

Walden University ScholarWorks

Walden Dissertations and Doctoral Studies

Walden Dissertations and Doctoral Studies Collection

2019

Male Students and Stress During their Nursing Education

Stephen Joseph Alves *Walden University*

Follow this and additional works at: https://scholarworks.waldenu.edu/dissertations

Part of the Education Commons, and the Nursing Commons

This Dissertation is brought to you for free and open access by the Walden Dissertations and Doctoral Studies Collection at ScholarWorks. It has been accepted for inclusion in Walden Dissertations and Doctoral Studies by an authorized administrator of ScholarWorks. For more information, please contact ScholarWorks@waldenu.edu.

Walden University

College of Health Sciences

This is to certify that the doctoral dissertation by

Stephen Alves

has been found to be complete and satisfactory in all respects, and that any and all revisions required by the review committee have been made.

Review Committee Dr. Donna Bailey, Committee Chairperson, Nursing Faculty Dr. Kathleen Brewer, Committee Member, Nursing Faculty Dr. Patricia Dittman, University Reviewer, Nursing Faculty

The Office of the Provost

Walden University 2019

Abstract

Male Students and Stress During their Nursing Education

by

Stephen Alves

MSN, University of Massachusetts Dartmouth, 2006

BSN, University of Massachusetts Dartmouth, 1989

Dissertation Submitted in Partial Fulfillment

of the Requirements for the Degree of

Doctor of Philosophy

Nursing

Walden University

November 2019

Abstract

Stress is a common phenomenon experienced by nursing students; however, there is a gap regarding the perception of stress by male nursing students. It is important for nurse educators to be aware of the stressors that are unique to male students to provide appropriate resources and ensure their success in nursing school. The purpose of this qualitative study was to identify the lived experiences male nursing students' stress. Lazarus and Folkman's transactional model of stress was the theoretical framework for this study. Semistructured interviews were conducted with 8 participants, who were male students enrolled in associate degree nursing programs, to answer the research question exploring the lived experiences and perceptions of stress of male nursing students related to nursing school. The data were manually coded and analyzed using Colaizzi's method of data analysis. Five common themes emerged: stress, time commitment, loss, self-care, and positive experiences. Recommendations for future research include exploring the perception of stress, and perceived role strain related to stereotypes of male nurses with students in higher levels of education. The findings promote positive social change, as they can be used to encourage the assistance of students completing their programs, which can improve the health of their patients, the community, and the nursing profession by increasing the representation of males entering the discipline of nursing and providing high quality care.

Male Students and Stress During their Nursing Education

by

Stephen Alves

MSN, University of Massachusetts, 2006

BSN, University of Massachusetts, 1989

Dissertation Submitted in Partial Fulfillment

of the Requirements for the Degree of

Doctor of Philosophy

Nursing

Walden University

November 2019

Dedication

I would like to dedicate this dissertation to three important people in my life. First, to my wonderful parents. You were the most wonderful parents that anyone could have asked for. While you are no longer here with us, I know you are here with me in spirit. I have felt your love and support during this long doctoral journey. I love and miss you both every day. I would also like to dedicate this dissertation to a nursing professor I had during my early days as a nursing student. Thank you, Professor Toby Shea. If it were not for your support and guidance when I was a beginning nursing student, I would not be where I am today. Thank you so much. I will never forget all you did to help be become the nurse I am today.

Acknowledgments

I would like to thank my dissertation committee, Dr. Donna Bailey, Committee Chair, Dr. Kathleen Brewer, Committee Member, and Dr. Patricia Dittman, URR, for all your guidance and support throughout this dissertation process. I appreciate your guidance more than you will ever know.

I would also like to acknowledge my wonderful friends and colleagues, Debbie Quenga, Jennifer Strollo, and Kelli Hiller. You all have been my rock and support during this long doctoral journey. You encouraged me and kept me going whenever I felt like giving up. To the participants of my study, thank you for taking time out of your busy schedules to work with me on this project.

Finally, to my wonderful family, my wife Linda, and my two sons, Peter and Brian. Your love and support helped me to reach my dream. I love you all so much!

List of Tablesv
List of Figures vi
Chapter 1: Introduction to the Study1
Introduction1
Background2
Problem Statement
Purpose of the Study4
Research Question4
Theoretical Framework4
Nature of the Study6
Definitions6
Assumptions
Scope and Delimitations9
Limitations9
Significance9
Summary10
Chapter 2: Literature Review
Introduction12
Literature Search Strategy12
Theoretical Framework
Concept of Stress 13

Table of Contents

Literature Related to Key Concepts	14
Perceptions of Stress	
Effects of Stress	19
Potential for Social Change	20
Summary	21
Chapter 3: Research Method	23
Introduction	23
Research Design and Rationale	23
Role of the Researcher	24
Methodology	24
Participant Selection Logic	
Sample Size	
Data Analysis Plan	
Issues of Trustworthiness	27
Summary	28
Chapter 4: Results	29
Introduction	29
Setting	29
Demographics	29
Data Collection	30
Data Analysis	32
Evidence of Trustworthiness	

Results	
Stress	
Time Commitment	
Loss	
Self-Care	
Positive Experience	
Summary	42
Chapter 5: Discussion, Conclusions, and Recommendations	44
Introduction	44
Interpretation and Findings	45
Stress	
Time Commitment	
Loss	
Self-Care	
Positive Experience	
Theoretical Framework	
Limitations of the Study	51
Issues of Trustworthiness	
Recommendations	54
Implications for Positive Social Change	56
Conclusion	57
References	

Appendix: In	terview (Guide	67
--------------	-----------	-------	----

List of Tables	
----------------	--

Table 1. Codes and Common	Themes	35
---------------------------	--------	----

List of Figures

Figure 1. Nursing student perception of stress	6	1
--	---	---

Chapter 1: Introduction to the Study

Introduction

Professional education can be a stressful experience, which often affects the physical and mental health (Singh & Kohli, 2015). Nursing students often experience stress related to several aspects of their academic and clinical coursework such as course assignments, projects, clinical experiences, fear of doing harm to patients, and balancing their academic work with family responsibility (Alzayyat & Al-Gamal, 2014). Clinical related aspects of stress involve feelings of having unmet clinical learning needs (Suresh, Matthews, & Coyne, 2012); interactions with nurses, physicians, and patients (Burnard, Bindi, Rahim, Hayes, & Edwards, 2007); and being afraid of harming a patient (Wallace, Bourke, Tormoehlen, & Poe-Greskamp, 2015). For students who have made mistakes in the clinical area, the event was described as a traumatic experience for them (Zieber & Williams, 2015). Further, many students feel stress from being observed by faculty and attitudes of nursing staff (Wallace et al, 2015) as well as exams (Gibbons, Dempster, & Moutray, 2009).

Stress can have a negative impact on students' success in a program (Moscaritolo 2009). Therefore, it is important for nurse educators to have a clear understanding of what students perceive as stressful and how this phenomenon can affect student outcomes such as academic performance and student retention. For instance, the attrition rate for those enrolled in associate degree nursing programs is approximately 47% (Harris, Rosenberg, & Grace O-Rourke, 2014). Further, it is important for the nursing profession

to represent the population it serves, which involves recognizing the unique stressors male students' exhibit to provide appropriate resources to ensure their success.

Chapter 1 will include a background of the problem and the purpose of this study. The theoretical framework selected for this study as well as the limitations, scope and delimitations of the study and the significance for this research will be included.

Background

The focus of this research was the perception of stress experienced by male nursing students. The nursing profession has historically been a female oriented profession. Although the numbers of males entering nursing has increased over the years, men going into the profession is still underrepresented and a minority. According to Ierardi, Fitzgerald, and Holland (2010), men in nursing represent a small percentage of the nursing workforce. For example, in 2006, only 8% of the nursing workforce were males (Ierardi et al., 2010). However, according to the U.S. Census Bureau (2013), males entering the nursing profession increased to 9.6% by 2011. But males still represent a small percentage of those in the nursing. It is important for the nursing profession to have a workforce that represents the population it serves. Therefore, it is important to recruit and graduate more men from nursing programs.

To better serve and increase the number of male students in the nursing profession, it is important to address their unique challenges. Some of the challenges faced by male nursing students entering school are social isolation, gender stereotypes, and inequities related to clinical learning (Ierardi et al., 2010). Some of the clinical learning inequities include limited opportunities to care for patients in obstetrics or frequently being asked to assist in moving heavy patients (Hodges et al., 2017). Further, once male students enter nursing school, they are often faced with several barriers to education such as role strain, lack of male role models, isolation, and gender discrimination (Hodges et al, 2017). Male students may feel that their masculinity is questioned by others due to being in a predominately female oriented profession (Hodges et al, 2017). Male students may often be mistaken for medical students or physicians or be asked by patients why are they not in medical school, which could lead to stress and doubting their choice of a profession. These challenges could result in perceived levels of stress among male nursing students. Therefore, I conducted this study to examine how male students perceive stress and how they cope.

