiences of being a new nurse educator. All participants either held a master’s degree or were currently enrolled in a master’s degree program. Findings indicated that all participants unanimously felt that the transition from a clinical role to that of nursing faculty was exciting and empowering, but also a time of great challenge. Feelings of disappointment, overwhelm, intimidation, fear, uncertainty, stress and worry were noted (Mutenga et al., 2023). The novice faculty also reported not receiving any support, guidance or mentorship and felt as though they were left to figure out the role on their own.

The negative emotions are perpetuated by what Ross and Kerrigan (2020) describe as an internal struggle that occurs as nurses, while considered clinical experts in their field, revert to novice when transitioning into a faculty role. This finding is corroborated by a qualitative study conducted by Hoffman (2019) that was designed to understand the transitional experiences that occur from clinical nurse to nurse faculty,

indicated a prominent theme in the findings was that of *perpetual* novice. Furthermore, Harper-McDonald and Taylor (2020) liken the transition from clinical expert to novice faculty member to a role identity crisis and assert that feelings of anxiety, inadequacy, fear and panic were prominent in their findings.

Researchers have likened the emotional experience of transitioning to a novice nursing faculty role to *transition shock* (Brower et al., 2022), a concept that was coined by Duchscher (2009) that describes the difficult experience that new nursing graduates endure during their first year of transitioning or adapting from student nurse to practicing nurse. As Duchscher explained, transition shock occurs due to the interaction of factors related to the new nurse's level of knowledge as well as their roles, responsibilities and relationships. Current literature corroborates the findings that transitioning to a faculty role holds many experiential similarities to that of a new graduate nurse transitioning into practice and further suggests that there is a loss of identity component taking place as well.

Loss of Identity

The transition from clinical nurse to novice nursing faculty is a complex process that influences the nurse's professional identity (Anderson, 2009; Aguayo-Gonzalez & Weise, 2021; Duffy, 2013). A process of reconstruction happens as their identity as a clinical nurse is used to begin the creation and adoption of their new identity as a novice faculty member (Aguayo-Gonzalez & Weise, 2021; Barrow & Xu, 2021; Brower et al., 2022; Logan et al., 2016; McDermid et al., 2016; Owens, 2017; Summers, 2017; Shapiro, 2018).

The identity of nurses transitioning from a clinical to a faculty role has been studied in two different perspectives. Some studies suggest that in order to adequately move into an academic role, nurses must shift from their clinical identity to an academic identity, a process that may take years to complete (Lazzari et al., 2019). However, other studies take a different approach, suggesting instead that nurses do not give up their clinical identity when transitioning into a faculty role, but rather build and improve upon it (Duffy, 2013). This is reinforced by the explanation that educators must be viewed as coming from the nursing discipline, recognized by their clinical nursing roots and not be viewed as someone who previously was a nurse, but rather someone who still is, but in a different capacity (Bono-Neri, 2019).

A qualitative study in the United States conducted by Brower et al. (2022) looked at the effect of transitioning from a nursing role to an educator role on the nurses' self-identity. Semi-structured interviews were conducted of 8 Registered Nurses that were currently enrolled in a doctoral program, while simultaneously working at a hospital in a clinical role and teaching in a university setting. The four themes that emerged from the data were: transition to academia shock, being a novice, grief and loss, and grounded in purpose. The struggle with professional identity was furthered by the feelings of loss and grief that participants felt by losing clinical time, contact with patients, and concerns that family and friends would no longer view them as being a nurse (Brower et al., 2022). Findings indicate that participants expressed their experience of moving away from their clinical identity as they embraced their new nursing educator identity.

In contrast, a foundational study on this topic by Duffy (2013) indicated that nurses who transitioned into nursing faculty roles held a hybrid identity as they were both a nurse and an educator. This finding was corroborated in a recent 2021 study by Barrow and Xu, who reported that their identity as a nurse educator was an ‘extension and/or integration’ of their clinical nurse identity, refuting findings in previous studies suggesting a shift from one identity to another takes place. Participants strongly felt they still identified themselves as nurses and that the integration of the clinical nurse identity was foundational as they moved into the educator role and began constructing an identity reflective of their academic position (Barrow & Xu, 2021). Despite the creation of this hybrid identity, the nurse educators felt that the clinical and academic identities were often times still in conflict with one another and that striking a balance between the two was of primary importance as they sought to remain clinically current while embracing their role in academia (Barrow & Xu, 2021). Despite the consistency of identity being reported as a common issue occurring with the transition to a novice faculty role, other factors related to lack of preparation are equally as prevalent in the literature (Hunter & Hayter, 2019).

In summary, the transition from clinical nurse to novice nursing faculty is a multifaceted process that significantly impacts the nurse’s professional identity. The literature reveals two predominant perspectives on this transition. Some studies suggest that nurses must fully shift from their clinical identity to that of an academic identity (Lazzari et al., 2019), however other research highlights that this transformation does not need to include abandoning the clinical identity but rather integrating it with the new

educator role creating a hybrid identity (Barrow & Xu, 2021; Duffy, 2013). Ultimately, the development of this hybrid identity requires support and preparation, as educators balance their clinical skills with the demands of academia, striving to remain clinically current while fulfilling their teaching responsibilities (Barrow & Xu, 2021). Addressing these identity challenges is crucial to ensuring a successful transition into the novice faculty position.

Lack of Preparation

The cornerstone of increasing the nursing workforce is ensuring that the nursing programs have an adequate volume of qualified faculty members who are content experts and competent in their teaching skills to educate the students (Bagley et al., 2018; Booth et al., 2016; Clochesy et al., 2019). While the clinical experience that new nursing faculty possess is valuable, it does not prepare them for their new role, as teaching and nursing require two separate skill sets (Barken & Robstad, 2023; Booth et al., 2016, Brown & Sorrell, 2017; Majers, 2022). Clinical nurse experts have extensive, advanced knowledge in their area of nursing expertise, but are not prepared for the specific expectations that come with a role in academia (Cooley & DeGagne, 2016; Majers, 2022). New nursing faculty often lack formal education, training, or fundamental skills directly related to an academic role (Barken & Robstad, 2023; Grassley et al., 2020; Schoening, 2013; Shapiro, 2018). Likewise, they lack knowledge in areas such as nursing pedagogy, curriculum development, evaluation methods, and teaching and learning styles (Booth et al., 2016; Brown & Sorrell, 2017; Ross & Silver Dunker, 2019). Furthermore, Brown and Sorrell (2017), assert that novice nurse educators coming from a strictly clinical background lack

an understanding of the day-to-day tasks that are common in academia such as the creation of course items including syllabi, assignments, tests and exams. Participants in their study reported struggling with having to teach content that was unfamiliar to them or unrelated to their area of clinical expertise, an issue that was further compounded in instances where they did not receive preparation material or course textbooks (Brown & Sorrell, 2017).

A qualitative study by Bagley et al. (2018) explored the perceived barriers that prevent registered nurses from deciding to transition into the role of an academic nurse educator. Researchers conducted semi-structured interviews of 10 American registered nurses holding a master's degree that were not working in an academic setting at the time of the study. Two themes emerged from the data: perceptions of the academic educator role and barriers to becoming a nurse educator. While all participants reported engaging in the role of teacher in their current nursing position and felt that transitioning into an academic position would be similar, they stated a different knowledge base or skill set was needed. Additional knowledge and skills that participants felt were needed in an academic role that they did not possess as master's prepared nurses included "curriculum design, test item writing, teaching methods, evaluation, and research methods...more education and more experience with teaching and didactic roles...lesson planning and grading" (Bagley et al., 2018, p. 265). Notable barriers to transitioning into the role of an academic nurse educator were reported as a lack of confidence in their ability to teach, financial compensation, potential need for a doctoral degree, nature of the job and work environment, and job responsibilities of teaching.

These findings are corroborated by Barken and Robstad in their 2023 qualitative study conducted in Norway which sought to understand the transitional experiences of academic nurses, beginning with the initial transition from clinical practice, and continuing throughout the entirety of their career. Researchers conducted three focus group interviews with 17 nurse faculty members teaching in university nursing programs. As the study explored the transitional experiences over the entirety of a career, only one of the three themes was reflective of the initial transition experience from clinical nurse to a role in academia, “clinically confident, yet academically uncertain” (Barken & Robstad, 2023). Participants felt that they were unprepared for the challenging transition from a clinical nurse to an academic role as they were expected to have academic and pedagogical knowledge, skills, and experience beyond what they possessed with their clinical background. Participants also explained the desire to be assigned to a colleague to mentor them, stating they felt that they were thrown into the role without any assessment to ensure they knew how to perform the role correctly (Barken & Robstad, 2023).

To summarize, the nursing workforce is closely linked to the availability of qualified faculty who possess both content expertise and the necessary teaching skills to effectively educate nursing students (Bagley et al., 2018; Booth et al., 2016; Clochesy et al., 2019). However, the transition from clinical practice to academia has been shown to present significant challenges for novice nursing faculty as the clinical skills that make them experts in their field does not adequately prepare them for the unique demands of teaching (Barken & Robstad, 2023; Booth et al., 2016). Many novice nursing educators lack essential academic skills, such as curriculum design, pedagogy, and evaluation

methods (Brown & Sorrell, 2017; Ross & Silver Dunker, 2019), and struggle with unfamiliar tasks such as creating course syllabi and teaching non-clinical content (Brown & Sorrell, 2017). This gap in preparation has been shown to often lead to feelings of academic uncertainty, despite possessing clinical confidence (Barken & Robstad, 2023). Therefore, it is imperative that nursing programs seek to provide pedagogical training, structured support such as mentorship, and role-specific preparation to best assist novice nurse educators to succeed in their new academic role.

Support

Another facet of the transition to faculty experience is the absence or presence of support (Barken & Robstad, 2023). Methods of support for the novice nurse faculty member include provision of a comprehensive faculty specific orientation, and a mentorship program (Miner, 2019; Ross & Silver Dunker, 2019; Stamps, et al., 2021).

Ross and Silver Dunker (2019) asserted that as nurses transitioning into the novice faculty role do not yet have the pedagogical knowledge or experience required to be an educator, they must be provided with a faculty specific orientation. Stamps et al. (2021) indicated that orientation for novice nursing faculty members must be comprehensive. The researchers assert that topics to be covered in the orientation include knowledge about the academic institution, the nursing program they will be teaching in, applicable accreditation bodies, and a detailed overview of all facets of the nursing faculty role such as role expectations, available teaching resources, policies and procedures (Stamps, et al., 2021). Comparably, Miner (2019) conducted a qualitative study of eight novice nursing educators to address positive aspects of transitioning into a

nursing faculty role. Findings suggest that faculty support by way of a structured orientation, formal mentorship program, and willingness of faculty to share resources and material were cornerstones to a positive transitional experience (Miner, 2019). Brower et al. (2022) asserted that the transition to novice educator was best supported by peers, specifically by means of orientation programs and mentorship, both informal and formal.

Mentorship is identified as an important source of support for nurses who have just transitioned from clinical expert into the novice nursing faculty role (Harper-McDonald & Taylor; McDermid, 2016; Miner, 2019; Rogers et al., 2020; Stamps et al., 2021; Summers, 2017; Thomas et al., 2019). Mentorship programs allow experienced nursing faculty to interact and socialize with novice faculty and have been shown to provide numerous benefits such as pedagogical skill development, as well as clarity of role expectations, and responsibilities (Owens, 2017; Miner, 2019; Rogers et al., 2020; Thomas et al., 2019). Moreover, the faculty who report having been mentored have higher levels of job satisfaction and are more likely to remain in their position (Arian et al., 2018) which is important to note considering the current and projected concerns with the nursing faculty shortage (Meyer, 2020).

A qualitative descriptive research study conducted by Axiak and Axiak (2024) explored how nursing educators teaching in a college baccalaureate nursing program experienced the transition from clinical nurse to lecturer. Four themes were uncovered; embarking on a career change, the transition period, supporting each other, and communication. The researcher's findings notably differ from previous studies in that the participants stated that the transition from clinical nurse to academia was predominantly a

smooth, pleasant experience. This positive transitional experience was attributed to participants receiving a significant amount of guidance and support from their faculty colleagues (Axiak & Axiak, 2024). Furthermore, the researchers suggested that the data analysis revealed the emergence of an informal community of practice among the participants which literature suggests has been shown to mitigate the challenges that arise from transitioning from a clinical role to an academic one (Axiak & Axiak, 2024).

While mentorship has been demonstrated to be a cornerstone for the positive experience of successfully transitioning into a novice nursing faculty role, there is a stark inconsistency of the delivery of mentorship programs in nursing schools (Knowles, 2020; Tufano & Summers, 2025). A prominent theme in the study by Brower (2022) was more structure/mentoring, which transpired from participants reporting their concerns that there was no orientation or mentorship program available for novice faculty members in the program they were teaching in. Similarly, Shapiro (2018) indicated that while literature lists support and guidance as a preferred strategy to ease the transition into a novice nursing faculty role, the participants in their study noted that support, guidance, orientation, and mentorship were not provided during their transitional experience. Likewise, McPherson and Wendler (2023) in their qualitative study to identify how novice nursing faculty transition into positions in academia found that inadequate support was cited as a major contributor to nursing faculty turnover, suggesting that well-developed mentorship programs may be the best path forward. Moreover, some novice nursing faculty members have indicated that the lack of adequate guidance and absence of a formal mentorship program caused them to feel that the school of nursing they

worked for was uncaring and displayed no sense of duty to its newest educators (Singh et al., 2022).

To summarize, the transition from a clinical nurse to a novice nursing faculty is a complex process that can be shaped significantly by the presence or absence of adequate support systems at the organizational level. Current research highlights the importance of a comprehensive faculty-specific orientation as well as structured faculty mentorship programs to ensure a smooth, successful transition (Barken & Robstad, 2023; Miner, 2019; Stamps et al., 2021). Unfortunately, there remains a significant gap in the consistency and quality of support that is provided across nursing institutions (Knowles, 2020; Tufano & Summers, 2025). The lack of formal mentorship and orientation programs has been shown to be associated with negative transitional outcomes such as job dissatisfaction and higher faculty turnover rates (McPherson & Wendler, 2023; Shapiro, 2018). Therefore, further highlighting the need for structured mentorship and thorough orientation programs to foster successful transitions into novice nursing faculty positions, potentially mitigating the ongoing nursing faculty shortage (Meyer, 2020; Arian et al., 2018).

Summary and Conclusions

While the transition to faculty is a concept that is well studied in the literature, minimal studies take place in a Canadian setting. Furthermore, baccalaureate-prepared nurses represent a largely understudied population in the transition to faculty literature due to their rather new existence in academia as they are hired to teach in nursing programs to alleviate the current and projected faculty shortages. As a result, current

literature may not be generalizable to this novice population. This research study helps to fill the gap in understanding the experiences of baccalaureate prepared nurses transitioning into novice faculty roles in diploma prepared nursing programs in a region of Canada. Understanding the experiences of this distinct nursing faculty population may provide valuable insight into the creation and implementation of tailored orientation and onboarding programs that may help to retain nursing faculty and alleviate the nursing shortage.

In Chapter 3, I discuss a basic qualitative approach utilizing that NET model as the conceptual framework. I provide a detailed explanation of the research design, my role of the researcher, study methodology, and issues of trustworthiness.

Chapter 3: Research Method

Introduction

The purpose of this proposed qualitative study was to explore the experiences of baccalaureate prepared nurses on their transition to novice nurse faculty members teaching in 2-year diploma prepared nursing programs in Northwestern Ontario. In this chapter, I address the research design and rationale, my role as researcher, methodology, and issues of trustworthiness.

Research Design and Rationale

The following research question was used to guide this qualitative study: What are the experiences of baccalaureate nurses as they transition into faculty members teaching in 2-year diploma prepared nursing programs in Northwestern Ontario? The central phenomenon studied was the transition to faculty for baccalaureate prepared nurses from clinical practice. To address the research question, a generic qualitative inquiry method was used, which according to Kahlke (2014), is also referred to in the literature as a basic qualitative or interpretive. Generic qualitative inquiry holds no formal attachments to a specific theoretical, philosophical, epistemological or ontological inquiry tradition and is described as an appropriate choice for answering research questions that seek to obtain knowledge and practical understanding of a real-world every-day issue, as well as to understand how individuals construct, interpret, or make understandings from their experiences (Kahlke, 2014; Kostere & Kostere, 2021; Patton, 2015).

There are two types of generic qualitative inquiry, the descriptive qualitative approach and the interpretive qualitative approach (Kahlke, 2014). The descriptive qualitative approach, according to Sandelowski (2000), is best suited for studies seeking descriptive validity or an accurate description of an event that the majority of people who observed or participated in, would agree to be true, whereas the interpretive approach is more appropriate for studies aiming to obtain an accurate account of the meanings that those participants attribute to that event. Given these descriptions, the descriptive approach of the generic qualitative inquiry was thought to be most suitable to address this research question that sought to obtain knowledge and understanding of the experiences of baccalaureate prepared nurses on the transition into nursing faculty members teaching in 2-year diploma prepared nursing programs in Northwestern Ontario.

Role of the Researcher

As a doctoral candidate, former full-time Health Disciplines program coordinator, and current full-time nursing faculty member working at a community college in Ontario, I have first-hand knowledge and experience with graduate prepared nurses transitioning into nursing faculty positions. In qualitative research, it is important for the researcher to disclose their role and bias, as their previous real-life experiences, knowledge, views, or assumptions can influence the research design and lead to preconceived notions. The researcher should also ensure to focus on the point of view, opinions and experiences of the participants, refraining from leading the participants to respond to questions with answers reflective of the researcher's preconceptions.

As the researcher in this qualitative study, I played an important role in conducting the one-on-one semi-structured interviews and analyzing the collected data. Due to my past experiences and shared professional background with the participants, it was vital that I remained cognizant of the potential for preconceived notions and put specific controls in place to mitigate the risk of bias. Processes that I put into place, and actions that I took to control for bias and ensure objectivity included the following:

- I utilized an online screening questionnaire to personally screen each potential participant to ensure that I did not have any personal connection to any participants, and that there was no previous or current work relationship with myself as a nursing faculty member.
- During the interview process, I utilized member checking by asking the participants to clarify their responses where necessary, but also by inviting them to review the transcript of their interview to ensure accuracy and credibility (Ahmed, 2024; McKim, 2023).
- To enhance the trustworthiness of the data I utilized a journal as a tool to identify and put aside my own experiences of transitioning into academia, which ensured that my past experiences, views and opinions were not imposed onto the participants in any way, and that as the researcher I remained transparent and nonjudgemental (Ahmed, 2024; Guba & Lincoln, 1989; Patton, 2015).

Methodology

Participant Selection Logic

For this qualitative research study, the target population was nursing faculty members teaching in the practical nursing program which is a 2-year diploma prepared nursing program. The specific criteria required to participate in this study included the following: (a) having a baccalaureate degree in nursing as their highest level of education, (b) a maximum of 3 years in the nursing faculty role, (c) currently teaching in a practical nursing program in Northwestern Ontario, and (d) was willing to share their experiences on transitioning into the nursing faculty role. The exclusion criteria for potential study participants were those nursing faculty members who have not taught any didactic nursing courses and those whose teaching experience was related to clinical or laboratory-based courses only. Participants were also required to provide their consent to be audio recorded, and to have their interview recordings transcribed.

The sampling strategies that were used to recruit study participants included purposeful sampling and snowball sampling. Purposeful sampling, also referred to as purposive sampling, involved the researcher having purposely chosen participants for the study that they know have experienced the phenomenon (Gill, 2020; Patton, 2015). I conducted purposeful sampling through the selection of participants who not only had experienced the phenomenon of transition to faculty, but that met the specific inclusion criteria to ensure their ability to provide information that was rich in content and relevant to the study (Patton, 2015). Snowball sampling allowed for the recruiting of participants to occur during the data collection phase, as study participants were asked to recommend

or refer other individuals that they believe may have been interested in participating (Gill, 2020; Leighton et al., 2021; Patton, 2015).

I asked each participant upon completion of their interview to share an emailed PDF of the study flyer with individuals that they felt might have had similar or different perspectives or may have been a good fit based on the focus of the study and required criteria (Patton, 2015). This method was appropriate for the study as many of the nursing faculty participants had colleagues or friends that they felt might have also experienced the phenomenon being studied and may have been interested in sharing their experiences as well (Leighton et al., 2021).

The PDF advertisement for the study (see Appendix A) was posted to my personal social media accounts, specifically Facebook, Instagram, and LinkedIn. Personal and professional contacts were asked to share the advertisement with any known nursing educators who might have been interested in participating. Potential participants expressed their interest in participating in the study by clicking the link or scanning the QR code on the advertisement to complete a short eligibility questionnaire (Appendix B). Those potential participants who had met the eligibility requirements based on their responses to the questionnaire received an email with a link to the informed consent form and a short survey about their demographics and availability for scheduling the interview (see Appendix C).

Data saturation occurred when no new concepts, themes or ideas arose from data collection (Creswell & Creswell, 2018; Patton, 2015). Data saturation accounted for most sample size justifications in a systematic review of 17 studies assessing saturation in

qualitative research (Hennink & Kaiser, 2021). Findings stated that in qualitative studies with a relatively homogenous population, data saturation can be reached within a smaller number of interviews (Hennink & Kaiser, 2021). In reference to the above guideline, and given the smaller population, the proposed sample size was eight to 10 participants, or until data saturation was reached and no new concepts, themes, ideas, or codes were revealed in the interviews.

Instrumentation

As the researcher for this study, I was the person who conducted the semi-structured interviews. I created a demographic data collection instrument (See Appendix C), which was a 5-question survey that was built and administered through Survey Monkey. The purpose of this initial online survey was to capture demographic data about the participants that passed the initial screening survey (Appendix B). This survey collected demographic information about the potential participants being recruited and included their availability for scheduling the virtual interview through Zoom.

Upon receiving the completed surveys, I used the email addresses provided to contact the potential participants to inform them that they had met the criteria. In this email, potential participants were provided with the consent form as well as the link to the demographic and interview availability questionnaire. The interviews followed the semi-structured interview guide that I created (see Appendix D), which incorporated concepts from the Nurse Educator Transition (NET) model (Schoening, 2013). This interview guide was used as a framework to allow for consistency during the interview; however, it was flexible to allow for further probing or follow up questions when needed.

Informal member checking occurred by clarifying participant responses to each question when necessary to ensure data was an accurate representation of the whole experience. The first question asked was a reiteration of the study's research question and asked the participant to describe their experience of transitioning into the novice nursing faculty role. The final interview question offered the participants an opportunity to share any further information, details or thoughts that might have been missed.

Procedures for Recruitment, Participation, and Data Collection

As the primary researcher, I was responsible for conducting all aspects of the proposed study which included recruitment, obtaining informed consent, interview conduction, audio recording and transcription, as well as the analysis and coding of all data. Once IRB approval was granted via protocol # 06-12-25-0535125, I began to recruit participants by using purposive sampling as described above. Furthermore, snowball sampling was also used to recruit participants that had been referred through those individuals who had been selected to participate. Potential study participants were recruited through a social media advertisement (see Appendix A) that was posted on my personal social media accounts on the platforms of Facebook, Instagram, and LinkedIn.

Individuals interested in participating in the study either clicked the link or scanned the QR code on the advertisement to complete the screening questionnaire (see Appendix B) through Survey Monkey which determined their eligibility. Those individuals who were eligible to participate in the study based on their responses to the screening questionnaire received an email which informed them of their eligibility and included the informed consent form in the body of the email, as well as a link to the

short survey through Survey Monkey about their demographics and availability for scheduling the Zoom interview (see Appendix C). The IRB approved informed consent section provided detailed information about the study and invited potential participants to email myself if they had any questions before they proceeded with the demographic questionnaire.

Interviews were scheduled on a date based upon the participants selected availability and were conducted through the Zoom platform on a computer in my home office to ensure privacy. Participants were informed that they were participating in a 60-minute in-depth semi-structured interview via Zoom. I explained that all interviews would be audio-recorded using the capabilities of the Zoom platform, and that their confidentiality and privacy would be protected using an assigned number, rather than using their name. Participants were reminded that they were free to stop the interview at any time. Once each interview had concluded, I answered any questions that the participants may have had, thanked them for their time and participation, and provided a \$15 incentive in the form of an online Starbucks gift card which was sent to them via their provided email address.

Data Analysis Plan

In keeping with the descriptive qualitative approach, the data analysis process began concurrently while data collection was taking place. Each participant interview was voice-recorded and then converted into timestamped transcripts using the capabilities of the Zoom software. Field notes and observations taken during each participant interview were written in a designated notebook. The interview recordings as well as the

generated transcripts were downloaded onto a password protected USB stick. All data was safely stored in a password protected safe in my home office to ensure that all participant information remained confidential and secure.

In qualitative studies involving interviews, data collection and data analysis become an iterative, cyclic process (Patton, 2015; Saldana, 2021). Analytical insights, emerging patterns and potential themes were noted and recorded during and after each interview (Patton, 2015; Saldana, 2021). Time was designated after each interview to allow for a thorough immersion into the collected data which involved the reading and reviewing of field notes and transcripts (Patton, 2015). Data were coded and analyzed using Saldana's first and second cycle coding methods to create categories and themes (Saldana, 2021).

First-cycle coding is described as processes that occur during the initial exploration of the data that produces preliminary codes (Saldana, 2021). There are seven subcategories of first cycle coding methods: Grammatical, Elemental, Affective, Literary and Language, Exploratory, Procedural, and Theming the Data (Saldana, 2021). The first cycle coding method utilized in this study involved a combination of two Elemental Coding Methods: In Vivo Coding and Descriptive Coding (Saldana, 2021). In Vivo coding refers to participant-generated words and phrases that are found in the qualitative data which in this case was the interview transcripts. This type of first-cycle coding is appropriate for all types of qualitative studies, is recommended for beginner researchers and is useful for capturing the meaning in participant's experience which was directly in line with the purpose of this study (Saldana, 2021). Each transcript was carefully read to

create a preliminary list of potential codes based upon those first impressions. Descriptive coding uses short phrases or words to identify the topic of a section of the data, effectively developing data categories at its basic level. While descriptive coding is appropriate for all types of qualitative studies, it is best suited for use with non-interview data, which for this study was field notes (Saldana, 2021). This combination of In Vivo Coding and Descriptive Coding in the first cycle formed the foundation for the second-cycle coding where further data analysis occurred.

Second-cycle coding is described as the process through which the researcher uses the first cycle codes to reorganize, reanalyze and condense the data (Saldana, 2021). An important point to note is that depending on the progression of first-cycle coding, second-cycle coding may not be necessary (Saldana, 2021). In this study, it was determined that second cycle coding was required, and therefore, Pattern Coding, which is known as a cumulative approach, was used (Saldana, 2021). Pattern Coding used the coded and categorized data from the first-cycle coding to create a synthesized summary of “categories, themes, or concepts” that were reflective of the explanations or meanings derived from the data (Saldana, 2021, p. 322). All coding was completed manually using each interview transcript, followed by the transfer of data and codes to a Microsoft Excel Spreadsheet.

Issues of Trustworthiness

Qualitative research focuses on the subjective nature of human experiences, behaviors, and attitudes, rather than the concrete numerical data of quantitative research. Therefore, it is imperative that researchers prioritize truth and rigor in their studies to

ensure that their findings are credible and reliable (Dodgson, 2019). In qualitative research, trustworthiness encompasses the elements of credibility, transferability, dependability, and confirmability, each of which will be discussed in relation to this research study.

Credibility

In qualitative research, credibility relates to the accuracy in which the study findings reflect the actual reality of the study participants (Ahmed, 2024). Credibility can be achieved when researchers utilize the processes of triangulation, member checking, peer inquiry audit, persistent observation and engagement with their participants over an extended period of time (Dodgson, 2019; Guba & Lincoln, 1989). In this study, I utilized the processes of persistent observation and member checking. As I have a shared professional background with the study participants, persistent observation involved ensuring that I recognized and stated my personal biases and used journaling to self-reflect over the course of the study (Ahmed, 2024). I utilized the process of member checking by asking participants to clarify their statements during the interview process as necessary and provided them with the opportunity to review their completed interview transcript to ensure accuracy (McKim, 2023).