Problem Statement

It is important for healthcare to have a workforce that represents a culturally diverse community, which requires recruiting and retaining individuals who identify in various ways such as nationality, ethnicity, gender, sexuality, and age. Nursing education programs also have a responsibility to serve the community by preparing nurses. However, one of the barriers to retaining nursing students are the stressors that students experience, which may be increased for students who are not female. Men are underrepresented in nursing programs, and there is still work to do in education on the contributions male registered nurses provide in caring for patients and to the nursing profession.

Nursing school is a stressful time for nursing students, as they must learn how to manage their academic, clinical, and personal responsibilities. Although the literature addresses the stressors students face while in their nursing educational programs, male students often do not discuss the stressors they are experiencing related to their educational experience. Thus, there is a gap in the literature about male nursing students' perceptions of stress related to nursing school (Abushaikha, Mahadeen, Abdelkader, & Nabolsi, 2014). Additionally, although there is an abundance of literature on student stress related to academic and clinical components of the nursing curriculum, there is a gap regarding how male students perceive and manage the stress related to nursing school. Therefore, understanding the lived experience of how male students perceive stress may help to provide insights to recruiting, supporting, and retaining male nursing students.

Purpose of the Study

The purpose of this study was to identify the lived experiences of male nursing students' stress. To explore this phenomenon of interest, I used a qualitative interpretive phenomenological research design. This research has the potential to add to the body of scientific knowledge about the stress experienced by male nursing students. Interviews with male nursing students were conducted to understand the perceptions of stress.

Research Question

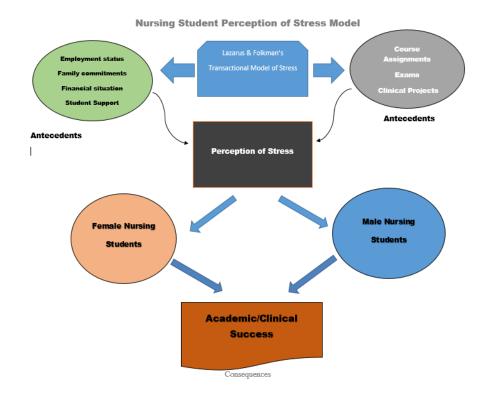
What are the lived experiences and perceptions of stress of male students related to nursing school?

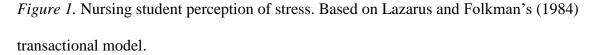
Theoretical Framework

Lazarus and Folkman's (1984) transactional model of stress was the theoretical foundation for this research. The model helps examine not only how a person perceives a

stressor but also a person's coping resources. I applied this model to examine the stressors experiences by male students and how they cope with stressors related to nursing school.

Figure 1 visually depicts the phenomenon of stress. Within the center of the model is the perception of stress as experienced by nursing students. The antecedents leading to stress include factors like employment status, family commitments, financial situations, and amount of student support. Other antecedents are related to specific academic aspects such as assignments, exams, and clinical projects. At the top center of the model is the theoretical framework, representing the fact that if students can successfully progress through the transactional model of stress, they will better able to cope and deal with the antecedents causing the stress, which will lead to academic and clinical success.





Nature of the Study

I used a qualitative interpretive phenomenological approach. I conducted interviews with male nursing students to understand the perceptions of stress they experience. This approach allowed me to see and hear first-hand the lived experiences of male students who are currently enrolled in an associate degree nursing program and to hear about what stressors they are experiencing.

Definitions

Antecedents: Antecedents are occurrences or events that must occur for the concept to exist (Walker & Advant, 2011). For example, one antecedent for perception of

nursing school stress may be role strain related to having to balance academic and clinical assignments with caring for family. Other antecedents related to stress may be fear of failing or fear of harming a patient.

Attributes: Attributes related to a concept are characteristics that help the reader in understanding the occurrence of a phenomenon (Walker & Avant, 2011). The attributes related to the concept of stress, according to Goodnite (2013), include applying tension or stimulus to an organism and its inability to meet the challenge. For example, students may feel stress in working to meet objectives, providing safe care to patients, and working with time constraints for academic and clinical assignments. These all occur while the student is attempting to master new content, vocabulary, concepts, values, and skills.

Concepts: Concepts "are terms that refer to phenomena that occur in nature or thought" (McEwen and Wills 2014, p. 50). The concept addressed and explored in this study was psychological stress.

Consequences: Consequences are occurrences that are the result of a concept (Walker & Advant, 2011). Consequences that may occur because of psychological stress related to nursing education may include feelings of depression, anger, fear, low self-esteem, resulting in such behaviors as missing class and clinical. Other consequences related to unresolved feelings of stress may include turning in unsatisfactory academic/clinical assignments. If the student is not able to overcome these feelings and improve his or her work, this may result in academic or clinical failure.

Stress: The operational definition of stress for this study is the result of the work of Lazarus and Folkman (1984), which suggests that it is a "particular relationship between the person and the environment that is appraised by the person taxing or exceeding his or her resources and is endangering his or her well-being" (p.19). This definition addresses the concept of psychological stress. Based on the literature, psychological stress related to balancing academic and clinical work with home and family life can adversely impact students' success in the program.

Assumptions

One of the assumptions of this study is that male nursing students exhibit higher levels of stress related to preparing for their clinical assignments, providing patient care during clinical experience, and working specific rotations like obstetrics than female students. Another assumption is that faculty are supportive and take the time to adequate prepare students for their classroom and clinical experiences. If faculty are perceived by students as supportive, then the learners will tend to be able to cope with their stress more effectively and efficiently (Boulton & O'Connell, 2017). Finally, another assumption was that male nursing students are challenged to balance the demands of academic and clinical responsibilities with their extracurricular activities. Male students who feel consumed by their academic/clinical responsibilities have stated that they feel their opportunities for competing in college extracurricular activities are being missed (Abushaikha et al., 2014).

Scope and Delimitations

The scope of the study included male nursing students enrolled in an associate degree nursing program. Although stress is a phenomenon experienced by male and female nursing students, this study was focused solely on male nursing students. The participants were recruited from students in both the first and second year of the program. Data collection occurred until data saturation. Data saturation occurs in qualitative research when no new themes are emerging with continuing interviewing of participants (Ravitch & Carl, 2016).

Limitations

A possible limitation of this study which could influence the data collected could be the target population selected, which was only associate degree nursing male students. Another possible limitation could be my own personal bias. To address bias, I developed interview questions which I read verbatim during the interviews.

Significance

The results of this research may help to generate new knowledge for the nursing profession. The literature has addressed the perception of student stress, but there is a gap in the knowledge regarding how male students experience nursing school (Ierardi et al., 2010). Frequent sources of academic stress perceived by students are exams, timing of exams, and balancing work and family (Gibbons, Dempster, & Moutray, 2009). Additionally, clinical environments can cause high levels of anxiety. If the student cannot manage this stress and anxiety, it can negatively affect his or her clinical performance and can also threaten success in the program (Moscaritolo, 2009). Thus, this research

may provide nursing faculty with a better understanding of the stressors unique to male nursing students so they can be addressed and improve student success.

The findings of this study will also help to foster the mission of Walden University of creating positive social change, which is a process of promoting ideas that can help people and society. With a stronger understanding of how both genders perceive stress, faculty can provide appropriate resources and guidance, which can foster student success and retention and lead to better care for patients. Having more male nursing students successfully finishing their programs and enter the profession not only brings more skilled and educated health care professionals to workforce, but it also benefits the community. More males entering the profession may educate the community regarding the important contribution men make to the nursing profession. Male registered nurses can serve as role models for other men who might be considering pursuing nursing as a career, which may increase the representation of males entering nursing.

Summary

Although all students experience stress, there is a gap in the literature regarding whether male nursing students experience the same kinds of stress as their female classmates. This study addressed the need to explore this phenomenon to help generate new knowledge for the nursing profession. It is important for faculty to be cognizant of the feelings that all students are experiencing to provide the appropriate guidance and resources to promote student success.

Chapter 2 will include the literature and available data on the concept of stress. A current review of the literature will support the problem statement and reason for the need

for this study to be conducted as well as justify why a phenomenological approach facilitated understanding.

Chapter 2: Literature Review

Introduction

Nursing school is stressful for nursing students as they learn how to manage their academic, clinical, and personal responsibilities. The literature addresses the stressors that students face while in nursing educational programs today; however, male students often do not discuss the stressors they are experiencing related to their educational experience. Thus, there is a gap in the literature regarding the perceptions of stress related to nursing school by male students (Abushaikha, Mahadeen, Abdelkader, & Nabolsi, 2014). The purpose of this study was to identify how male nursing students experience stress.