Transferability

In qualitative research transferability relates to the degree in which the study findings can be generalized or transferred to other settings, populations or contexts (Ahmed, 2024; Guba & Lincoln, 1989; Patton, 2015). Transferability can be achieved when the researcher ensures that explanations of the study participants, environment, and

procedures are as descriptive, detailed and thorough as possible so that readers are able to accurately determine whether the study findings are relevant to other situations or contexts (Ahmed, 2024; Stalmeijer et al., 2024). In this study I aimed to enhance the transferability of the results by collecting comprehensive demographic data of the participants.

Dependability

In qualitative research dependability refers to the overall stability and consistency of the study findings across time (Ahmed, 2024). Dependability can be achieved when the researcher thoroughly describes and documents the entirety of the research project and the steps taken in a logical process from beginning to end in an audit trail (Ahmed, 2024; Korstjens & Moser, 2018; Patton, 2015). Dependability can be verified when other researchers use the documented processes, techniques and procedures to replicate the research study in the future and obtain similar results (Ahmed, 2024; Guba & Lincoln, 1989). For this study, in addition to keeping an audit trail, I achieved dependability by creating and following a clear, detailed interview guide, and ensured that the open-ended research questions were shared.

Confirmability

In qualitative research, confirmability refers to the objectivity of the study's data collection and findings, ensuring that they are not influenced by the views, preferences or biases of the researcher (Ahmed, 2024; Haq et al., 2023; Korstjens & Moser, 2018; Patton, 2015). Confirmability can be achieved through various processes including the use of audit trails, member checking, peer debriefing and reflexive journaling (Ahmed,

2024; Korstjens & Moser, 2018). As mentioned above, for this study I utilized the processes of audit trails and member checking. By inviting the participants to review the transcripts of their completed interviews for member checking, I addressed and enhanced the study's dependability by ensuring that the data collected, and therefore my interpretation, was based on the experiences of the participants and not on my own views or biases (Ahmed, 2024). Similarly, by keeping an audit trail, I enhanced dependability as it ensured that there was detailed, comprehensive documentation that described all decisions, processes and procedures of the entire research journey (Ahmed, 2024; Patton, 2015).

Ethical Procedures

As the researcher conducting this study, I ensured that ethical procedures and consideration were followed. Approval from the Walden University Institutional Review Board (IRB) was obtained prior to commencing data collection. I received IRB approval for this study on June 12, 2025 (IRB Approval No. # is 06-12-25-0535125).

Ethical concerns regarding the recruitment of participants were addressed by ensuring that each participant was given full disclosure on each aspect of the study including the purpose, benefits and how their information would be collected and used if they chose to participate. Participants were also informed that the study was voluntary, meaning they would not be pressured to participate and that they could choose to withdraw from the study at any point without question. Once receiving the necessary information, participants were provided with a consent form via email to sign if they chose to go forward with participating in the study.

Ethical concerns related to data collection were addressed through ensuring confidentiality by keeping participant identifying data, interview recordings, interview transcripts, researcher journal and participant consent documents on a password protected USB stick in a password protected safe in my home office. Access to any study data was limited to only myself as the primary researcher, and the Walden University faculty members that were part of my dissertation committee. This information will be destroyed once the study concludes, and the appropriate amount of time has passed according to the IRB.

Ethical concerns related to conflict of interests due to my previous and current roles in nursing academia were mitigated by screening participants to ensure that none of the study participants had a personal or professional relationship with me. I ensured that I identified and reported in my journal how my past experiences and current faculty role may cause researcher bias, and I refrained from imposing any assumptions or personal views on participants during the interview process and data analysis process.

Summary

In this chapter, I described the descriptive qualitative research design that I used for this study, and the rationale for its selection, as well as my role as the researcher. I also explained the research methodology including the participant selection logic, procedures for recruitment, participation and data collection, and instrumentation. Finally, I addressed issues of trustworthiness and the ethical considerations that were met throughout this qualitative study. In Chapter 4, I will present the findings of this qualitative research study.

Chapter 4: Results

Introduction

The purpose of this basic qualitative research study was to address the lack of qualitative studies on the transition experience of baccalaureate prepared nurses transitioning into novice nursing faculty positions. This study was conducted to explore, identify, and report the experiences of baccalaureate prepared nurses who had transitioned into a novice faculty role in practical nursing programs in Northwestern Ontario. The following research question guided this study: What are the experiences of baccalaureate nurses as they transition into faculty members teaching in 2-year diploma prepared nursing programs in Northwestern Ontario? Exploration of this research question began using components of Schoening's NET theory. An interview guide and prompts specific to the research topic allowed for clarification and a detailed recount of each participant's unique experience. This chapter includes the setting and demographics of participants as well as a thorough description of the collection methods and data analysis. The chapter ends with the study results, the evidence of trustworthiness, and a summary.

Setting

Upon receiving IRB approval for this basic qualitative research study on June 12, 2025 (IRB Approval No. # is 06-12-25-0535125), I began collecting data through Survey Monkey and Zoom. A total of 612 individuals completed the online participant recruitment screening hosted on Survey Monkey, but only six met the inclusion criteria. Those six participants completed the demographics survey hosted on Survey Monkey,

where they also listed their interview availability. These six participants completed the audio recorded interviews in a password-protected Zoom room. A table created in Microsoft Word was used as a log to track each participant's status, including an assigned numerical pseudonym and their dates and times preferred for scheduling an interview.

Demographics

I interviewed bachelor's prepared nurses working in novice faculty positions in diploma prepared nursing programs in Northwestern Ontario. The following inclusion criteria were used:

- Nursing faculty member who has been in the role for 3 or less years.
- Teaching in a practical nursing program in Northwestern Ontario.
- Baccalaureate or bachelor's degree as highest level of education.

While six participants were interviewed, there was one discrepant case in which a participant detailed an experience that was found to be not plausible within their working environment and thus the data associated with this participant was excluded from the data analysis process. Demographic data for the remaining five participants are included in Table 1 as well as in narrative format to allow for further explanation. All participants resided in, and were teaching in Northwestern Ontario, Canada. All five participants were female, and the highest level of education for each participant was listed as BScN/BSN. Years of experience as a nursing faculty member was mostly in the less than 6 months category. An additional demographic finding that emerged during the interview process was that two participants reported entering into their faculty role from lab instructor

positions, while the remaining three participants came from clinical instructor positions.

All participants reported teaching in practical nursing programs.

Table 1

Demographic Information of Participants

| Demographic information | Number of participants (<i>n</i> =5) |
|---|---------------------------------------|
| Highest level of education completed | |
| RPN | 0 |
| BScN/BSN | 5 |
| MSN | 0 |
| Doctorate | 0 |
| Other | 0 |
| Years of experience as a nursing faculty member | |
| < 6 months | 3 |
| 6-12 months | |
| 2 years | 1 |
| 3 years | 1 |
| Type of Program Taught | |
| Practical Nursing | 5 |
| BScN/BSN | 0 |
| Other | 0 |

Data Collection

Participant recruitment and the data collection process began once Walden University's IRB granted approval. An invitation was posted to my personal social media accounts on Facebook, Instagram, and LinkedIn. During the recruitment process, 612 individuals initially expressed interest in participating in the research study; however,

only six met the inclusion criteria. All six completed the demographic survey and provided their preferred dates and times to schedule the interview.

To obtain data for my study, I completed six interviews with bachelor's prepared novice faculty members who had or were teaching in a diploma prepared program in Northwestern Ontario. There was one discrepant case in which a participant detailed an experience that was found to be not plausible within their working environment and thus the data associated with this participant was excluded from the data analysis process, leaving 5 remaining participants. Upon receipt of the completed screening questionnaire, participants were sent an email informing them of their eligibility to participate in the study. The email also included the approved informed consent form as well as a link to a short demographic survey through SurveyMonkey with a section to select their availability for scheduling the Zoom interview. Interviews were then scheduled based on the availability of the participants and were conducted between July 8th, 2025, and July 24th, 2025.

A researcher-developed interview guide (see Appendix C), consisting of seven questions was used as a framework to ensure consistency during the interviews, but was flexible to allow for further probing, clarification or follow-up questions when needed. Field notes regarding thoughts and ideas were taken during each interview and written in a designated notebook to support data analysis. The first six questions focused on various aspects of the participants' experience in transitioning into a novice nursing faculty role. The final question was asked before the end of each participant interview: "Was there anything else that you would like to discuss that we have not touched on yet?"

All six interviews were audio-recorded within the Zoom audio/video-conferencing software. The length of the interviews varied with the shortest being approximately 15 minutes, and the longest lasting approximately 1 hour. Within the six interviews, it was clear that data saturation had been reached as repetition was occurring with no new concepts, ideas, or insights arising. At this time, it was determined that sufficient data had been obtained to answer the research question, and further recruitment was stopped. Once an interview was complete, the audio-recording and the verbatim transcript was then downloaded onto my personal password-protected computer and saved on a password-protected USB stick. Participants were also sent a thank-you email, which included a copy of the social media invitation for them to share with their colleagues or contacts.

Variation in Data Collection

There was a variation in the data collection from Chapter 3. Initially the recruitment strategy involved tagging the Registered Nurses Association of Ontario (@RNAO) in the social media postings and email them to ask if they would be willing to post my social media advertisement for the study onto their social media pages as well. I had emailed the president of the RNAO branch for our region, and she informed me that they are prohibited from sharing anything external on their social media pages.

Data Analysis

Data analysis was initiated concurrently with data collection and involved an iterative cycle of review and refinement between the interview data and the development of emerging codes, categories and themes. To mitigate the influence of researcher bias, I

engaged in journaling to identify and set aside my own experience and views of transitioning into academia, thereby allowing the experiences of the participants to guide the analytic process (Ahmed, 2024). I read each transcript repeatedly, with increased focus on the nuances of each participant's individual transition experience. Through this process, categories, themes and subthemes were derived from the data using Saldana's first and second cycle coding methods (Saldana, 2021). In Chapter 3, I indicated that I would use a combination of two elemental coding methods, *in vivo* coding and descriptive coding for the first cycle (Saldana, 2021).

In vivo coding refers to the use of the participants' own words and phrases, drawn directly from the data, which in this study was the interview transcripts. As a first-cycle coding method, it was particularly well-suited for capturing the authentic meaning embedded in each participants' experience, aligning closely with the purpose of the study (Saldana, 2021). Descriptive coding was also employed as a complementary first-cycle approach. This method involved assigning short words or phrases that summarize the basic topic of a segment of data, thereby developing categories at a foundational level. While applicable to all forms of qualitative research, descriptive coding is particularly appropriate for non-interview data (Saldana, 2021), and so for this study was used to analyze field notes which were a supplementary data source.

For the first cycle coding, each transcript was read and examined to generate a preliminary list of potential codes based on my initial impressions. A Microsoft Word document was created with a table in which the *in vivo* codes, associated lines of transcript, and participants' numerical identifier were entered. After the third interview,

categories and themes began to emerge, with the data beginning to align with previously grouped content in the Word document. After the first cycle coding of the final two interviews, no new codes, categories or themes arose, and it was determined that data saturation had been met, which resulted in the conclusion of further data collection.

Second-cycle coding involves reorganizing, refining, and condensing the codes generated during the first cycle, to advance the analytic process (Saldana, 2021). For this study, the second-cycle method chosen was pattern coding, which was used as a cumulative approach to synthesize the categorized data from first-cycle coding into higher-order categories, and themes that represent the underlying explanations and meanings of the participants' experiences as captured within the interview data (Saldana, 2021). The initial Microsoft Word document with the codes and categories derived from the first-cycle coding methods were extensively reviewed looking for repeated or similar codes, categories, and themes. A new document was created to further organize the data, and the codes were further grouped into new synthesized categories and themes. Table 2 presents these four themes that emerged from the data in addition to their descriptions to address the research question of exploring the experiences of baccalaureate nurses as they transition into faculty members teaching in 2-year diploma prepared nursing programs in Northwestern Ontario.

Table 2*Emergent Themes From Interview Transcripts*

| Themes | Descriptions |
|---|--|
| Theme 1: Anticipation of Structured Support and Preparedness | Anticipation of entering the new faculty role with clear guidance, support, resources and organizational preparedness to succeed. |
| Theme 2: Lack of Orientation and Institutional Support | Entering into their new positions without sufficient orientation, guidance, or support, left faculty to navigate the unfamiliar role and new responsibilities alone. |
| Theme 3: The Emotional Weight of Role Unpreparedness | Stepping into faculty roles without adequate training, guidance, or resources created significant role stress and strain, leaving the new faculty feeling unqualified, overwhelmed, and uncertain, eroding their confidence and shaping their early teaching identity. |
| Theme 4: Lack of Accessible, Comprehensive, and Timely Teaching Resources | New faculty experienced challenges in acquiring essential resources such as textbooks and course materials which are needed for effective teaching preparation and delivery. |

The table in Appendix D provides a more detailed view of data resulting from the analysis that occurred in the second-cycle coding, identifying the codes as well as associated categories and themes reflecting the overall experience of transitioning into the novice faculty role. These themes were used to address the central purpose of this research study, which was to explore the experiences of baccalaureate nurses on the transition to novice nurse faculty members teaching in 2-year diploma prepared nursing programs in Northwestern Ontario. In the Results section of this chapter, the findings of the themes will be presented.

Evidence of Trustworthiness

Credibility

Credibility was established through multiple strategies to ensure that the study findings accurately represented the experiences of the participants. Each transcript was verified against its corresponding audio recording to confirm accuracy. Additionally,

member checking was conducted during data collection by asking participants to clarify their statements during the interview as necessary, and after data collection by providing participants with the opportunity to review their transcripts to confirm accuracy. No requests for changes were received, reinforcing the accuracy of the transcripts. In alignment with the research design outlined in Chapter 3, credibility was further strengthened through persistent observation and reflexive journaling. Given my shared professional background with the participants, reflexive journaling was used throughout the research process to acknowledge and critically reflect on potential personal biases that might influence data interpretation. These combined strategies align with the recommendations of Guba and Lincoln (1989) and Ahmed (2024) for enhancing credibility in qualitative research.

Transferability

Although qualitative findings are not intended to be universally generalizable, deliberate efforts were made to enhance the transferability of the study. Rich description was provided through detailed accounts of participant demographics, the research environment, and study procedures. This level of description enables readers to assess the applicability of the findings to other contexts as different academic institutions may have varying policies and procedures at the institutional level that would impact the experience of nurses transitioning into novice faculty roles. In addition, direct quotations from participants are incorporated when presenting the themes, which allows readers to see how interpretations were further grounded in participants' voices. These strategies, consistent with recommendations by Guba and Lincoln (1989), Patton (2015), and

Stalmeijer et al. (2024), support the potential relevance of the findings to other nursing education contexts, particularly those involving faculty transition experiences.

Dependability

Dependability was supported by adhering to a clear and logical research process, as outlined in Chapter 3. An audit trail was maintained that documented each stage of the research process, from participant recruitment and data collection to analysis and theme development. The use of a researcher-developed interview guide with open-ended questions provided a consistent framework for data collection, while also allowing participants the flexibility to expand on their experiences in depth. Records of raw data, coding procedures, and analytic decisions were retained to ensure transparency and allow for verification on how findings were derived. As noted by Korstjens and Moser (2018), such practices enhance the dependability of qualitative research by ensuring that the study process is logical, traceable, and clearly documented.

Confirmability

Confirmability was addressed through strategies designed to ensure that the findings were shaped by participants' experience rather than researcher bias, ensuring objectivity in data collection and analysis. An audit trail provided detailed documentation of methodological decisions and analytic processes, ensuring transparency throughout the research process. Member checking further reinforced confirmability by enabling participants to verify the accuracy of their interview transcripts, ensuring that their voices were authentically represented in the data (Ahmed, 2024; McKim, 2023). Reflexive journaling was also used throughout the research to critically examine assumptions and

bracket personal perspectives. These strategies, consistent with previous recommendations (Ahmed, 2024; Haq et al., 2023; Patton, 2015), collectively ensured that the study's conclusions were grounded in participants' perspectives rather than the researcher's preconceptions.

Results

The following section presents the themes and respective subthemes that emerged from the data analysis process. The interview questions that were used during the data collection phase were created to capture rich data that would explore the experiences of baccalaureate nurses as they transition into faculty members teaching in 2-year diploma prepared nursing programs in Northwestern Ontario. There was one discrepant case in which a participant detailed an experience that was found to be not plausible within their working environment and thus the data associated with this participant were excluded from the data analysis process. The following four themes were identified from the interview data collected to answer the research question "What are the experiences of baccalaureate nurses as they transition into faculty members teaching in 2-year diploma prepared nursing programs in Northwestern Ontario?," a question relating to Schoening's NET model, and another relating to each participant's ideal role transition experience.

Anticipation of Structured Support and Preparedness

The theme of anticipation of structured support and preparedness describes the anticipation that new faculty members had of entering into their new role with clear guidance, support, resources and organizational preparedness to succeed. This theme reflects the new faculty member's anticipation of clear guidance, mentorship, and

preparedness at the organizational level to ease their transition into their new role.

Anticipation of support was mentioned numerous times by the participants as well as anticipation of being provided adequate time and resources. For instance, Participant 3 said, “I expected to have my director be more supportive and she wasn’t.” Participant 4 mentioned, “I assumed I would have a little bit more support just from other faculty members or my manager...went into it thinking that you were going to have like more support or more stuff provided to you.” Participant 5 shared, “I thought there would be at least one person I could go to who’d be able to answer some questions...and guide me and ensure that I was doing it correctly.”

Anticipation of adequate time was also mentioned by Participant 4 when they mentioned, “my expectations were that I would be given adequate time to do prep work.” Adequate resources were noted by Participants 1 and 3. Participant 1 stated, “I need a song sheet. I need something to go by.” This statement was echoed by Participant 3 when they mentioned “When I said yes [to this position], I assumed that all the things would be in place for me.”

Lack of Orientation and Institutional Support

The theme of lack of orientation and institutional support describes how entering into their new positions without sufficient orientation, guidance, or support, left faculty to navigate the unfamiliar role and new responsibilities alone. The theme describes novice faculty members’ feelings that their transition into their new role was hindered by systemic shortcomings across multiple levels of support and management. The absence of structured orientation, mentorship, and managerial guidance compounded feelings of

being unsupported and unprepared. Additionally, excessive workload, unrealistic time commitments, and inadequate compensation further strained the experience, leaving the novice faculty members feeling undervalued and overwhelmed. The amount of data associated with this theme was so significant that the findings were further examined in the context of the following five subthemes.

Initial Experience: Unclear and Challenging Beginnings

This subtheme was one of the first subthemes that emerged under the overarching theme of lack of orientation and institutional support. The novice faculty members reported receiving unclear expectations about their new roles, responsibilities, and the associated workload, which resulted in the initial transition being a challenging and overwhelming experience. While some participants reported having to develop course assignments and exams without any guidance or structure, others relayed being hired into their role with very short notice and minimal preparation time. These initial experiences caused uncertainty and led participants to experience frustration, feelings of disorganization, and doubts about whether they would have accepted the new role had they known what to expect at the beginning.

In relation to unclear expectations within the initial transition experience, Participant 2 said, “the expectations could have been significantly more transparent and clear.” Participant 5 shared that, “it was just very unorganized, which is what I struggled with...I don’t know what I’m supposed to be doing exactly, I didn’t really know exactly what was going on. Nothing was making sense.” The lack of guidance for creating course assignments and exams was mentioned by Participant 2: “after I agreed, then they had

said, oh in addition, you need to create an assignment, and a final exam. With no parameters, no examples, no framework.” Participant 3 discussed being hired into the role on very short notice by stating, “they reached out to me a week before class started and they asked me to do this.” Participant 2 similarly stated, “when I took the contract, like they had just kind of said, are you interested in lecturing? Here’s the course, here’s the syllabus.” Participant 2 relayed that had the information they received upfront been transparent about the expectations, they would have not accepted the contract: “I don’t know if I would have taken the contract if they had told me that again, being clear about expectations with regards to creation of assignments. Similarly, Participant 3 said, “If I knew what I know now, I would have said no.”

The overall challenging nature of the initial transition into the novice faculty role was discussed by all five participants. Participant 1 stated that, “it was a lot harder than people think it is...I found that challenging at first.” Participant 2 described the initial transition into the role as “challenging,” whereas Participant 3 stated that “it was quite challenging.” Participant 4 shared that, “I didn’t find the transition was as smooth as it could have gone,” whereas Participant 5 said that, “it was difficult from the start.”

Unsupported Transition Into Role

This subtheme was the most prominent subtheme that emerged under the overarching theme of lack of orientation and institutional support. Data that fell under this subtheme consistently highlighted the overall struggle with having an unsupported transition into the novice faculty role, including a lack of guidance, being expected to

figure everything out independently, and being given too much autonomy. Ultimately, this led to an overwhelming and challenging transition into the novice faculty role.

All five participants mentioned being expected to figure out their role on their own. Participant 1 discussed their experience as “just figuring that out on your own,” which was echoed by Participant 2: “I guess I’ll just figure it out from here.” Participant 3 shared that upon transitioning into the faculty role they were “trying to navigate, trying to catch on, trying to understand...I was on my own.” Participant 4 stated that in their first semester of teaching, it wasn’t until “half-way through, I got my bearings a little bit.” Participant 6 said, “I don’t know what I’m supposed to be doing exactly...I didn’t really know exactly what was going on.”

The terms “awful” and “challenging” were also used to describe the overall transition experience. Participant 3 stated, “it was challenging ... It was awful. It was a nightmare...It was awful. It was terrible.” Participant 5 mentioned that being expected to figure out the role on their own was, “definitely hard to work with.”

The feeling of being given too much autonomy was a sentiment expressed only by Participant 2 but was repeated multiple times throughout the interview. For example, when discussing their transition into the novice faculty role, Participant 2 mentioned not receiving any direction on how to teach the content in the course they were assigned, and shared, “the institution gave me a lot of autonomy...[they said] you can deliver it however you want,” and later reiterated, “Autonomy. You do whatever you want. You’re the expert.”

Four participants also used unique metaphors to describe their experience of transitioning into the novice faculty role unsupported. Participant 1 described their experience as “flying blind” twice within the interview. Participant 2 shared, “I’m just lost in the woods,” and then elaborated further with, “they just dropped me, and I’m just trying to navigate kind of everything around me.” On two separate occasions, when referring to their experience transitioning into the novice faculty role, Participant 3 said, “I was just basically thrown into the deep end,” which they reinforced further when they later said, “I was floundering.” Finally, Participant 4 likened their transition experience to being, “just thrown to the wolves and figure it out.”

Inconsistent or Absent Orientation, Training, Mentorship and Support

This subtheme was another prominent subtheme that emerged under the overarching theme of lack of orientation and institutional support. Orientation and training programs appeared fragmented and insufficient, ultimately undermining the novice faculty member’s confidence and performance during the early transition into the faculty role. Participants reported that orientation or training sessions either did not exist or had a short duration that focused on narrow aspect of the faculty role such as the simulation lab technology or how to navigate the online learning management system, leaving out critical teaching responsibilities such as content creation, assignment development, or how to navigate institutional expectations. For example, Participant 1 stated that during the initial transition into the novice faculty role they were left wondering, “Is there not some sort of orientation checklist?” The overall lack of orientation was a prominent topic of discussion for Participant 3, with statements such as,

“I had no orientation,” “I did not receive an orientation,” and “not having a formal orientation on how to access...how to navigate these online tools was incredibly challenging.” Participant 4 echoed a similar experience when discussing orientation and training: “there was none of that.” Participant 2 relayed that the only orientation they received was for a previous lab course they had been involved in and said, “I did receive a 4-hour orientation to the simulation lab itself, kind of how to work more with the technology components, like with the mannequins.” Participant 5 shared that they were provided with a 1-hour generic faculty orientation, stating that “it wasn’t super in depth, but it was at least something,” later elaborating that it “did not include any of that [creating content, expectations, resources].”

Lack of mentorship, guidance, and support were topics that were discussed by all five participants. Participants discussed either not being provided a mentor at all or having identified someone as helping them in an informal mentorship capacity where the assistance provided was dependent on their colleagues’ personal goodwill, rather than structured support organized by their employer. When the topic of mentorship was brought up, Participant 2 said, “I would say there was really no mentorship,” which was echoed by Participant 5, who stated, “there was none of that.” This was supported by Participant 3 who initially reported, “not one thing was provided,” but later in the interview discussed receiving assistance from another faculty member that they had reached out to on their own: “she’s pulling from her own personal time. Hours and hours trying to teach me how to navigate through.” Participant 3 further stated that had it not been for this other faculty member, “I would have crashed and burned as an instructor.”

Participant 5 reported a similar experience with having made the decision to reach out to another faculty member that they knew previously who supported them in an informal capacity: “someone I know had taught this before, so she was able to give me a lot of material. If it wasn’t for her, I honestly would have very, very much struggled.”

Participant 1 discussed mentorship in a different capacity by stating that their supervisor, “attached me to another faculty, not in the nursing program...she was kind of that go to person, like a mentor.”

Lack of guidance and support was also a prominent topic of discussion for most participants in various contexts such as being left to troubleshoot issues alone and no guidance with how or where to complete basic administrative tasks such as printing exams or accessing cover pages. Participant 2 discussed their desire or need for guidance and direction when they said, “I think it would have been a lot better to have a little bit more guidance,” and, “I think a little bit more direction would have been really helpful.” They later reiterated that in their experience transitioning into the nursing faculty role there was, “not a lot of guidance.” This was supported by Participant 6, who said, “there was no guidance or assistance.” They connected this to causing unnecessary anxiety and stress by stating, “I wasn’t really given much guidance, and as a person who had never done this before, I didn’t want to mess it up.” Participant 3 relayed a similar experience accompanied by similar feelings by stating, “it was incredibly challenging and discouraging,” and “there’s absolutely no safety net, no support from managers or directors...everything self-taught...there was nothing available for me.” When discussing their overall experience in transitioning into the faculty role, Participant 3 also brought up

the lack of guidance with basic administrative tasks, and said, “that was a future problem...about a week before the exam to say I’ve created the exam. Can you help me print it? Is there a cover page? Where can I pick it up? How does this work.” Overall, the lack of inconsistent orientation, training, structured mentorship and guidance that participants experience ultimately led to heightened stress, inefficiency and discouragement, reinforcing the difficulties in transitioning into the faculty role.

Management: Absent Guidance and Communication

This subtheme involves the issues that novice nursing faculty experienced when transitioning into their role by highlighting their concerns with managerial practices, particularly in the areas of guidance, support, and communication. Participants repeatedly described their supervisors or managers as unhelpful, unavailable, and often dismissive, even in times when they had directly reached out for assistance. Participant 2 stated, “they just pushed everything off,” and later described that they felt they were left all alone in that, “nobody’s checked on me. Nobody has emailed me to say, hey, how’s it going? Do you have any questions? How’s the group? Like no one’s checking in on me.” Similarly, Participant 3 discussed the lack of involvement from their manager by stating, “I reached out to my manager and they said it’s all self-learning, you need to do it yourself.” They later reiterated this same sentiment by stating, “she was unavailable to me” as well as “I had absolutely no support by my manager and the director, and, “they provided nothing for me.” Participant 4 felt that their manager initially seemed supportive of their transition into the role, but quickly realized it was not the case when the promise of a connection to another faculty member was not fulfilled: “they said another faculty

member would reach out just to get a little bit of guidance, but that didn't happen." When faced with student attendance concerns, Participant 4 also experienced a lack of support from their manager: "I reached out to my manager about how we can have these students attend class more. There wasn't a ton of support with that. The response I got was, well, they're adults they can make their own decisions." Participant 4 then added, "it's a little disheartening when you're putting that much effort into content, and you're told, if they don't show up they don't show up." Participant 6 described similar experiences: "when I reached out, she didn't have much guidance for me whatsoever." They later reaffirmed this with, "I reached out to her multiple times, and she would just say she didn't know...she was just kind of like, you do what you want to do."

Lack of communication from management was mentioned by three out of five participants in various contexts, including not receiving information about important faculty responsibilities such as assignment, exam or content creation, and basic procedural knowledge. Participant 2 described the difficulties they faced during transitioning into the faculty role by stating, "there was a lot of information that was not communicated to me...I felt that the overall dissemination of information was not well done." They further elaborated, and said, "I would get invited to meetings and things like that, and I really had no idea what the topic was," followed by, "It was not communicated to me that I would have to create an assignment and a final exam." Later in the interview, Participant 2 also mentioned that, "I had no idea where things are printed...and I don't even know like if the institution has a cover page." Participant 3 recalled having reached out to the manager on multiple occasions for help accessing resources to teach the course

they were assigned and having received no acknowledgement or communication in return: “just send me the resources. Crickets. I waited and waited and waited.” Similarly, Participant 6 discussed difficulties in receiving timely communication from their manager: “Took me a week to try to figure that out, to finally be getting through to somebody.” When faced with difficulties, they said, “I was having to do a lot of emailing back and forth and calling back and forth trying to figure out what was going on.”