This chapter is focused on the review of the literature regarding the concept of stress as well as how stress is perceived by nursing students. Some of the negative consequences related to academic and clinical stress will also be addressed in this chapter. Finally, why this study needs to be conducted in relation to effecting positive social change will be addressed.

Literature Search Strategy

A literature review was conducted on research related to the concept of stress. Due to a gap in the literature related to the perception of stress experienced by male nursing students, the literature review was expanded to include the general concept of stress experienced by any student to provide background regarding the concept. Articles with a publication date between 2014-2018 were selected; however, due to the gap in the literature, older articles were also selected. The search engines used include CINAHL, Education Source, Medline, and PsycInfo. The following keywords were used in the search: *Stress, perception of stress, nursing students, and male and female nursing students, stress frameworks,* and *stress in male nursing students.* The search resulted in the following themes: definitions of stress, stress in undergraduate education, nursing student perception of stress. The following sections include a discussion of the literature review results.

Theoretical Framework

Lazarus and Folkman's (1984) transactional model of stress was the foundation that guided this research because it helps examine how a person perceives the significance of a stressor or stressors as well as how the individual copes with the stressor or stressors. Thus, I applied Lazarus and Folkman's theoretical framework to examine the stressors experienced by male students and help understand how male students respond to and cope with stressors related to nursing school. Literature has indicated that stress in nursing can have adverse consequences for nurses such as psychological as well as physical health problems, which can interfere with professional practice (Suresh, Mathews, & Coyne, 2012). Psychological stress not only affects practicing nurses but also nursing students who have to balance their academic and clinical work with their responsibilities of family and work responsibilities.

Concept of Stress

The concept of stress is a broad and abstract phenomenon that affects everyone, so it is not unique to the nursing profession. *Stress* is a common term used in various disciplines related to everyday life as well as in healthcare (Goodnite, 2013). Thus, there are many variations to the definition of stress depending on the specific discipline and context of the concept. As a general definition, stress is a force that can cause psychological or physiological pressure (Merriam-Webster collegiate dictionary, 2005). *Stress* has also been defined as the nonspecific and predictable response by the body because of the demands placed on it. Physiological stress can be exhibited through elevated blood pressure, heart rate, and respiratory rate. Stress as a psychological concept can be defined as "a particular relationship between the person and the environment that is appraised by the person taxing or exceeding his or her resources and is endangering his or her well-being" (Lazarus & Folkman, 1984, p. 19). It is this psychological concept of stress that was the impetus for this study.

Literature Related to Key Concepts

Perceptions of Stress

There is much literature regarding the perception of stress experienced by nursing students. The adult learners in today's college environment frequently experience stress related to not only academic issues time management problems but also financial as well as family and academic imbalances (Pierceall & Keim, 2007; Zhang & Cherniak, & Hallett, 2017). Research has indicated that personal stressors unrelated to school have a physical and emotional effect on nursing students (Freeburn & Sinclair, 2009). Additionally, frequent sources of stress among baccalaureate nursing students include curriculum content, clinical rotations, and interactions with clinical faculty (Shindi & Hiremath, 2014). For example, Wallace et al. (2015) examined the perception of stress in 65 baccalaureate nursing students using the Nursing Student Clinical Stress Scale and

revealed that the students perceived the most stress from incivility of the nursing staff in clinical as well as from faculty. They also felt stress related to time management issues. It is important for faculty to be aware of these stressors to help promote positive student outcomes.

In addition to the typical stress on nursing students, research has shown that certain students have unique stressors such as foreign-born nursing students. For example, Shudifat and Al-Husban (2014) found common sources of stress among nursing students in Jordan included academic workload, living away from home, change in sleeping and eating habits, and a change in social interactions. Additionally, Junious, Malecha, Tart, and Young (2010) found that foreign-born nursing students' common sources of stress were related to cultural differences, language related factors such as accents, and overall communication issues. Additionally, factors such as financial costs, language barriers, and feelings of lack of support from faculty have been the most frequent causes of stress experienced by foreign-born students (Junious et al., 2010). Other perceived stressors were feelings of discrimination and stereotyping (Junious et al., 2010, p. 268). Although the study did not represent various ethnic racial, or different age groups, or both genders (Junious et al., 2010), it shows the unique stressors nursing students can exhibit, which are important for faculty to be aware of to provide a successful clinical and academic environment.

Nursing students often experience stress related to several aspects related to their academic and clinical coursework. For example, the written clinical assignments such as nursing care plans are required to be completed the evening before the clinical experience and frequently take several hours to complete. Research has also indicated that two major causes of stress for nursing students involve assignment workload and students' lack of knowledge and skillset required for completion of clinical assignments (Alsaqri, 2017). Further, final examinations are frequently viewed as high stakes testing by many students, so they are common causes of stress (Gannon Tagher, & Robinson, 2016).

Some specific clinical related aspects of stress include a large patient assignment and feelings of having unmet clinical learning needs (Suresh et al, 2012). Frequent sources of stress can also be attributed to course assignments, projects, clinical experiences, and fear of doing harm to patients (Alzayyat & Al-Gamal, 2014). It can be stressful for students working in the clinical environment and being expected to handle technical equipment while having to complete unfamiliar clinical assignments (Alsaqri, 2017). Although all college students frequently experience stress, nursing students have additional sources of stress such as having to travel long distances to clinical sites, having to complete detailed clinical assignments prior to giving patient care, and working with technical equipment (Michael, 2017). Additionally, many students often feel being observed by faculty and attitudes by nursing staff members are also causes of stress (Wallace et al, 2015). For example, fear of making an error and causing patient harm is a source of stress (Wolf et al., 2017). Making mistakes in the clinical area has often described as a traumatic experience for students (Zieber, & Williams, 2015).

Time management issues have also been cited as stressors for students. Mirzaei et al. (2012) examined how 21 Iranian nursing students balanced coursework and outside activities. The results revealed that much of their stress resulted from their

responsibilities related to school, so the students devoted most of their time management on their academic responsibilities. Additionally, the results showed that students still need to allocate time for personal activities and responsibilities to better be able to manage their stress. This indicates the stress that time management can cause for nursing students. However, although the researchers included both genders in the sample, there was no discussion specific to how male students perceive stress, which I addressed through the current study.

Studies have also shown that some students perceive a lack of support from not only faculty and staff but also from hospital staff, which increases their feelings of stress (Timmins, Corroon, Byrne, and Mooney, 2011). Problematic relationships are situations that can occur between faculty and students and lead to additional stress for students (Wolf et al., 2017). Negative attitudes by clinical faculty as well as lack of awareness of the timeliness of assignments and tests can be viewed as these problematic relationships (Wolf et al., 2017).

Lack of positive feedback from faculty has also been documented as a source of stress. When students only receive negative feedback regarding their work without any positive comments from instructors, this increases feelings of stress (Tharania, Husainb & Warwick, 2017). When discussing with students who they viewed as a social support network, faculty tended to be considered as not significant sources of support (Reeve, Shumaker, Yearwood, Crowell, & Riley, 2013). Conversely, there is evidence in the literature that supports faculty encouragement as a way of helping to alleviate student

stress. For example, Weitzel and McCahon (2008) revealed that students felt that faculty support was an important resource that helped alleviate their stress.

Another source of stress according to Reeve et al. (2013) was the perception of rejection of the students on the part of the hospital staff. Anthony and Yastik (2011) discuss how nursing students are often considered the group who are the most vulnerable and are most frequently the target of incivility. Having the opportunity to be on the clinical unit providing direct patient care is often viewed as a positive experience for nursing students. Incivility toward students by staff does occur and can be a source of stress for nursing students (Anderson & Yasik, 2011).

All the studies discussed in this chapter provide evidence regarding the various sources of stress experienced by students in nursing programs. According to the literature, regardless of the source, nursing students find many aspects related to their educational programs such as academic/clinical assignments, time management issues, perceived lack of support as stressful events. This phenomenon known as stress shared by students across the globe, is evident by the findings from the various studies in this literature review. The review of the literature in this chapter also illustrates that there is a gap regarding what is known about how male students specifically perceive stress. Much of what has been written in the literature regarding this concept fails to address what each gender specifically views as stressful. As a result, as previously stated, the aim of this research study is to assist the nursing profession in gaining new knowledge about what male students perceive as stressful related to their nursing education.

Effects of Stress

If nursing students are not able to manage their stress appropriately, this could ultimately have a negative impact on their success in the program (Moscaritolo 2009). A concern regarding the impact of the stressor's students experience is the potential for substance use to help alleviate the stress. As their stress level increases, nursing students are at higher risk for turning to substance use (Bolton & O'Connell, 2017). If students feel they have adequate faculty support, this may help to decrease the severity of their stress level, and thereby, may decrease their temptation to turn to drugs and or alcohol to cope. Boulton and O'Connell (2017) conducted a study and found that faculty support validated their hypothesis that increased faculty support resulted in decreased student self-reporting of substance use than those who did not perceive increased faculty support. This study supports the goal of this doctoral dissertation. For faculty to be able to provide adequate support and needed resources for nursing students to effectively manage their stressors, it is critical for faculty to understand what nursing students, both male, and female perceive as stressful.

The research studies which have been included in this chapter have served to provide evidence and background regarding the common sources of stress experienced by nursing students. However, this chapter has also shown the gap in the literature regarding what sources of stress are specific to male nursing students. The sample populations included in the studies are often vaguely when discussed concerning the participants. Other studies mention only female students as the sample participants. Another justification for the need for this study based on evidence from the literature, is that many of the recent studies have focused on nursing students in four-year nursing programs. The focus of this research will focus on associate degree nursing students.

Lazarus and Folkman (1984) developed a transactional model of stress. This model was the theoretical framework for this study. The model examines not only how a person perceives the significance of a stressor or stressors, but also examines a person's coping resources, as well as how he or she copes with the stressor/stressors. Depending on how well the student can adapt, and cope with their stressors, will determine how successful the student will be in the program of study. Lazarus and Folkman's theoretical framework was applied to examine the stressors experiences by male students, and to help elicit how these students responds to, and cope with stressors related to nursing school.

Potential for Social Change

The results of this qualitative research study will help to promote positive social change. While there are numerous studies in the literature addressing nursing students and stress, there remains a gap in the literature exploring how male nursing students as a minority in the profession, experience stress. The goal of my research study was to generate new knowledge about this phenomenon for the nursing profession. It is important for the nursing faculty to be more cognizant of how their students perceive stress to be able to help provide appropriate resources regarding stress management. This will help to promote student retention and success in the program. This helps to promote positive social change by helping more of our students become successful practitioners, who will in turn be able to provide care and primary health education to their patients in

their communities. Providing health education and high-quality care promotes positive social change for the community.

The benefit of this research will help institutions and organizations such as colleges and universities by providing new knowledge regarding how male students in nursing programs perceive stress. It will provide educators with insight into the male student population and assist faculty in assisting these students to overcome their stressors and be successful. This research will help cultures and societies become more aware of the importance of helping male students become successful in their educational programs. Increasing the percentage rates of males graduating from nursing school will continue to help increase the number of males in the profession. Males in nursing will serve role models for men considering entering the profession.

Summary

The literature review conducted in chapter two provides strong evidence that there are many stressors which affect nursing students; however, it fails to provide evidence regarding how males specifically perceive stress. Many of the articles retrieved for this chapter were either very vague regarding both genders depicted in the studies, or only discussed having female students involved in the research. Anderson and Yasik (2011) concur for example that there needs to be more research regarding student gender regarding perception of incivility toward students by staff.

In addition to the gap in the literature regarding how male students specifically perceive stress, the literature review illustrates that many of the studies conducted on this topic have been done in countries other than the United States. The results of this study will serve to contribute to the knowledge base regarding how male students in the United States perceive stress. Another gap in the knowledge regarding the perception of stress is related to the fact that many of the studies in the literature were conducted with students in four-year nursing programs. There have been limited studies related to this topic with students in associate degree nursing education. This provides further justification for the need for this study to be conducted. Further research needs to be conducted to help generate new knowledge regarding this phenomenon for the nursing profession. Chapter three addresses the research methodology of this study. This research will fill this gap by exploring common themes related to stress which are experienced by male nursing students.

Chapter 3: Research Method

Introduction

The purpose of this interpretive phenomenological study was to identify the lived experiences male nursing students experiencing stress. Phenomenology is a method used to discover the meaning of the lived experiences of the participants (Grove, Burns, & Gray, 2015; Houser, 2015). This type of research helps to give meaning to how people perceive, describe, and make sense of their phenomenon (Patton, 2015), which filled a gap regarding male nursing students' perceptions of stress. Interviews with male students were conducted to explore their experiences with nursing education and identify common themes related to stress.

Research Design and Rationale

I used a qualitative interpretive phenomenological design to conduct this study. Researchers select interpretive phenomenology as their methodology when they want to explore the meaning of the phenomenon they have selected to study (Reiners, 2012). This type of phenomenology aligned with my study. I selected this approach because it allowed me to learn about the lived experiences of male students who are currently enrolled in an associate degree nursing program and to hear about what stressors they are experiencing. I conducted individual interviews with male nursing students to understand their perceptions of their stress. This study answered the research question "What are the lived experiences and perceptions of stress of male students related to nursing school?" This question is based on the assumption that every nursing student experiences stress.

Role of the Researcher

The role of the researcher in qualitative research is to conduct a study in which the results will help to contribute to the body of knowledge for the discipline. The researcher considers and values the unique perspective of the individual in an approach to understand human experience (Grove et al., 2013). The role of the qualitative researcher is to collect data from the participants selected who have experienced the phenomenon of interest and to analyze the data so that emerging themes can be identified (Yates & Leggett, 2016). It is important for the researcher to keep an open mind and realize that there are many different viewpoints, and all are correct.

One of the potential problems when conducting research occurs when the researcher allows his or her biases to influence the results of the study. The researcher must be aware of his or her cultural and political perspectives (Yates & Leggett, 2016). One method of assisting the researcher to avoiding bias is bracketing, which involves the researcher explicitly reflecting on and then documenting his or her biases (Houser, 2015). If researchers make an effort to become aware of their bias, then they will be less likely to have them influence the study (Houser, 2015). This is the strategy that I used to avoid bias.

Methodology

Participant Selection Logic

The population that I selected were associate degree nursing students because this is a group of students that has not been well studied. I used purposeful sampling, which provides the researcher with context rich data from the participants who have had experience in, or knowledge about, the specific phenomenon of interest (Ravitch & Carl, 2016). Thus, I purposefully recruited participants from the population of male nursing students because they could provide data about what male nursing students perceive as stressful.

Inclusion criteria are guidelines the researcher uses as method of selecting participants who have set characteristics that are important to the research question (Houser, 2015). My inclusion criteria included associate degree male nursing students. Exclusion criteria are characteristics that exclude potential participants from the study. My exclusion criteria involved not selecting nursing students from other programs, such as baccalaureate and practical nursing programs or female students, because I was only interested in focusing on the male associate degree level student at this time.

My intent was also to recruit participants from another community college. Due to the role I am currently in as the director of the nursing program, selecting participants from another educational setting would eliminate additional stress on the students and prevent them from having feelings that I have power or control over them. Additionally, to help decrease intimidation on my potential sample population, I did not divulge my current role as a nursing program director. Selection of participants, and data collection did not occur until I received institutional review board (IRB) approval from Walden University (approval no. 03-26-19-0646603). In addition to obtaining IRB approval from Walden University, I sought IRB approval from the community college selected to recruit my sample participants. Following IRB approval, I send out notification about the study and sought potential volunteers through Survey Monkey. The participants were invited and selected by also sending out an e-mail announcement. Assurance was given to the potential participants that whatever would be discussed in the interviews was confidential, and that their anonymity would be protected by not using any names or identifying information such as names, addresses, phone numbers, and emails. In the invitation to participate, I stated that their participation would be completely voluntary, and they had the right to withdraw from the study at any time. All data collected were kept secure in a locked file cabinet. The computer used to type the dissertation is password protected. The data will be saved for 5 years and then destroyed as required by Walden University's IRB.

Sample Size

For the sample size, I conducted interviews with male students in the first and second year of their education until data saturation was reached. Data saturation occurs when no new data are collected by additional potential participants (Grove et al., 2013). I followed a similar study by Patterson and Morin (2002), who explored the perception of eight male nursing students regarding their maternal-child health clinical rotation. Another factor that determined my participant size is the nature of my study (Grove et al., 2013). This means that if the topic of choice is clear, and the participants can discuss it easily, then fewer participants are needed for the study (Grove et al., 2013).

An interview guide was developed for this dissertation (see Appendix). This guide consisted of a question or questions focused on how the participants perceived their experiences when they were in nursing school. Other sources of data collection used for the dissertation included reviewing journal notes and reviewing the recordings of the interviews. A curriculum review was also be conducted to determine whether it is consistent with what nursing students might experience in other settings.