Overall, these findings demonstrate that negative interactions or experiences with management significantly shaped the transition experience of new nursing faculty. Instead of receiving guidance, support, timely feedback or clear and comprehensive communication, faculty felt as though managers often avoided responsibility or left them to figure everything out on their own, further exacerbating their uncertainty and confusion in their new role.

Workload, Time Commitment, and Financial Compensation

This subtheme highlights the significant concerns that participants had in these areas, when transitioning into the novice nursing faculty role. Multiple participants discussed issues relating to the workload. Participant 1 shared that knowledge about the workload involved with content creation isn't something that novice faculty are made aware of upfront: “once they find out the work involved...you can't possibly cover every paragraph in that textbook...you kind of get buried in the weekly stuff...it takes a lot of effort.” Similarly, Participant 2 said, “I spent a considerable amount of time essentially redoing the content.”

The time commitment involved with the novice faculty role was a topic that was brought up by all five participants. Participant 1 said, “for one week, I probably put, you know, at least six hours into, especially if I hadn’t taught it [the topic] before.” Participant 2, discussed the amount of time they spent creating the course content, assignments and exams, compared to their contractually allocated time: “I still have my own preparation that I need to do, and should be doing, to be able to deliver this material at a high quality with enthusiasm and passion, that takes time.” Participant 3 reiterated this by explaining, “I was hired for 3 hours a week and I was putting in close to 8 hours a day, about 4 days a week.” Similarly, Participant 4 said: “I was spending a lot of my own personal time doing a lot of the content creation. There wasn’t a lot of office prep time given.” Participant 5 mentioned: “I just felt that I didn’t have enough time to do all that...I was spending quite a few hours on my weekends.”

The topic of financial compensation was mentioned by three out of the five participants. Participant 1 said that financial compensation was very much lacking for the amount of work required for novice faculty: “my husband says you get paid about, \$1.50 an hour for the work you do.” Participant 2 shared that they were surprised to find out that there was no “monetary compensation for work done outside the classroom.” They expressed their displeasure and frustration with this adding, “that takes time away from my own schooling, my own work, my own personal life that again, I’m not being compensated for.” Similarly, Participant 3 expressed frustration with the level of financial compensation, especially in relation to training and learning how to use the required educational tools: “I need to be compensated. These are hours of my life that I

am putting in to learn how to navigate this system.” They later added, “I felt like, who on this planet works for free?”

Overall, these findings suggest that novice faculty members enter into their roles without adequate preparation for the hidden workload, unrealistic time demands, and concern about whether they are being compensated fairly. This resulted in feelings of exhaustion, frustration, and feelings of being undervalued. Participants stated that the workload associated with transitioning into a novice nursing faculty role was not adequately compensated for. They felt that they were underpaid for the majority of their content preparation, content development, and time spent learning the role. This left them feeling exploited, with many hours of unpaid labor undermining morale and making them question the sustainability of the role within their everyday life.

The Emotional Weight of Role Unpreparedness

This theme describes how the experience of stepping into faculty roles without adequate orientation, training, support, guidance, or resources created significant role stress and strain. This left the new faculty feeling unqualified, overwhelmed, and uncertain, eroding their confidence and shaping their early teaching identity. The data that fell under this theme was so significant that it was broken down into two subthemes: 1. Role Stress and Role Strain: Identity Conflict and Task Struggles and 2. Emotional Reactions: Overwhelm, Anxiety, and Discouragement.

Role Stress and Role Strain: Identity Conflict and Task Struggles

This subtheme describes participants’ challenges with their new role as a nursing faculty member, and includes feelings of not being an educator, and struggling with

academic tasks, responsibilities and knowledge. Regarding the topic of not being an educator, multiple participants repeatedly emphasized that they identified as nurses, and not teachers. Participant 1 initially stated, “we aren’t educator’s really,” later adding, “I don’t pass myself off as a professor, because I’m not you know.” Participant 2 discussed their struggles with academic expectations for content creation and said they had difficulty with, “acknowledging my expert biases” of being a nurse rather than a trained educator. Participant 3 discussed their challenge with identifying as a nurse rather than an educator on three separate occasions during the interview, emphasizing the impact this had on being able to take on the role of nursing faculty member. They first mentioned, “I’m a registered nurse, but I’m not a trained teacher.” They later stated: “Like being a nurse, that’s a different stream from teaching altogether,” and finally emphasized, “I don’t know how to do any of that. I’m a bedside nurse.” Overall, this disconnection between identifying as a nurse and not as an educator created feelings of illegitimacy and imposter syndrome, ultimately undermining their confidence in their new faculty role. This highlights a professional identity gap in that expertise in nursing did not translate into preparedness for teaching nursing.

The struggle with academic tasks was a prominent topic for multiple participants and largely focused on their challenging experiences with tasks related to content creation as well as knowing how to adequately deliver that content to the students. Participant 1 recalled there being misinterpretation on more than one occasion, specifically linking it to challenges with understanding how she was expected to evaluate the students: “for brand new instructors that haven’t done this, that seems hard...totally misinterpreted the

evaluation.” They later added: “I’m not trained to do that...that was all challenging.” Participant 2 described their struggle with the task of creating content: “I just wasn’t sure how I was going to relay that information...It was very challenging.” They later expressed difficulty with creating and administering exams to their students: “I don’t want to give an exam that is too simple, but then I also don’t want to give them an exam that’s too hard. I’ve just been really struggling a lot with that.” Similarly, Participant 5 shared: “how can I create my own syllabus if I have no resources...that took me honestly a very long time trying to figure out with no assistance from anyone else there.” Without adequate orientation, pedagogical training, or support, task-related struggles intensified the role strain that new faculty experienced as they had to learn new, often complex tasks on their own, perpetuating feelings of inefficiency and frustration.

Concerns related to their knowledge level were mentioned by all five participants as they openly acknowledged not knowing how to carry out essential teaching responsibilities or understand their role in academia. Participant 1 explained: “you don’t know what you don’t know.” They further emphasized that in regard to new faculty members who receive little to no orientation, support, or mentorship, “we don’t know what we’re doing wrong.” Participant 2 shared that there were many instances in which they, “had absolutely no idea.” They later connected this to their experience with creating an exam for their course: “I’m trying to pull questions out of the textbook...like where are you getting your questions from...I don’t know if these questions are too easy or too hard.” Participant 3 stated: “I had like 10,000 questions to ask.” They later mentioned that they found themselves questioning their knowledge and ability to teach the content

and had asked themselves: “how am I going to teach this?” Participant 4 mentioned their concern with their knowledge level and how that influenced their experience with content creation in their course and stated, “I was unsure of how much content they wanted directly from the textbook versus real life scenarios on the side. Stuff they wanted in the classroom setting.” The concerns of Participant 5 in relation to their knowledge level were slightly different than other participants as they felt their issues were due to the unfamiliarity with the academic role: “because I was so new, I was like, oh, this must just be how it goes. I wasn’t aware of everything that was wrong.” Overall, these knowledge gaps, and steep learning curve, reinforced feelings of incompetence, leaving faculty anxious about whether they were doing their job correctly and serving students efficiently.

Emotional Reactions: Overwhelm, Anxiety, and Discouragement

This second subtheme details the profound emotional toll and wide range of negative feelings participants described from their transition into the novice nursing faculty role. Feelings of overwhelm and anxiousness were mentioned by participants numerous times. For example, Participant 1 described their experience by stating: “it was a bit overwhelming.” Participant 3 shared they often felt like, “what the heck and I going to do.” Participant 5 stated: “overall, I would say I was very overwhelmed the entire 4 months.” Participant 2 used the feeling of being anxious to describe their experiences on four separate occasions when describing their overall transition and also completing some duties of the role as they shared: “every single time I try to create a test question I get very anxious.” Confusion, questioning themselves and uncertainty were also prominent

emotional aspects of the transition as discussed by participants. Participant 1 mentioned, “you kind of question yourself” followed later by, “you’re always questioning yourself” and “you’re second guessing yourself.” Participant 6 shared that there were times when they felt that, “I don’t understand what we’re teaching right now”, later adding, “It was very confusing.” Participant 2 said they had considered, “how am I going to deliver this material over the course of 3 hours,” and shared feelings of, “I need to figure out what I am doing.” Participant 3 discussed feeling uncertain when they realized the expectations were more than what they were aware of upon signing the contract: “how am I gonna do this? I’ve already said yes.”

Feelings of discouragement, inadequacy and lack of confidence were also shared by Participants 1 and 3. Participant 1 explained that the confidence of novice faculty members was “terrible” and that they often felt “discouraged and disheartened.” They later added that: “they felt that they were letting the students down.” Participant 3 reiterated this from their perspective, describing their experience transitioning into the novice faculty role as “incredibly discouraging” multiple times throughout the interview. They shared: “it’s not right, but it is what it is.” Feelings of frustration were also shared by two participants, in addition to stress or panic. Participant 2 said: “a part of me feels a little bit frustrated and defeated in this role,” and later when discussing their overall transition experience said, “It’s been really frustrating.” Participant 3 expressed frustration with learning how to navigate the online learning platform used at their institution and said: “that’s a whole different monster.” They later described the entire transition experience as stressful in more than one instance: “tremendous amount of

stress. It totally was a major stress in my life...I was getting up at 2 o'clock in the morning stressed right out." Finally, the feeling of being unprepared was discussed by Participant 5, who said, "I felt behind already just from the start." Overall, the emotions shared by participants demonstrate how the unstructured transition strained their professional identity and impacted their mental health through a combination of overwhelm, confusion, discouragement, stress, and self-doubt.

Lack of Accessible, Comprehensive, and Timely Teaching Resources

This final theme describes how new faculty experienced challenges in acquiring essential resources such as textbooks and course materials which are needed for effective teaching preparation and delivery. Access to textbooks was inconsistent as some participants reported being given them, whereas others described having no success in obtaining them from their employer and having to borrow outdated editions from healthcare organizations just to develop their teaching content. For example, Participant 2 shared, "they gave me access to the textbooks." Participant 5 discussed their challenges with obtaining the textbook: "struggling to even get a textbook...I emailed multiple people to even get the textbook and I ended up finally getting access a week prior (to the course starting)." They later added that not having timely access to the textbook was, "definitely hard to work with." Participant 3 described not receiving the textbooks at all and detailed a conversation with their supervisor in which they said: "you've given me no textbooks. I have nothing." They later elaborated on how they created their course content without having received the course textbook: "I run over to my workplace. There are textbooks everywhere. So, I pulled a book off a shelf...I basically cracked open the

textbook, read the 1st chapter and created a lesson plan for my 1st class without having an up to date textbook. I used an old textbook.”

Access to course material was also reported by participants as lacking or inconsistent. Participant 2 discussed struggling with course material creation and mentioned that they weren't provided with rubrics for the assignment as they shared, “no rubrics. Absolutely not.” They did however explain that they had received some content for the last 6 weeks of the course from the prior instructor but felt that it was largely inadequate: “when I received the content, I felt very strongly that it was not, comprehensive enough for me to be able to deliver a lesson.” They later added: “it was essentially anywhere from 35-40 PowerPoint slides. White screen. Black font...when you're only given 40 lecture slides over the course of 3 hours, I can't spend 10 minutes on this one slide with 3 sentences.”

Participant 3 echoed a similar sentiment but in relation to the course syllabus and other teaching material that the previous instructor was not willing to provide: “the previous instructor did not want to share any of her teaching material...I had no syllabus. I had nothing.” They further detailed their experience with trying to create their course content with no resources, no support or guidance: “I need to sit down and create one (syllabus). How am I going to do that? I have no idea, because I have absolutely no course material.” Participant 4 shared similar concerns with previous instructors gatekeeping course content from new faculty: “I found that a lot of times, other faculty didn't necessarily want to give up their content or kind of help you get your bearings.” They later explained that that they were left to make their own syllabus, tests and

assignments on their own with no resources or guidance and said that: “some other faculty members don’t want to give out their content. So, they’ll just send the most basic of what they can.” Finally, Participant 5 shared similar experiences in accessing course material as the others: “I would ask, (the manager) do you have anything from previous teachers that I can understand, like what they were teaching and whatnot, and she didn’t have that.” They later added: “finally, 2 or 3 weeks into the course we got the syllabus.” Overall, the lack of timely access to course textbooks and material created unnecessary stress, and at times feeling of isolation or lack of collegial support which often forced new faculty members to improvise or rely on outdated materials. This ultimately undermined their ability to confidently and competently deliver quality instruction to their students.

Summary

Based on the participants’ responses, baccalaureate prepared nurses who transitioned into the novice faculty role anticipated receiving structured support and adequate preparation. Participant experiences were tainted by insufficient or absent orientation, guidance, and support which left novice faculty to navigate their new and unfamiliar role and the accompanying responsibilities, alone. These experiences left the new faculty in emotional turmoil with feeling unqualified, overwhelmed, and uncertain, which eroded their confidence and shaped their early teaching identity. Their role transition experience was further hindered by an overall lack of accessible, comprehensive and timely teaching resources which compounded the challenges that were already being experienced as novice faculty sought to deliver quality nursing

education to their students. In Chapter 5, present an interpretation of the findings of this study, discusses the alignment to the Novice NET model, study limitations, recommendations for further research, the implications for social change and a conclusion.

Chapter 5: Discussion, Conclusions, and Recommendations

Introduction

The purpose of this qualitative research study was to explore the experiences of baccalaureate prepared nurses on the transition to novice nurse faculty members teaching in 2-year diploma prepared nursing programs in Northwestern Ontario. The research question for this study was: What are the experiences of baccalaureate nurses as they transition into faculty members teaching in 2-year diploma prepared nursing programs in Northwestern Ontario? Through conducting this basic qualitative research study, I developed an in-depth understanding of the experience of this unique and specific population of nurse educators as they transitioned into nursing faculty roles. Four major themes emerged from the data: (a) anticipation of structured support and preparedness, (b) lack of orientation and institutional support, (c) the emotional weight of role unpreparedness, and (d) lack of accessible, comprehensive, and timely teaching resources. Participants entered their roles expecting mentorship, guidance, and adequate preparation but instead encountered unclear expectation, inadequate orientation, minimal managerial support, and heavy workloads with insufficient compensation. These challenges contributed to feelings of stress, anxiety, discouragement, and identity conflict, leaving participants to improvise with limited resources while questioning their legitimacy as educators. Collectively, the findings underscore the impact of organizational shortcomings on novice nursing faculty transition and highlight the urgent need for structured supports to foster successful role adaptation.