Data Analysis Plan

The method of data collection for the dissertation involved conducting semistructured interviews. Coding of the data was done to identify common themes. The process of coding by hand is a means of taking each piece of data and placing it into various categories (Bright & O-Connor, 2007). A computer software program was used to code and assist with data analysis for my dissertation, which helps analyze the data faster. The software package selected for this dissertation was NVivo. This qualitative software package is widely used by qualitative researchers and allows scientists to classify, sort, and arrange large and small datasets (Bergin, 2011). This software also allows the researcher to import digitally recorded interviews and transcribe them (Bergin, 2011). NVivo can search the text of the transcript and identifies word frequencies which will assist with identifying common themes.

Issues of Trustworthiness

Qualitative research is not subject to concerns about internal and external validity because unlike quantitative research, it is not focused on cause and effect (Houser, 2015). However, it is important for these studies to maintain rigor and truth. For this dissertation, I conformed to the dimensions of trustworthiness. For example, regarding credibility—the results of a study representing the realities of the participants as much as possible (Houser, 2015)—the interview questions led to results that were accurate representations of the realities of my participants.

I maintained confirmability by being aware of my biases and trying to avoid them when conducting my interviews. For example, I did not offer any of my opinions regarding the questions or of their answers. I also did not share any of my own experiences of when I was a student and how I experienced stress.

Finally, regarding dependability and transferability, replicating this study in the future may result in consistent findings, which will help ensure dependability. My study may also be transferred to situations with similar participants and settings. For example, although my study involved working with associate degree nursing students, this study could be conducted with students in a baccalaureate nursing program as well.

Summary

Chapter 3 included the methodology for this study. The purpose of this study was to identify the lived experiences of how male nursing students experience stress. Following IRB approval, the participants were selected, and interviews were conducted to obtain the data. Using the computer software NVivo, the data were analyzed to determine common themes related to aspects of stress experienced by nursing students. The data analysis and discussion will be the focus of Chapter 4.

Chapter 4: Results

Introduction

The purpose of this interpretive phenomenological study was to identify male students' lived experiences with stress. The research question was "What are the lived experiences and perceptions of stress of male nursing students related to nursing school?" This study filled a gap in the literature by exploring common themes related to stress experienced by male nursing students through interviews. Chapter 4 will present the data collected from the eight participants in this study, who are all recent graduates from the same associate degree nursing program within the past 5 years. The data collection procedure and the analysis of the data will also be presented. The results of this study will be presented, which will include anecdotal excerpts from the participants individual interviews.

Setting

Four face-to-face and four telephone interviews were conducted. The face-to-face interviews were conducted at a private office secured for this study following IRB approval. For the face-to-face interviews, the location was selected to be unrelated to the agencies where the students did their clinical. Four of the participants preferred telephone interviews because it was more convenient for them. The interviews (both the face-to-face and the telephone interviews) ranged between 25 minutes to 35 minutes.

Demographics

Eight participants were selected for this study. All were graduates from the same 2-year associate degree nursing program at a local community college. Their ages ranged between 25-55. Two of the participants graduated 2 years ago (Participants 4 & 7), two graduated 3 years ago (Participants 1 & 6), and 4 graduated 5 years ago (Participants 2, 3, 5, & 8). The specific ages of each of the selected sample are not included to help preserve the anonymity of the participants.

Data Collection

Data collection began on June 23rd, 2019 following Walden University's IRB approval and lasted until July 17, 2019. Following IRB approval, flyers were sent out to the male nursing students at the community college selected as the site for this study, but the initial response rate was poor. No potential participants reached out despite four attempts at recruiting. As a result, the target population was changed to recent male nursing graduates who were out in clinical practice no longer than 5 years. Their nursing school experience being recent still allowed for the collection of the rich data related to their lived experience as students. Following IRB approval for the change in the target population, the participants were recruited through purposeful sampling with social media.

Although I had originally planned on conducting all the interviews face to face to capture the rich data by viewing nonverbal communication as participants shared their experiences, half of the selected participants (four) chose to do telephone interviews because it was more convenient for them. Thus, there was a slight variation in the data collection from the plan discussed in Chapter 3. In order to try and capture the affective domain of the participants over the telephone, I paid very close attention to what they were saying, in order to listen for any subtle changes in their voice which could indicate

possible signs of stress. In addition to tape recording the interviews as planned, I also used field notes to record some of the experiences shared by the participants. The field notes were used sparingly during the actual interviews to not detract from the participants sharing their experiences. Further notes were taken after each interview to fully capture the rich data obtained from each session. Each of the participants were given a small gift card as a thank you for their participation at the conclusion of their interview session.

Prior to beginning each interview, the purpose of the study was explained, and the consent form was reviewed. Signed consents were obtained before each interview was conducted. Each participant was reminded that their participation was voluntary and that they could stop the interview at any time. I also encouraged each of the participants to ask questions prior to the start of the interviews. None of the participants had any questions. I explained that the session would be recorded and obtained permission prior to beginning each session. The interviews lasted between 25 and 35 minutes. The interview guide (see Appendix) served as the data collection instrument for this study. During each interview, in addition to tape recording the session, I wrote down field notes. This allowed me the opportunity collect as much data as possible.

At the completion of each session the recorded interviews were transcribed immediately. Each of the participants were given the opportunity to view the written transcript of their interview session. Five of the participants declined, and three asked to review. A copy of the written transcript was e-mailed to the three participants who requested to review. There were no corrections required on the three transcripts sent for review. The data collected were stored on a password-protected, private computer and kept in a locked file cabinet.

Data Analysis

An interpretive phenomenological approach was utilized for data collection for this study. The rationale for this design was to gather information regarding the lived experiences related to the perception of stress associated with nursing school. At the completion of each individual interview, the recorded data were transcribed. I originally planned to use NVIVO software for transcription and data analysis; however, after reviewing this software, I felt it was too complex and time consuming to learn. As a result, I decided to use Temi software for transcribing the recorded interviews. Each transcript was then coded by hand. The participants were selected through purposeful sampling using social media. Qualities of discrepant cases were utilized in the participant selection. Discrepant cases involves the researcher not selecting participants who might not be able to provide the data needed to help answer the research question (Ravitch & Carl, 2016). All the participants selected for this study were able to provide rich data, which helped to answer the research question. Data saturation occurred at the completion of the sixth interview; however, two more interviews were conducted to ensure that data saturation had been reached.

The method used to analyze the data was based on the Colaizzi's method of data analysis with seven steps (Abalos, Rivera, Locsin, & Schoenhofer, 2016). The first step was to carefully read and reread each of the interview transcripts to gain insight and a better understanding of what each participant was stating during their interview. Step 2 of my analysis involved identification of specific codes in each of the eight individual transcripts. Notes were written in the margins of the transcripts which involved rephrasing specific participants' comments in order to gain a better understanding of the meaning of their statements. Each of the transcripts were reviewed line by line, and similar words, or phrases were color coded and highlighted as patterns emerged. Step 3 involved examining the identified codes in the transcripts to look for emerging themes. In Step 4, I looked for connections among the emerging themes. Each of the emergent themes were given a specific title. Step 5 of my analysis involved repeating each of these four steps in each of the eight transcripts to search for emerging themes in the subsequent transcripts. Step 6 involved examining all eight transcripts searching for patterns or similarities in the themes across all transcripts. Finally, Step 7 involved asking participants to review the transcript of their interview session. Three of the eight reviewed their transcripts, but they offered no suggestions for revisions.

Evidence of Trustworthiness

Trustworthiness was maintained during the study. Credibility was maintained during the interview process by close interaction with the participants. I personally conducted semistructured interviews with the eight participants. The interview questions were developed to allow the participants' responses to provide an accurate representation of their lived experiences. Another way in which credibility was maintained was by observation of participants who agreed to a face-to-face interview. This was done to observe for any nonverbal cues that might have become evident during the interviews, such as tensing of hand or facial muscles, lack of eye contact, frowning, or restlessness for example, which could have been indicators of stress. (None of these nonverbal cues were observed during the face-to-face interviews.) I also reviewed transcripts to become better aware of what each participant shared regarding their lived experiences related to their time in school. This in-depth review allowed for the ability of the coding of the data and the emergence of the themes.

Transferability was maintained throughout this study by focusing on participants' rich descriptions of what they felt was stressful. This allows the readers to reach their own conclusions regarding the trustworthiness of the results. Dependability was maintained by keeping a log of the data collection process including the written transcripts, and field notes form each interview. Dependability was also established by frequent peer review with members of my dissertation committee. Additional support for dependability and transferability is that this study could be replicated in the future with consistent findings. This study could be transferred to situations with similar participants and settings. For example, research could involve working with current associate degree nursing students as well as with students in a baccalaureate nursing program.

Further, confirmability was maintained by not allowing my personal bias to interfere with the data collected. I did not offer my opinion regarding any of the answers provided by the participants. I did not offer my own personal perspectives to the participants during the interviews. In addition, confirmability was maintained using field notes during and after each interview session. This allowed me to capture each participants' individual perception. To maintain the anonymity and confidentiality of the participants, the transcripts and my field notes are not included in this dissertation.

Results

The participants selected for this study were able to provide rich data to answer the research question regarding their perception of stress related to nursing school. Five common themes emerged following the identification of the coding of each of the transcripts. In the next sections, I will discuss how the results of the interviews validate the emergence of the five themes. Table 1 summarizes the common codes identified from the transcripts, and the themes that emerged from the data analysis.

Table 1

Codes	Emerging themes
"overwhelming material"	Stress
"pedi stressful"	
"tests hard, stressful"	
"fear of unknown"	
"Walking on eggshells"	
"Lack of confidence"	
"Balance between school/work/family"	Time Commitment
"Long hours of studying"	
"No sleep"	
"No time for family/friends"	
"Care plan preparation"	
"No social life"	Loss
"Failed relationship"	
"Broke up with girlfriend"	
"Good support from classmates"	Self-care
"Time for me"	
"Meditation"	
"Exercise"	
"Supportive Family"	
"Mindfulness"	
"Learned a lot"	Positive experience
"Great clinical experience"	
"Very good experience"	
"A good learning experience"	

Codes and Common Themes

Stress

Several aspects of the of the participants' nursing educational programs were perceived to be stressful. For example, clinical expectations from faculty. Seven of the participants stated that students were to be on time and well prepared for clinical, which was stressful. One participant stated that they needed to come to preconference with a detailed, completed care plan on their patient. Most the members of this study found that having to present their patient and the care they were expected to give to their patient to the instructor and peers in preconference very stressful. Participant 3 stated, "I was always afraid I would say something incorrect in preconference when presenting my patient's care plan, or not be able to answer one of my instructor's questions in front of my classmates."

Another common source of stress was the pediatric nursing course. Six of the participants experienced stress in this course, indicating that it was intimating because they had no children and no point of reference when attempting to learn about growth and development and developmental milestones pertaining to the pediatric patient. Participant 4 stated, "I thought I would never remember all those milestones that we were expected to remember. Other students who have children could relate to the milestones because they lived through them with their kids."

These six participants also discussed that their pediatric clinical rotations were especially stressful for them, more than their obstetric clinical rotations. They expressed that because they were male and did not have children, they had no experience with interacting with children. Participant 1 said, "Because I do not have any children of my own, I find it difficult to relate with children and to speak with them on their own level." Another participant stated,

Pediatrics was the most stressful clinical rotation for me. I don't have children so I could not relate to the kids. Plus having the parents there made it even more stressful I felt like they were watching me all the time around their kids.

Another participant stated,

I was really nervous in my pediatric rotation. I do not have any experience taking care of children. Having the fathers on the unit when we were there was very intimating for me. I felt like he was watching everything I did.

Another participant stated that having to perform assessments and do procedures such as medication administration and giving injections to children was extremely stressful for him. He stated,

I was still not used to giving injections to adults yet, and now I had to give one to a one-year baby! I was so afraid I was going to hurt my patient. I was nervous about making a mistake with calculating the pediatric dosages.

The other two participants who stated that pediatrics was the most stressful clinical rotation for them did not elaborate on why, but just stated they felt working with children was stressful for them. Another common cause of stress experienced by the members of my participants was the difficulty of the content of material in their nursing programs. During the coding each of the transcripts, the term "complex/challenging material" kept emerging. Each of the eight men interviewed stated that they found the medical surgical content difficult and overwhelming. One of the participants stated:

There was so much material to learn. I struggled with understanding the concepts presented in class. The cardiac lectures were the most stress for me as I remember. I found that trying to understand all the specific cardiac dysrhythmias very overwhelming. I never thought I would pass the med/surg course!

The examinations were also found to be a common source of stress. One of the participants stated that "taking the tests was so stressful. They count for a large percentage of your grade. I was always worried about failing out."

Fear of the unknown was another term which emerged related to stress in the coding of the transcripts. Three of the participants expressed fear of what would be asked on the examinations, while four members of the group stated that they feared what they would be expected to do in clinical. Participant five stated he felt like he was "walking on eggshells" while in clinical. He stated:

I was always afraid I would make a mistake when caring for my patient. I always felt like I never knew when my instructor would walk in my patient's room and ask me something that I could not answer. I always felt like I was 'walking on eggshells' when I was in clinical. It was very stressful for me."

Time Commitment

Another common theme which emerged from the data analysis was the concept of time commitment. All eight members of the study expressed that the time commitment required for success in their nursing programs contributed to their perception of stress. Everyone in the study stated that it was difficult to find a balance between time for family, friends and studying. Participant one for example, stated that he found the time required to complete the nursing care plans and study for exams took a great deal of time.

I always felt like I had to give up on going somewhere with my family or friends because I had to study for a test or prepare for clinical. It was hard missing out on parties or gatherings with family.

Participant three stated that he had to "study for many hours every day." Participant six stated that "no sleep and many long hours studying" was very difficult. Participant eight stated that he often felt guilty if he took time away from studying to spend with family or friends.

Loss

A surprising theme which arose was the concept of loss. Seven of the eight members of the study stated that they had experienced loss during their time as nursing students. Five of the participants discussed having a relationship fail during their time as students. Four of the members of the study shared that they ended their relationship with their girlfriends because they had to devote time to their studies. One of the participants stated: "my significant other and I broke up because he felt neglected. We constantly argued because he wanted me to spend time with him when I had to study. It got very tense. I had to put my studies first, and he could not understand that."

Participants one and two discussed while they were in their nursing programs, they lost some friends rather than significant others due to not being able to spend time with them. Participant one stated: "I remember in my second year of the program; I had an argument with one of my friends once because I had to back out of going to a party because I had an exam the next day. It turned out to be a pretty big fight, and we really have not spoken much since." All the members of the study shared that while the losses they experienced were difficult and contributed to their stress while in school, their priorities at the time was their education.

Self-Care

The fourth emergent theme as a result of this study being conducted was the concept of self-care. All the participants discussed the importance of self-care while they were in their nursing programs to help manage their stress. Each member of the study shared that such activities as taking walks, running, and finding some time for exercising was important to them. Participant three for example stated "I usually went for a run each morning before I left for school. It really helped me get focused for what I had to do for the day." Seven of the participants discussed that having supportive families contributed to their concept of self-care. Participant number eight shared that spending some quiet time alone in meditation helped him manage his stress. "I practiced mindfulness and meditation every evening before going to bed. It really helped me to relax so I could get to sleep." Participant number six also discussed how meditation and, listening to classical music helped him to relax and stay focused on his studies.

Every member of the study also reflected on how the support of fellow classmates helped them to be successful. Participant two stated "If it were not for my fellow classmates, I do not know if I would have made it through. We were a very cohesive group. We all understood we were all going through this together." Four members of the study expressed that during the extremely stressful times of the program, for example approaching final exam time, at times they felt like quitting the program. They stated that if it were not for their classmates, they would have.

Positive Experience

The fifth theme which emerged from the analysis of the data collected for this study was positive experience. The last question during each of the interviews from the interview guide was if there was anything else, they would like to share about their experience in nursing school. All eight participants stated that reflecting on their time in nursing school, that despite the stress they experienced, it was a positive experience. Participant one for example, stated "While I was nervous during my rotations, clinical really helped me to apply what I was learning in class to my patients." Participant four stated "My clinical instructors were always very helpful and supportive of me." Participant seven stated "Nursing school was the hardest thing I have ever been through. But it really made me feel good about myself know that I was able to accomplish my goal of becoming a nurse. Graduating from nursing school was the proudest moment of my life." Participant two stated:

Looking back, it was a really good program. It really helped prepare us for the NCLEX exam. When I was in the program, it's kind of like, you can't see the forest through the trees. What I mean is I did not have a good appreciation for the program until I graduated. Now I can see that the way associate degree programs are structured, are to help us succeed.

Participant three stated that "going through nursing school while it was tough, I really feel that it helped prepare me and my classmates for the workforce and I am very

thankful for it." The rest of the participants who were interview for this study did not elaborate on their answers to this question other than to say that overall, nursing school was a good experience.

The five themes discussed in this section reflect the analysis of the data collected during each of the interviews in this study. The coding of the interview transcripts revealed lived experiences which were common to all eight members of the study. Data saturation was reached by the sixth interview; however, two more interviews were conducted to ensure that data saturation was reached. Each participant had similar experiences which contributed to their feelings of stress, issues with time commitment, feelings of loss, importance of self-care, and finally positive experience.