Interpretation of the Findings

The findings presented in Chapter 4 both confirm and extend prior research on the topic of transition of nurses into nursing faculty roles, while identifying unique insights specific to baccalaureate-prepared faculty teaching in diploma nursing programs. The following section is organized according to the themes presented in Chapter 4 and compares the study findings to the body of literature discussed in Chapter 2.

Anticipation of Structured Support and Preparedness

The anticipation of guidance, mentorship, and organizational preparedness reported by participants aligns with the literature emphasizing that novice faculty expect structured orientation and support when transitioning into academia (Ross & Silver Dunker, 2019; Stamps et al., 2021). Consistent with these studies, participants assumed they would be provided with adequate resources, clear expectations, and mentorship or support. However, the present findings extend the literature by revealing the magnitude of this “anticipation gap” among baccalaureate-prepared nursing faculty, a group that is significantly underrepresented in existing research. Unlike the few studies reporting smooth transitions facilitated by support from colleagues, and informal communities of practice (Axiak & Axiak, 2024), the experiences of participants in this study disconfirm such findings and underscore the absence of systematic preparation and support at the institutional level in diploma prepared nursing programs.

Lack of Orientation and Institutional Support

The absence of adequate orientation, mentorship, and managerial support described by participants confirms previous reports in the literature of inconsistent or

insufficient onboarding for novice nursing faculty (Shapiro, 2018; McPherson & Wendler, 2023). Participants' accounts of being "thrown into the deep end" or "flying blind" mirror the sense of disorganization and lack of direction for novice nursing faculty that has been documented in prior literature (Harper-McDonalds & Taylor, 2020; Owens, 2017). These findings extend knowledge by demonstrating that institutional shortcomings are compounded by poor managerial communication, unrealistic time commitments, and inadequate compensation, adding a significant level of depth to existing understandings of barriers to transitioning into the novice nursing faculty role. While the literature identifies mentorship and orientation as best practices that facilitate positive transition experiences (Miner, 2019; Rogers et al., 2020), this study disconfirms their consistent application in diploma prepared nursing programs, suggesting that institutional neglect remains pervasive.

The Emotional Weight of Role Unpreparedness

The significant stress, anxiety, self-doubt, and discouragement reported by participants confirm the concept of "transition shock" originally described by Duchscher (2009) and echoed in subsequent studies of novice nursing faculty (Brower et al., 2022; Mutenga et al., 2023; Shapiro, 2018). Consistent with prior findings, participants in this study expressed feelings of illegitimacy and inadequacy, reporting difficulty reconciling their identities as clinical nurses with their new roles as educators. These findings extend the literature by illustrating that even baccalaureate-prepared faculty, who represent a relatively new subgroup in academia, experience the same emotional turmoil traditionally described among graduate-prepared educators. While prior research often highlights

identity reconstruction as a gradual process (Aguayo-Gonzalez & Weise, 2021; Lazzari et al., 2019; Logan et al., 2016), the depth of imposter syndrome and immediate identity conflict evident in this study emphasizes the intensity of emotional strain felt by baccalaureate prepared nurses during the earliest stages of transition into the novice faculty role.

Lack of Accessible, Comprehensive, and Timely Teaching Resources

The challenges participants faced in acquiring essential teaching resources such as textbooks, rubrics, and syllabi confirm prior research documenting the lack of pedagogical preparation and academic materials available to novice nursing faculty (Barken & Robstad, 2023; Brown & Sorrell, 2017; Ross & Silver Dunker, 2019). These findings extend existing knowledge by providing concrete examples of how resource deficits directly undermine teaching preparation, forcing faculty to rely on outdated materials or improvise lesson plans with minimal support. This practical dimension adds nuance to the literature, which has traditionally emphasized abstract notions of being “academically unprepared” (Cooley & De Gagne, 2016; Booth et al., 2016). While some studies have assumed that novice nursing faculty at least have a baseline access to instructional resources (Ross & Silver Dunker, 2019), the findings of this study disconfirm that assumption by revealing that in certain diploma prepared nursing programs, critical teaching materials are inconsistently provided or actively withheld.

Overall Synthesis of Findings with Literature

Taken together, these findings confirm much of the existing literature on the difficult and emotionally straining transition from clinical nurse to novice nursing faculty

member. They disconfirm isolated reports of smooth transitions or adequate institutional preparation and extend the discipline's understanding by documenting the experiences of baccalaureate-prepared novice nursing faculty teaching in diploma prepared nursing programs in Northwestern Ontario – a largely underexplored population. Specifically, this study highlights the compounded effects of unmet expectations, absent orientation, inadequate managerial communication, emotional distress, and resource scarcity. These findings underscore the urgency of implementing structured orientation programs, mentorship opportunities, and reliable access to basic teaching resources in order to better support novice nursing faculty and mitigate the challenges that undermine retention in nursing education.

Analysis and Interpretation in the Context of the Conceptual Model

The conceptual framework guiding this study was Schoening's (2013) NET model, which outlines four phases of transition from clinical nurse to faculty: (1) Anticipatory/Expectation, (2) Disorientation, (3) Information-Seeking, and (4) Identity Formation. This conceptual framework provides a lens for interpreting the findings from Chapter 4 and situating them within the established theoretical understandings of nursing faculty transition.

Anticipatory/Expectation Phase

The theme of Anticipation of Structured Support and Preparedness aligns directly with the NET model's anticipatory phase, in which nurses envision their future role as nursing faculty with optimism and expectations of support. Participants in this study described entering faculty positions expecting clear guidance, mentorship, resources and

time to prepare. However, these anticipations were unmet. The findings suggest that, while the anticipatory phase was present as predicted by Schoening (2013), the subsequent lack of organizational follow-through disrupted a smooth progression to later phases of the transition.

Disorientation Phase

The themes of Lack of Orientation and Institutional Support and The Emotional Weight of Role Unpreparedness reflect the disorientation phase of the NET model. Participants described their initial entry into faculty roles as overwhelming, confusing, and disorganized, consistent with feelings of role ambiguity, uncertainty, and inadequate preparation noted by Schoening (2013). Metaphors such as “flying blind,” “thrown into the deep end” and “lost in the woods” exemplify the disorientation phase. Additionally, participants’ emotional responses, including stress, anxiety, and discouragement, underscore the extent of disorientation. The findings reinforce the model’s depiction of this phase as a period of struggle and adjustment, particularly when organizational support is lacking.

Information Seeking Phase

Evidence of the Information Seeking Phase emerged in participants’ accounts of reaching out to peers, borrowing outdated textbooks, and independently creating teaching materials in the absence of formal support or guidance. This aligns with Schoening’s (2013) description of nurses actively seeking resources and guidance to fulfill role expectations. However, unlike in the model where information-seeking may lead to increased confidence and gradual stabilization, participants in this study reported that

inadequate institutional support limited the effectiveness of their efforts. Instead of fostering growth, their independent strategies often exacerbated feelings of strain and inefficiency, suggesting a constrained or prolonged information-seeking phase in the context of diploma prepared nursing programs.

Identity Formation Phase

The theme of Emotional Weight and Role Unpreparedness reveals challenges related to the identity formation phase of the NET model. Participants frequently identified themselves as nurses rather than educators and expressed difficulty reconciling clinical expertise with academic responsibilities. This illustrated a delayed or incomplete progression towards educator identity, as theorized by Schoening (2013). While the NET model anticipates eventual confidence and identity integration, the findings of this study suggest that insufficient support, overwhelming workload, and lack of resources hindered participants' ability to fully transition into the identity of a nurse educator.

Interpretation Within Scope of the Study

Overall, the findings corroborate the NET model's assertion that nurse educators undergo distinct phases of transition. The experiences of baccalaureate-prepared novice nursing faculty in this study confirm the relevance of the model while also highlighting potential unique variations in its trajectory. Specifically, unmet anticipations, prolonged disorientation, constrained information-seeking, and delayed identity formation suggest that without structured support at the institutional level, the phases described by Schoening (2013) may become stalled or cyclical rather than linear. These interpretations remain within the scope of the data, as participant's narratives consistently reflected

challenges that align with the NET model's phases, but also emphasized the ways in which institutional shortcomings disrupted their progression through those phases.

Limitations of the Study

Several limitations to trustworthiness arose in the execution of this study. While strategies were utilized to mitigate these issues, it is important to acknowledge their potential influence on the findings.

Recruitment and Sample Size

As anticipated in Chapter 1, recruiting appropriate participants presented challenges due to the small pool of baccalaureate-prepared novice nursing faculty teaching in diploma programs in Northwestern Ontario. Recruitment efforts were further hindered by an employment strike affecting college faculty members across the province of Ontario, limiting the willingness of potential participants to engage in any type of communication regarding their profession. Ultimately, the study included only a small number of participants, which limited the breadth of perspectives captured in the data. Although the sample size was sufficient for a basic qualitative study, the narrow representation reduces the scope of the experiences included and may not fully reflect the diversity of faculty transitions across the region.

Geographic Context

The study was limited to Northwestern Ontario, a remote and geographically large region. While online data collection helped overcome travel barriers and enabled participation from across the area, the regional context may have shaped the findings in unique ways. The remoteness of the setting, combined with institutional resource

constraints common in smaller or rural colleges, may have amplified challenges such as lack of orientation, mentorship, and access to teaching resources. As a result, the findings may not fully translate to institutions in urban or better-resourced settings.

Researcher Bias

Another limitation concerns the potential for researcher bias. As a nurse educator myself, I had personal experiences with transitioning into academia that could have influenced my interpretation of participants' narratives. To address this, I maintained a reflexive journal throughout the research process to bracket my own assumptions and ensure that participants' voices remained central to the analysis. While these strategies strengthened confirmability, it is possible that my professional background shaped the way I probed during interview or interpreted certain experiences.

Generalizability

As with most qualitative research, the findings of this study are not statistically generalizable to all novice nurse educators. The sample was specific to one geographic region, one educational system, and one educational level (baccalaureate-prepared faculty teaching in diploma prepared nursing programs). Faculty teaching in other contexts (e.g., universities, graduate-prepared roles, or international settings) may experience transition differently. However, despite these limitations, the study provides rich, contextualized accounts that may be transferable to similar education and geographic contexts, particularly those with resource limitations and understudied faculty populations.

Recommendations

This study examined the experiences of baccalaureate-prepared nurses transitioning into faculty roles in diploma-prepared nursing programs in Northwestern Ontario, a population that remains largely underrepresented in the literature. While the findings align with much of the existing research on novice nursing faculty transition, they also extend the understanding of barriers unique to this particular subgroup. Based on the strengths and limitations of the study, as well as the literature reviewed in Chapter 2, the following recommendations for future research are proposed.

Broaden the Sample Size and Context.

This study was limited to a small number of participants teaching in diploma prepared nursing programs in Northwestern Ontario. Future research should include a larger and more diverse sample of baccalaureate-prepared faculty across different provinces or regions of Canada to enhance transferability of findings. Comparative studies between diploma, baccalaureate, and graduate-prepared novice nursing faculty members could further illuminate unique challenges and commonalities across these groups.

Longitudinal Studies of Faculty Transition.

Given that Schoening's (2013) NET model described transition as a multi-phased process, longitudinal studies following novice faculty over several years could provide additional insight into how baccalaureate-prepared educators progress (or become stalled) through the phases, and whether supports introduced at later stages can mitigate initial difficulties.

Interventional Research on Orientation and Mentorship Programs

The findings highlight the lack of structured support as a significant barrier to transition. Future research should evaluate the effectiveness of formal orientation, mentorship, and resource-provision interventions specifically designed for baccalaureate-prepared faculty. Quasi-experimental or mixed-methods designs may further help determine which supports are most effective in reducing stress, fostering identity formation, and improving faculty retention rates.

Investigate Faculty Identity Development

Findings in this study revealed a profound struggle with professional identity, with participants expressing stronger identification as nurses than as educators. Future research should explore identity formation among baccalaureate-prepared faculty, including how hybrid professional identities evolve and what supports facilitate smoother integration into academia.

Implications

The findings of this study hold implications for positive social change at multiple levels, as well as methodological, theoretical, and empirical contributions to the field.

Positive Social Change

The findings of this study hold important implications for positive social change in nursing education. Participants described challenges such as limited mentorship, lack of structured orientation, and feelings of unpreparedness – experiences consistent with the literature (Boamah et al., 2021; Brower et al., 2022). By identifying these barriers, this study reinforces the need for faculty-specific onboarding, mentorship initiatives, and

professional development opportunities tailored to baccalaureate-prepared novice faculty. Implementing such strategies can reduce role strain, enhance job satisfaction, and improve faculty retention. Given the projected nursing faculty shortages across Canada (Canadian Association of Schools of Nursing, 2024), these interventions are critical to stabilizing the academic workforce and sustaining nursing program capacity.

From a social perspective, the study findings contribute to positive social change by addressing systemic barriers that may limit access to nursing education. Faculty shortages directly constrain student enrollment, restricting the number of graduates entering the nursing workforce (Halton et al., 2024). By supporting baccalaureate-prepared faculty in their transition, nursing programs can expand enrollment capacity and foster equitable access to education, particularly in underserved regions such as Northwestern Ontario where recruitment challenges are heightened. This expansion contributes to building a more diverse and sustainable nursing workforce, capable of addressing healthcare needs in both rural and urban contexts.

There are also significant implications for healthcare patients and communities. Supported and well-prepared faculty members are more engaged in teaching and mentoring, which ultimately strengthens student learning outcomes. As noted by McPherson and Wendler (2023), faculty retention strategies benefit not only educators but also students who receive consistent, high-quality instruction. Graduates who are well-prepared to enter practice contribute directly to patient safety, care quality, and health equity. Thus, the professional and social benefits of supporting novice faculty extend into

the clinical environments, where improved quality of education ultimately enhances patient outcomes and community trust in the healthcare system (Boamah et al., 2023).