Summary

As stated in the introduction of chapter one, stress is a common phenomenon which everyone experiences at one time or another. Professional education can be a very stressful experience which often affects physical and mental health (Singh, & Kohli, 2015). College life, while exciting, often proves to be an extremely stressful time for students. Nursing students often experience stress related to several aspects of their academic and clinical coursework. Frequent sources of this stress may be attributed to such things as course assignments, projects, clinical experiences, fear of doing harm to patients, and balancing their academic work with family responsibility (Alzayyat & Al-Gamal, 2014).

The results of this study revealed that the common sources of stress experienced by nursing students in general as documented in the literature, are also experienced by male students. The research question which guided this study was what are the lived experiences and perceptions of stress of male nursing students related to nursing school? The instrument guide developed for this study allowed each of the participants to share their lived experiences and perceptions of stress related to nursing school. Five themes emerged, stress, time commitment, loss, self-care, and positive experience.

Common sources of stress included difficult content to learn, fear of the unknown related to clinical experiences, particularly during their pediatric rotations. Taking examinations and fear of failure were also causes of stress. Finding a balance between school, work and family were also common causes of stress. The theme of loss was common among the participants. Many experienced the loss of relationships due to having to devote time to their education. The concept of self-care was a common theme. Everyone interviewed expressed the importance of self-care practice, such as walking, exercising, or meditation, as being important to their success. Finally, positive experience was a common theme. Everyone interviewed felt that their nursing school journey was a positive experience which helped them improved their lives. Chapter five will discuss the interpretation of the findings, the limitations of the study, as well as the implications for future study. Implications for positive social change will also be discussed in chapter five. Chapter 5: Discussion, Conclusions, and Recommendations

Introduction

The purpose of this interpretive phenomenological study was to identify how male nursing students perceive stress and address a gap in the literature about the perceptions of stress related to nursing school for male students. With better knowledge of the stressors unique to male students, nurse educators can provide appropriate assistance and resources to this population, which can improve retention. Males entering the nursing profession has increased over the years; however, men still represent a small percentage of students entering the profession (Ierardi et al., 2010). Therefore, it is important for nursing programs to continue to recruit more male students and help them graduate.

Interviews with eight male nursing graduates were conducted to explore their experience with stress and nursing education. All were graduates (within 5 years) of the same associate degree community college. The findings of this study revealed that male students perceive complexity of course content, especially medical surgical and pediatric nursing, as stressful. Other sources of stress included balancing time commitments for study and family time. The need for devoting time for their studies that resulted in loss of personal relationships was also a source of stress. Finally, self-care practices such as exercise, meditation, and friend, family, and faculty support were important in helping to contribute to the success and overall positive experience of male students in nursing school. The result of this study helped to confirm the knowledge in the discipline related to the perception of stress experienced by nursing students. There are many studies found in the literature on the perception of stress experienced by students. Research has indicated that common sources of stress for nursing students include complex content and clinical experiences; course assignments, projects, clinical experiences, fear of hurting patients, and finding a balance between academic work and family responsibilities are causes of students' stress (Alzayyat & Al-Gamal, 2014). Final examinations are also common causes of stress due to the impact of the students' final grades (Gannon Tagher & Robinson, 2016). This was consistent with what my participants stated about their feelings regarding to the examinations in their nursing programs. The results of the study also helped to extend the body of knowledge specific to what male students deem stressful.

Chapter 5 will present the interpretation of the findings, the limitations of the study, and the implications for future study. Implications for positive social change will also be discussed in this chapter.

Interpretation and Findings

The purpose of this interpretive phenomenological study was to identify the lived male nursing students regarding stress. The research question that guided this study was "What are the lived experiences and perceptions of stress of male nursing students related to nursing school?" Six interview questions were developed to gather the data to answer the research question:

1. Tell me about your experience as a nursing student in your program.

- 2. What did you see as being the most stressful part about nursing school?
- Did you have any other responsibilities which you feel interfered with school? How did you handle your other responsibilities with school?
- 4. What was the most difficult thing about nursing school?
- 5. How did you manage your stress?
- 6. Is there anything else you would like to tell me?

Five common themes arose from the data analysis: stress, time commitment, loss, selfcare, and positive experience.

Stress

The results of this study contributed to the knowledge about causes of stress for nursing students. Research has indicated that course assignments, projects, clinical experiences, fear of hurting patients, and balance between academic work and family responsibilities are causes of students' stress (Alzayyat & Al-Gamal, 2014). The participants of this study perceived aspects such as complex course content, for example, in the medical surgical nursing course as a source of stress. The participants stated that cardiac and neurologic disorders were difficult to understand and learn, which increased stress.

The students also perceived clinical expectations of them by faculty as stressful. For example, seven of the participants stated that the faculty expected the students to be on time and well prepared for clinical with a detailed, completed care plan on their patients. Most the members of this study found that having to present their patient and the care they were expected to give to their patients to the instructor and peers in preconference stressful. Participant 3 stated, "I was always afraid I would say something incorrect in preconference when presenting my patient's care plan, or not be able to answer one of my instructor's questions in front of my classmates."

An unexpected finding of this study was the perception of stress related to male students in pediatrics. However, this was supported by literature suggesting that male students perceived their pediatric clinical rotations as stressful due to their feeling of lack of self-confidence in providing care to the pediatric patient (Touby, Muniswamy, Sabari, & Monteiro, 2019). The participants of the study also experienced fear during their pediatric course and clinical rotation from being unsure of how to provide care for these patients. Six of the eight participants stated that the growth and development content in the pediatrics course was stressful because learning the developmental theories and milestones was difficult because they did not have children. Additionally, the participants stated that because they did not have children, they felt unsure of how hold and handle babies and small children. Further, a common source of stress was calculating pediatric dosages as well as administrating medication to pediatric patients, supporting literature indicating that fear of making an error and causing patient harm is a source of stress for students and can even be a traumatic experience (Zieber & Williams, 2015). The participants of my study stated they were afraid to hurt their pediatric patients because of any mistakes they might make.

The results of this study also supported the evidence from the literature that test taking is a source of stress. The outcome of what students earn on course examinations often determines the success in the course and the program. For instance, Gibbons et al. (2009) found that nursing students frequently attributed examination time as a particularly stressful event. Final examinations are frequently viewed as high stakes testing by many students and is a common cause of stress (Gannon Tagher, & Robinson, 2016). The participants of this study validated that examinations caused them stress because of the effect they had on their final grades. The participants of this study did not feel like they were in competition with other students regarding their grades. Their stress was related to fear of dismissal from the program if they failed to maintain the minimum passing score of 77. Most of the participants stated their stress and anxiety did not subside until the end of each course once they realized they passed.

Time Commitment

Finding the balance between the demands of a nursing program and a personal life has been well documented in the literature as a source of stress for nursing students (Wolf et al., 2017). The results of this study also revealed that male students find the concept of time management a challenge for them. Long hours of studying and clinical preparation were perceived as stressful for the participants of the study. Five out of eight of the participants of the study stated they spent an average of 5 to 6 hours studying each night. On the evening before clinical, most of the participants stated they spent 6 to 8 hours working on their nursing care plans. Previous research has also suggested that male students felt they missed out on outside activities because of the time-consuming work related to academic and clinical work (Abushaikha et al., 2014).

Loss

Time commitment challenges led to an unexpected finding of the study: the concept of loss. Seven of the eight participants experienced either relationship failures or loss of friends due to the amount of time committed to their studies. Relationship loss can potentially negatively impact a student's success in the nursing program. Relationship breakups are especially distressing for young adults, which often results in these individuals seeking the advice of college counselors (Owenz & Fowers, 2019). The participants of my study did not disclose whether they went to counseling following their relationship breakups.

Self-Care

Self-care management is critical for student success in any educational program, especially in nursing programs. Nursing students who are not able to adequately manage their stress could experience negative consequences in their programs of study (Moscaritolo 2009). Appropriate measures to help alleviate stress such as exercise, meditation, having time to study and prepare for clinical, and family support have been documented in this study as positive outlets for stress release. All the participants discussed how measures such as exercising, meditation, and faculty and peer support were important stress relievers.

Positive Experience

According to the literature, if students feel supported while in their educational programs, this can contribute to their success. For example, faculty support may contribute to decreased stress, which may decrease temptation to turn to drugs and or

alcohol to cope (Boulton & O'Connell, 2017). The results of this study helped to validate that faculty and peer support are important for student success. The participants stated that their classmates were a big part of their success. Participant 3 stated, "I found my classmates, especially those in my clinical groups extremely supportive. Whenever one of us felt like quitting the rest of our group would help to motivate that person in order to prevent them from dropping out." Participate 8 expressed his gratitude toward the faculty he had:

My instructors were awesome. They had empathy for what we were going through. They were tough and expected us to be prepared, but they always were there to answer any question I had. Their feedback on care plans was very helpful and helped me to critically think.