Methodological Implications

This study demonstrates the value of qualitative inquiry in capturing the experiences of role transition, particularly for an understudied group. The use of In Vivo coding allowed participant voices to guide analysis, which may serve as a model for future studies exploring professional transitions in nursing and other health professions. Expanding on this design with mixed-methods approaches could further triangulate qualitative insights with quantitative measures of stress, satisfaction, or retention.

Theoretical Implications

The findings of this study contribute significantly to the theoretical understanding of faculty transition by providing support for Schoening's (2013) NET model. The model identifies four phases of transition – anticipatory/expectation, disorientation, information-seeking, and identify formation. Participants in this study described experiences that closely align with these phases, particularly the challenges of disorientation and the strategies used during information-seeking, such as reaching out to colleagues, over-preparing for classes, and seeking professional development opportunities. The evidence that baccalaureate-prepared nurses also cycle through these stages confirms the model's broader applicability to faculty populations beyond those with graduate-level education.

At the same time, the study extends the NET model by highlighting the heightened vulnerability of baccalaureate-prepared novice faculty, who often enter academia with fewer pedagogical skills, less exposure to curriculum development, and a

greater sense of role ambiguity than their graduate-prepared peers. These findings suggest that while the NET model accurately describes the overall trajectory of transition, contextual factors such as educational preparation, institutional support, and mentorship availability significantly influence the speed and ease in which faculty move from one phase to the next. For example, several participants reported prolonged periods in the disorientation phase due to inadequate orientation or lack of mentorship, indicating that institutional structures can either hinder or accelerate progression through the NET model.

This study also contributes to the theoretical discourse on professional identity development and transition shock. Consistent with Duchescher's (2009) concept of transition shock, participants described the emotional upheaval and loss of confidence experienced when shifting from clinical expert to novice faculty. Furthermore, findings align with Brower et al.'s (2022) work on identity transformation, where faculty initially experienced grief over the loss of their clinical identity before beginning to form a hybrid identity as both a nurse and educator. By integrating these perspectives, the study underscores that identity development in faculty transition is a dynamic, iterative process influenced by not only individual adaptation, but also by institutional structures of support.

In this way, the study contributes to theory by affirming the usefulness of the NET model while also pointing toward potential refinements. Specifically, the findings suggest that the model could be adapted to account for contextual moderators such as level of academic preparation, access to mentorship and organization culture. These

refinements would enhance the model's explanatory power across diverse faculty populations and settings. By situating the experiences of baccalaureate-prepared faculty within the broader body of transition theory, this research advances the scholarly understanding of how nurses adapt to academic roles and provides a theoretical foundation for designing evidence-based interventions that facilitate a smoother, more effective transition into nursing faculty positions.

Empirical Implications

This study makes several important empirical contributions. First, it addresses a significant gap in the literature by focusing specifically on the experiences of baccalaureate-prepared novice nursing faculty in Canadian diploma programs, a population that has been largely understudied in prior research. Much of the existing literature on faculty transition focuses on graduate-prepared nursing educators (Bagley et al., 2018; Shapiro, 2018), while Canadian contexts remain underrepresented (Boamah et al., 2021). By centering on this distinct population, the study broadens the scope of evidence available for understanding faculty transition, particularly in regions like Northwestern Ontario where hiring baccalaureate-prepared faculty has become necessary due to ongoing shortages (Canadian Association of Schools of Nursing, 2024).

Second, the findings of this study contribute to the empirical literature by offering insights into the unique challenges encountered by baccalaureate-prepared faculty compared to their graduate-prepared counterparts. While prior studies highlight themes of transition shock, role strain, and identity loss (Brower et al., 2022; Duchscher, 2009), this study demonstrates how these challenges may be intensified for faculty with only

baccalaureate-level education, due to limited pedagogical training, lack of formal orientation, and reduces access to mentorship opportunities. In doing so, the research helps to differentiate between shared experiences of transition and those specific to the educational background, adding a new layer of nuance to the literature on novice nursing faculty.

Third, the study generates empirical evidence on contextual influences, particularly the geographic and institutional challenges faced by nursing faculty teaching in diploma prepared nursing programs in Northwestern Ontario. This regional focus underscores the role of environment and organizational culture in shaping the transition experience, suggesting that transition is not a uniform process, but one that varies according to institutional supports, policies and location. These findings are especially relevant for future comparative studies exploring faculty transition across rural, remote, and urban contexts not only in Canada, but internationally as well.

Finally, the empirical contributions of this study lay the groundwork for future research. The findings highlight the need for studies that test targeted interventions such as structured mentorship programs, comprehensive orientation models, and faculty development initiatives for baccalaureate-prepared novice nursing faculty. Longitudinal studies could further examine how faculty identity and role confidence evolve over time and whether interventions help accelerate progression through transition phases. Additionally, comparative studies between baccalaureate-prepared and graduate-prepared faculty may deepen understanding of the differential supports needed for each faculty

group, ultimately contributing to more evidence-based recruitment and retention strategies in college-level nursing education.

Recommendations for Practice

1. Structured orientation programs. Nursing programs should implement comprehensive orientation tailored to novice faculty, covering not only administrative processes but also pedagogical skills, course development, and evaluation methods.
2. Formal mentorship initiatives. Institutions should prioritize mentorship programs that pair novice faculty with experienced educators, ensuring consistent access to guidance, feedback, and resource sharing.
3. Equitable workload and compensation. Policies should address workload expectations and ensure compensation reflects the significant preparation time required, reducing burnout and increasing retention.
4. Access to teaching resources. Faculty should be provided with timely access to textbooks, syllabi, and basic course materials, minimizing unnecessary stress and enabling effective teaching.
5. Managerial engagement. Administrators should maintain open communication with new faculty, providing regular check-ins, timely feedback and proactive problem-solving to mitigate the sense of isolation reported by participants.

Conclusion

This study explored the experiences of baccalaureate-prepared nurses transitioning into novice faculty roles in diploma prepared nursing programs in

Northwestern Ontario. Guided by Schoening's (2013) NET model, the findings revealed that participants entered their roles with expectations of structured support and resources, but instead encountered a lack of orientation, insufficient mentorship, and limited managerial guidance. These challenges contributed to role stress, identity conflict, and significant emotional strain, often leaving participants overwhelmed, discouraged, and questioning their preparedness for academic responsibilities.

The findings confirm much of the existing literature on the difficulties of novice nurse faculty transition, particularly the prevalence of transition shock, role train, and inadequate institutional support (Brower et al., 2022; Harper-McDonald & Taylor, 2020, Shapiro, 2018). At the same time, the study extends knowledge by documenting these challenges among baccalaureate-prepared novice faculty in diploma-prepared nursing programs in Northwestern Ontario, a population largely absent from prior research. By demonstrating the unique vulnerabilities of this group, the study highlights the urgency of addressing gaps in orientation, mentorship, and resource provision.

In relation to the NET model, the findings affirmed the model's four phases of transition but revealed that progression through these stages may be stalled or cyclical in contexts where institutional support is absent. Participants' narratives illustrated how unmet anticipations, prolonged disorientation, constrained information-seeking, and delayed identity formation disrupted their transition into faculty roles. These interpretations underscore the importance of organizational factors in shaping the trajectory of faculty development, suggesting the theoretical models of transition should account for structural barriers alongside individual adaptation.

The study's implications are significant at multiple levels. At the individual level, enhanced support for novice faculty may improve well-being and confidence. At the organization level, comprehensive orientation, structured mentorship, and managerial engagement can reduce turnover and strengthen nursing programs. At the societal and policy level, supporting novice nurse educators contributes to the sustainability of the nursing workforce, thereby positively influencing healthcare systems and patient outcomes.

Ultimately, this study contributes to the discipline by addressing a gap in the literature, affirming the relevance of the NET model, and providing actionable recommendations for practice, policy, and future research. By amplifying the voices of baccalaureate-prepared novice nursing faculty, the study not only advances scholarly understanding of faculty transition, but also points toward strategies that can foster more equitable, supportive, and sustainable pathways into nursing education.

References

- Aguayo-Gonzalez, M., & Weise, C. (2021). Career transition and identity development of academic nurses: A qualitative study. *Journal of Constructivist Psychology, 35*(4), 1371-1389. <https://doi.org/10.1080/10720537.2021.1936711>
- Anderson, J. K. (2009). The work-role transition of expert clinician to novice academic educator. *Journal of Nursing Education, 48*(4), 203-208. <https://doi.org/10.3928/01484834-2009040102>.
- Ambusaidi, M., & Almaskari, M. (2021). Understanding the transition from clinical nurse to nurse educator in Oman. *EAS Journal of Nursing and Midwifery, 3*(1), 43-48. <https://doi.org/10.36349/easjnm.2021.v03i01.007>
- Arian, M., Soleimani, M., & Oghazian, M. B. (2018). Job satisfaction and the factors affecting satisfaction in nurse educators: A systematic review. *Journal of Professional Nursing, 34*(5), 389-399. <https://doi.org/10.1016/j.profnurs.2018.07.004>
- Axiak, S., & Axiak, M. (2024). An exploration of the transition of clinical nurses to an academic nurse lecturer role. *Nursing Education Perspectives, 45*(1), 37-39. <https://doi.org/10.1097/01.NEP.0000000000001084>
- Bagley, K., Hoppe, L., Brenner, G.H., Crawford, M., & Weir, M. (2018). Transition to Nursing Faculty: Exploring the barriers. *Teaching and Learning in Nursing, 13*(4), 263-267. <https://doi.org/10.1016/j.teln.2018.03.009>
- Barken, T. L., & Robstad, N. (2023). Academic nurses' transition across an academic career: A qualitative study. *Empirical Research Qualitative, 80*(4), 1630-1637.

<https://doi.org/10.1111/jan.15928>

- Barrow, M., & Xu, L. (2021). Making their way as academics: A qualitative study examining how nurse academics understand and (re) construct academic identity. *Nurse Education Today, 100*. <https://doi.org/10.1016/j.nedt.2021.104820>
- Boamah, S. A., Kalu, M. E., Havaie, F., McMillan, K., & Belita, E. (2023). Predictors of nursing faculty job and career satisfaction, turnover intentions, and professional outlook: A national survey. *Healthcare (Basel), 11*(14).
<https://doi.org/10.3390/healthcare11142099>
- Boamah, S. A., Callen, M., & Cruz, E. (2021). A scoping review of contributing factors. *Nursing Outlook, 69*(4), 574-588. <https://doi.org/10.1016/j.outlook.2021.01.018>
- Bono-Neri, F. (2019). Pedagogical nursing practice: Redefining nursing practice for the academic nurse educator. *Nursing Education in Practice, 37*, 105-108.
<https://doi.org/10.1016/j.nepr.2019.04.002>
- Booth, T. L., Emerson, C. J., Hackney, M. G., & Souter, S. (2016). Preparation of academic nurse educators. *Nurse Education in Practice, 19*, 54-57.
<https://doi.org/10.1016/j.nepr.2016.04.006>
- Brower, E., Nemec, R. Ritchie, H., & Nicastro, O. (2022). A qualitative exploration of self-identity during the role transition to a nurse educator. *Nurse Education Today, 112*, <https://doi.org/10.1016/j.nedt.2022.105331>
- Brown, T., & Sorrell, J. (2017). Challenges of novice nurse educator's transition from practice to classroom. *Teaching and Learning in Nursing, 12*, 207-211.
<https://doi.org/10.1016/j.teln.2017.03.002>.

- Canadian Association of Schools of Nursing [CASN]. (2022). *Registered nurses' education in Canada statistics*. <https://www.casn.ca/2023/11/registered-nurses-education-in-canada-statistics-2021-2022/>
- Canadian Association of Schools of Nursing [CASN]. (2024). *Registered nurses' education in Canada statistics 2022-2023*. <https://www.casn.ca/wp-content/uploads/2024/11/2022-2023-RNECS-Report-EN.pdf>
- Cangelosi, P. R. (2014). Novice nurse faculty: In search of a mentor. *Nursing Education Perspectives, 35*(5), 327-329. <https://doi.org/10.5480/12-1224>.
- Clochesy, J. M., Visovsky, C., & Munro, C. L. (2019). Preparing nurses for faculty roles: The Institute for Faculty Recruitment, Retention, and Mentoring (INFORM). *Nurse Education Today, 79*, 63-66. <https://doi.org/10.1016/j.nedt.2019.05.018>
- Cooley, S. S., & De Gagne, J. C. (2016). Transformative experience: Developing competence in novice nursing faculty. *Journal of Education, 55*(2), 96-100. <https://doi.org/10.3928/01484834-20160114-07>.
- Duffy, R. (2013). Nurse to educator? Academic roles and the formation of personal academic identities. *Nurse Education Today, 33*(6), 620-624. <https://doi.org/10.1016/j.nedt.2012.07.020>
- Duchscher, J. E. (2009). Transition shock: The initial stage of role adaptation for newly graduated nurses. *Journal of Advanced Nursing, 65*(5), 1103-1113. <https://doi.org/10.1111/j.1365-2648.2008.04898.x>
- Gill, S. L. (2020). Qualitative sampling methods: *Journal of Human Lactation, 26*(4), 579-581. <https://doi.org/10.1177/0890334420949218>

- Grassley, J. S., & Lambe, A. (2015). Easing the transition from clinician to nurse educator: An integrative literature review. *Journal of Nursing Education, 54*(7), 361-366. <https://doi.org/10.3928/01484834-20150617-01>.
- Halton, J., Ireland, C., & Vaughan, B. (2024). The transition of clinical nurses to nurse educator roles. A scoping review. *Nurse Education in Practice, 78*, 1-14. <https://doi.org/10.1016/j.nepr.2024.104022>
- Harper-McDonald, B., Taylor, G. (2020). Expert nurse to novice academic: Reflections on the first year of transition from practitioner to academic. *Nurse Educator Today, 90*, 104431. <https://doi.org/10.1016/j.nedt.2020.104431>
- Hennink, M., & Kaiser, B. N. (2021). Sample sizes for saturation in qualitative research: A systematic review of empirical tests. *Social Science & Medicine, 292*. <https://doi.org/10.1016/j.socscimed.2021.114523>
- Hoeksel, R., Eddy, L., Dekker, L. & Doutrich, D. (2019). Becoming a Transformative Nurse Educator: Finding Safety and Authenticity. *International Journal of Nursing Education Scholarship, 16*(1), 20180073. <https://doi.org/10.1515/ijnes-2018-0073>
- Hoffman, D. (2019). Transitional experiences: From clinical nurse to nurse faculty. *Journal of Nursing Education, 58*(5), 260-265. <https://doi.org/10.3928/01484834-20190422-03>
- Hunter, J., Hayter, M. (2019). A neglected transition in nursing: The need to support the move from clinician to academic properly. *Journal of Advanced Nursing, 75*(9), 1820-1822. <https://doi.org/10.1111/jan.I4075>

- Kahlke, R. M. (2014). Generic qualitative approaches: Pitfalls and benefits of methodological mixology. *International Journal of Qualitative Methods, 13*(1), 37-52. <https://doi.org/19.1177/160940691401200119>.
- Knowles, S. (2020). Initiation of a mentoring program: Mentoring invisible nurse faculty. *Teaching & Learning in Nursing, 15*(3), 190-194. <https://doi.org/10.1016/j.teln.2020.02.001>
- Korstjens, I., & Moser, A. (2018). Series: Practical guidance to qualitative research. Part 4: Trustworthiness and publishing. *The European Journal of General Practice, 24*(1), 120-124. <https://doi.org/10.1080/13814788.2017.1375092>
- Kostere, S., & Kostere, K. (2021). *The Generic Qualitative Approach to a Dissertation in the Social Sciences: A Step by Step Guide* (1st ed.). Routledge. <https://doi.org/10.4324/9781003195689>
- Kumi-Yeboah, A., & James, W. (2012). Transformational teaching experiences of a novice teacher: A narrative of an award-winning teaching. *Adult Learning, 23*(4), 170-177. <https://doi.org/10.1177/1045159512457354>
- Lazzari, D. D., Martini, J. G., Arruda, S. N., & Cardoso da Silva, N. J. (2019). Professors who are also nurses: Identity construction of nurse educators. *Revista Eletronica de Enfermagem, 21*, 1-7. <https://doi.org/10.5216/ree.v21.57092>
- Leighton, K., Kardong-Edgren, S., Schneidereith, T., & Foisy-Doll, C. (2021). Using social media and snowball sampling as an alternative recruitment strategy for research. *Clinical Simulation in Nursing, 55*, 37-42. <https://doi.org/10.1016/j.ecns.2021.03.006>

- Majers, J. S. (2022). Navigating transition to academia. *Nurse Leader*, 20(5), 500-503.
<https://doi.org/10.1016/j.mnl.2022.01.004>
- McDermid, F., Peters, K., Daly, J., & Jackson, D. (2016). Developing resilience: Stories from novice nurse academics. *Nurse Education Today*, 38, 29-35.
<https://doi.org/10.1016/j.nedt.2016.01.002>
- McPherson, S., & Wendler, M. C. (2023). "Finding My Place in Academia": Understanding the experiences of novice faculty. *Journal of Nursing Education*, 62(8), 433-442. <https://doi.org/10.3928/01484834-20230612-01>.
- Meyer, D. (2020). Mentorship in Associate Degree in Nursing (AND) nursing education. *Teaching and Learning in Nursing*, 15(2), 157.
<https://doi.org/10.1016/j.teln.2019.12.005>
- Miner, L. A. (2019). Transition to nursing academia: A positive experience. *The Journal of Continuing Education in Nursing*, 50(8), 349-354.
<https://doi.org/10.3928/00220124-20190717-05>
- Mutenga, L., Downing, C., & Kearns, I. J. (2023). Stories of being a new nurse academic at a nursing education institution. *Nursing Open*, 10(6), 3586-3595.
<https://doi.org/10.1002/nop2.1601>
- Owens, R. A. (2017). Part-time nursing faculty perceptions of their learning needs during their role transition experiences. *Teaching and Learning in Nursing*, 12(1), 12-16.
<https://doi.org/10.1016/j.teln.2016.10.002>
- Patton, M. Q. (2015). *Qualitative research and methods: Integrating theory and practice*. Sage publications.

- Rogers, J., Ludwig-Beymer, P., & Baker, M. (2020). Nurse faculty orientation: An integrative review. *Nurse Educator*, 45(6), 343-346.
<https://doi.org/10.1097/NNE.0000000000000802>
- Ross, B., & Kerrigan, M. R. (2020). Addressing the faculty shortage through connections: Stories of becoming a nurse educator. *Journal of Nursing Education*, 59(10), 545-550. <https://doi.org/10.3928/01484834-20200921-02>
- Ross, J. G., & Silver Dunker, K. (2019). New clinical nurse faculty orientation: A review of the literature. *Nurse Education Perspectives*, 40(4), 210-215.
Doi:10.1097/01.NEP.0000000000000470
- Saldana, J. (2021). *The coding manual for qualitative researchers* (4th ed.). Sage publications.
- Sandelowski, M. (2000). Focus on research methods: Whatever happened to qualitative description? *Research in Nursing and Health*, 23(4), 334-340.
[https://doi.org/10.1002/1098-240x\(200008\)23:4<334::aid-nur9>3.0.co;2-g](https://doi.org/10.1002/1098-240x(200008)23:4<334::aid-nur9>3.0.co;2-g)
- Schoening, A. M. (2013). From the bedside to classroom: The nurse educator transition model. *Nursing Education Perspectives*, 34(3), 167-172.
<https://doi.org/10.5480/1536-5026-34.3.167>.
- Shapiro, S. (2018). An exploration of the transition to the full-time faculty role among associate degree nurse educators. *Nursing Education Perspectives*, 39(4), 2015-220. <https://doi.org/10.1097/01.NEP.0000000000000306>
- Singh, C., Jackson, D., Munro, I., & Cross, W. (2022). Job experiences, challenges, revelations and narratives of nurse academics. A qualitative study. *Journal of*

Advanced Nursing, 78(8), 2622-2633. <https://doi.org/10.1111/jan.15232>.

Stalmeijer, R. E., Brown, M. E. L., & O'Brien, B. C. (2024). How to discuss transferability of qualitative research in health professions education. *The clinical teacher*, 21(6), e13762. <https://doi.org/10.1111/tct.13762>

Stamps, A., Cockerell, K., & Opton, L. (2021). A modern take on facilitating transition into the academic nurse educator role. *Teaching & Learning in Nursing*, 16(1), 92-94. <https://doi.org/10.1016/j.teln.2020.04.002>

Theofanidis, D., & Fountouki, A. (2019). Limitations and delimitations in the research process. *Perioperative nursing*, 7(3), 155-162. <https://doi.org/10.5281/zenodo.2552022>

Thomas, C. M., Bantz, D. L. & McIntosh, C. E. (2019). Nurse faculty burnout and strategies to avoid it. *Teaching and Learning in Nursing*, 14, 111-116. <https://doi.org/10.1016/j.teln.2018.12.005>

Tufano, V. C. & Summers, E. D. (2025). The nurse educator mentoring dilemma: Novice nurse faculty needs and outcomes. *Journal of Nursing Education*, 64(3), 177-184. <https://doi.org/10.3928/01484834-20241120-03>

Wenner, T.A., & Hakim, A. C. (2019). Role transition of clinical nurse educators employed in both clinical and faculty positions. *Nurse Education Perspectives*, 40(4), 216-221. <https://doi.org/10.1097/01.NEP.0000000000000468>

Wenner, T. A., Hakim, A. C., & Schoening, A. M. (2020). The work-role transition of part-time clinical faculty: Seeking to validate the Nurse Educator Transition Model. *Nurse Educator*, 45(2), 102-105.

<https://doi.org/10.1097/NNE.0000000000000704>

Appendix A: Social Media Invitation



You are invited to share your views for a study titled: Experiences of Baccalaureate Prepared Nurses on Their Transition to Novice Faculty.

- One 60-minute interview that will be audio recorded (no video recording)
- You would receive a \$15 Starbucks gift card as a thank you
- To protect your privacy, the published study will not share any names or details that identify you

Interviews will take place during _____

Volunteers must meet these requirements:

- Nursing faculty members who have been in the role for three or less years
- Teaching in a Practical Nursing program in Northwestern Ontario
- Baccalaureate or Bachelor's degree as highest level of education.

If interested in participating in this study, click the following link or scan the QR code below to complete a recruitment screening questionnaire online:

<https://www.surveymonkey.com/r/8Y3Q8DY>



Appendix B: Screening Questions for Participant Recruitment

Your responses to the following questions will determine your eligibility to participate in this research study.

Please provide your personal email address that you wish to be contacted at should you be eligible to participate.

Are you currently a nursing faculty member teaching in a practical nursing program in Northwestern Ontario?

Have you been in the nursing faculty role for 3 or less years?

Have you taught any didactic nursing courses (theory based)

Is your highest level of education attainment a baccalaureate/bachelor's degree?

Appendix C: Instrumentation Part 1: Online Demographic Questionnaire

The following questionnaire is the first step in the data collection process and may take 5 minutes to complete. The purpose of this is to collect participant demographics and determine your availability for scheduling the audio-recorded virtual interview over Zoom. The interview is the second and final step in the data collection process and will take approximately 60 minutes.

Thank you so much for your interest in participating in nursing research.

Jade Lombardo
Walden University PhD Candidate
XXX@waldenu.edu
IRB Approval Number:
IRB Expiration Date:

1. What is the highest level of education that you have completed?
 - a. RPN
 - b. BScN/BSN
 - c. MSN
 - d. Doctorate
 - e. Other (describe)
2. How many years have you been a nursing faculty member:
 - a. Less than 6 months
 - b. 6-12 months
 - c. 2 years
 - d. 3 years
3. In which programs do you teach?
 - a. Practical Nursing
 - b. BScN/BSN
 - c. Other (describe) _____

These final two questions ask about your availability to set up the virtual interview via Zoom.

4. Please choose the days that are most convenient to set up the interview. (Select all that apply)
 - a. Monday
 - b. Tuesday
 - c. Wednesday
 - d. Thursday
 - e. Friday
 - f. Saturday
 - g. Sunday

5. Please choose the times that are most convenient to set up the interview. (All times are listed in EST).
 - a. Early Morning (7am-10am)
 - b. Afternoon (11am-2pm)
 - c. Late Afternoon (3pm-6pm)
 - d. Evening (7pm-9pm)

A copy of your response to this questionnaire will be emailed to the email address that you have indicated.

Appendix D: Instrumentation Part 2: Interview Questions

Before Recording

Welcome and Introductions

Thank you for your support in participating in this doctoral study. This will be part of the research process where you will share your experiences of transitioning into the nursing faculty role.

Before we begin, do you have any questions that I can answer?

If you consent, I will now begin the audio recording.

Start Recording

Today's date is _____ and the Time is _____

Hello "participant number". I would like to once again thank you for agreeing to participate in this qualitative research study exploring the experiences of baccalaureate prepared nurses on transitioning into a novice nursing faculty role in a practical nursing program.

Confidentiality of disclosure. I want to assure you that everything you share with me in this interview will not be attributed to you or to your employer in any way. I also need to inform you that the interview will be voice-recorded and transcribed verbatim. Do you volunteer to be interviewed for this study? During the interview, please do not state your name, the names of any students, or the name of any institutions. Are there any questions before we begin?

1. RQ- Can you please describe your experience of transitioning from a clinical nurse expert to the novice nursing faculty role?

2. Prior to entering into the faculty role, what are some of the expectations you had of the role? (Anticipatory/Expectation Phase)
3. How did your employer support your transition into the faculty role (orientation, mentorship, training?)
4. How did you personally prepare for the nursing faculty role?
5. Can you please describe your experience in the first 3 months of the nursing faculty role?
6. Describe what would have been ideal in your transitioning to the nursing faculty role?
7. Was there anything else that you would like to discuss that we have not touched on yet?

That concludes the interview. If there is something that you remember later that you feel you would have liked to share with me during this interview, please send me an email and we can make the necessary arrangements. Once the interview has been transcribed you will receive a copy of the transcription in your email so that you can check its accuracy.

Appendix E: Themes: Experiences of Baccalaureate Prepared Nurses on Their Transition
to Novice Faculty Members

Research Question: What are the experiences of baccalaureate nurses as they transition into faculty members teaching in 2-year diploma prepared nursing programs in Northwestern Ontario?

| Theme | Categories | Codes |
|--|---|--|
| Theme # 1: Anticipation of Structured Support and Preparedness | <i>Initial Expectations</i> | <ul style="list-style-type: none"> • Adequate time • Support • Adequate Resources |
| Theme # 2: Lack of Orientation and Institutional Support | <p><i>Initial Experience: Unclear and Challenging Beginnings</i></p> <p><i>Unsupported Transition into Role</i></p> <p><i>Inconsistent or Absent Orientation, Training, Mentorship, and Support</i></p> | <ul style="list-style-type: none"> • Unclear expectations • Difficult • Excitement • Flying blind • Lost in the woods • Figuring it out • Thrown in the deep end • Floundering • Thrown to the wolves • Teach yourself • Autonomy • Challenging • Awful • Lack of mentorship • Informal mentorship • Orientation • Lack of guidance/support |

| | | |
|--|--|---|
| | | <ul style="list-style-type: none"> • Lack of training • Self-directed |
| | <i>Management: Absent Guidance and Communication</i> | <ul style="list-style-type: none"> • Lack of guidance/support • Lack of feedback • Avoidance • Lack of communication |
| | <i>Workload, Time Commitment, and Financial Compensation</i> | <ul style="list-style-type: none"> • Workload • Time Commitment • Lack of adequate compensation |
| Theme # 3: | <i>Role Stress and Role Strain: Identity Conflict and Task Struggles</i> | <ul style="list-style-type: none"> • Not an educator • Struggle with Tasks • Knowledge |
| The Emotional Weight of Role Unpreparedness | | |
| | <i>Emotional Reactions: Overwhelm, Anxiety, and Discouragement</i> | <ul style="list-style-type: none"> • Overwhelmed • Confused • Disappointed • Anxious • Questioning self • Frustrated • Discouraged • Inadequate • Panic • Stress • Lack of confidence • Unprepared • Uncertainty |
| Theme # 4 | <i>Resource and Material Challenges</i> | <ul style="list-style-type: none"> • Textbook Resources • Course Material |
| Lack of Accessible, Comprehensive, and Timely | | |

**Teaching
Resources**