Being supported by faculty and classmates contributed to the success of the participants of this study, which led to the positive experience for them in their educational programs.

Theoretical Framework

The theoretical framework for this study was Lazarus and Folkman's (1984) transactional model of stress, which helps examine how individuals perceive the significance of stressors and how they cope with them. Factors that can lead to a student's perception of stress include employment, balancing family commitments and academic requirements, and perceived lack of student support. Other factors leading to stress are related to student assignments, exams, and clinical projects. Participants in this study confirmed these factors as causes of stress. Further, according to the transactional model of stress by Lazarus and Folkman (1984), if students can successfully progress, they will better able to cope with the causes of stress, which will lead to academic and clinical success. If students can cope with their stress, they will be successful, otherwise they may experience negative effects on their academic and clinical success. The participants in this study discussed the importance of adequate stress management techniques such as exercise and meditation as well as faculty and fellow classmate support as important to their success.

Limitations of the Study

There were several limitations to this study. The first limitation was the change of the participant population. The original intent was to interview current students enrolled in associate degree nursing programs. However, due to the lack of response when recruiting the participants, the focus was changed to nursing graduates of associate degree programs within 5 years with IRB approval. Although the chosen population provided rich data, interviewing current students possibly could have provided data that is more reflective of what current students are experiencing.

Another limitation of the study was the degree level of the participants. Although the intent was to explore the lived experiences and the perception of stress experienced by male students in associate degree programs, the results are only reflective of male participants at this level of education. If this study were replicated to include male participants at other levels of nursing education, such as those enrolled in practical nurse education, baccalaureate or even graduate level, the results would help to expand the knowledge regarding the perception of stress experienced by male students at all levels of nursing education.

Another limitation to the study was there was not enough exploration into the concept of role strain with male students. Male nursing students tend to face greater role strain in nursing due to societal stereotypes related to male nursing students in obstetrics (Tzeng, Chen, Tu & Tsai 2009). The results of my study revealed that males often feel stressed during their pediatric rotations if they do not have children. The participants did not state that the stereotype of male nurses was a source of stress for them. However, more questions could have been asked during the interviews to explore the perception of role strain and stress related to obstetric clinical rotations.

Issues of Trustworthiness

Qualitative research is not subject to concerns about internal and external validity because unlike quantitative research, they do not focus on cause and effect (Houser, 2015). Rigor and truth must be maintained. For this dissertation, I conformed to the dimensions of trustworthiness. For example, regarding credibility, which Houser (2015) defines as the results of a study representing the realities of the participants as much as possible, the interview questions will lead to results which will be accurate representations of the realities of my participants. The interview questions I developed for this study allowed the participants the opportunity to share their experiences of what they perceived as stressful. Credibility was maintained by personally conducting all eight of the semi-structured interviews with my participants. The questions I selected for my interview guide allowed the participants the opportunity to share their lived experiences related to what they perceived as stressful.

Confirmability was maintained by being aware of my biases and trying to avoid them when conducting my interviews. For example, I did not offer any of my opinions regarding the questions or of their answers. I also did not share any of my own experiences of when I was a student and how I experienced stress. However, being a male registered nurse, while I did not discuss my own personal experiences, I could not help by reflect on my own perceptions of the stress I felt when I was a student. I feel this was a limitation to my study.

In addition, confirmability was maintained using journaling in the form of field notes taken during and after each interview session. This allowed me the opportunity to capture each participants' individual perception of their experience. In order to maintain the anonymity and confidentiality of the participants, the transcripts and my field notes are not included in this dissertation.

As stated in chapter three, regarding dependability and transferability, this study could be replicated in the future resulting in consistent findings. This will help to ensure dependability. This study could be transferred to situations with similar participants and settings. For example, it could involve working with current associate degree nursing students as originally planned, as well as with students in a baccalaureate nursing program.

Recommendations

In order to effectively conduct future studies related to the phenomenon of interest for this dissertation, implications for future study include an awareness regarding the theoretical framework used for this study. Before researchers can conduct this type of study, it is important that they have a clear understanding of the methodology used. A strength of this study was the alignment of the theoretical framework which was Lazarus and Folkman's Transactional Model of Stress. As stated in chapter one, this model examines not only how a person perceives the significance of a stressor or stressors, but also examines their coping resources, as well as how he or she copes with the stressor/stressors. Depending on how well the student can adapt, and cope with their stressors, will determine how successful the student will be in the program of study.

The previous research which has been conducted and documented in the literature has focused on the perception of stress related to nursing students in general. The results of this study have contributed to knowledge base regarding stress as it is perceived by male students in nursing programs. Recommendations for future research include replicating this study to include male students enrolled in other types of nursing programs such as practical nursing, baccalaureate and entry level masters' degree programs. Future studies could include both qualitative as well as quantitative research. These studies would contribute to the knowledge related to the perception of stress by providing even more rich data obtained from male students at all levels of education. Quantitative studies could also be conducted to compare the similarities and differences between male and female students related to their perception of stress. Another recommendation for future study would be to explore the stereotypes of the male nurse and the perceived role strain on this gender related to being in a predominantly female focus of nursing care such as pediatrics or obstetrical nursing. As stated in chapter one, society tends to stereotype male nurses which places role strain on this gender while they are in such rotations as obstetrics or pediatric nursing (Tzeng, Chen, Tu and Tsai, (2009). While this concept of role strain was not discussed by my participants, perhaps a more in-depth exploration of role strain due to the stereotypes of male nurses as well as a larger participant pool, the concept of role strain related to stereotypes as a stressor could be explored.

A final recommendation would be for nurse educators and nursing education leaders, to share the knowledge obtained from this study and implement appropriate resources needed by the male students enrolled in their nursing programs. Educators and college counselors need to provide the extra help for male students struggling with complex content, offering additional support in specialty clinical areas such as pediatrics. They need to encourage these students to seek the advice when needed to assist them with coping strategies related to test taking anxiety or the stress of relationship loss, this is critical for student success. Faculty need to be aware of, and help students realize that loss of friend, relationship or family time is often a normal part of the college experience. Hale, Ricotta, Freed, Christopher Smith, and Haung (2019) discuss how Maslow's Hierarchy of Needs is applicable to students' success. In Maslow's hierarchy the basic need for love and belonging is considered an essential need (Hale et al, 2019). Students need to move through this level successfully. It is also important for the staff in student services at colleges and universities to be aware of the result of studies such as this dissertation in order to provide appropriate interventions when needed.

In addition to nurse educators, it is also important for nursing leaders in clinical practice to be aware of the perception of stress experienced by male students, because some of these stressors may persist beyond graduation. For example, male nurses may be reluctant to work in specialty areas such as pediatrics or obstetrics due to either inexperience in these areas or continued role strain related to stereotypes. Future studies could also focus on the perception of stress perceived by male nurses in clinical practice. Nursing leaders in clinical practice need to be aware of the stressors specific to male staff members in order to implement appropriate resources to assist male nurses in the profession.

The results of these future studies would contribute to the knowledge for the profession regarding the perception of stress experienced by male students at all levels of nursing education as well as male nurses working in the discipline. This would help to better fill in the gap related to male student/nurse perception of stress.

Implications for Positive Social Change

As stated in the introduction in chapter one, Stress is a common phenomenon which everyone experiences at one time or another. Nursing students often experience stress related to several aspects of their academic and clinical coursework. If students cannot effectively manage their stress, this can lead to negative outcomes leading up to withdrawing or dismissal from their educational programs. It is critical for faculty members to be aware of the factors which lead to stress of all students. Nursing faculty

need to help to improve student success and decrease attrition (Pruitt Walker, 2016). The findings of this study will also help to foster the mission of Walden University of creating positive social change. With a stronger understanding of how both genders perceive stress, faculty will be able to provide appropriate resources and guidance to both male and female students. This will help to create positive social change for the students by fostering student success and retention. Better stress management leads to student retention and success in the program. Assisting more students to complete their program of study and graduate will help them to have a more successful life thereby creating a positive social change for them and ultimately, their patients. Having more male nursing students successfully finishing their programs of study entering the profession not only brings more skilled and educated health care professionals to workforce in providing patient care, but also benefits the community. More males entering the profession will help to educate the community regarding the important contribution men make to the nursing profession. Being a primarily female dominated profession, male registered nurses can be seen as an asset to not only our health care organizations, but also the community. Male registered nurses can serve as role models for other men who might be considering pursuing nursing as a career. This will help to create positive social change for the nursing profession by increasing the representation of males entering the discipline of nursing.

Conclusion

There is a continuing need to bring new nurses into the profession. One of the potential barriers to this goal is the impact of stress related to nursing educational

programs which often leads to increasing attrition rates in nursing programs. While stress is a common phenomenon which impacts all students, it is important for nurse educators to have a clear understanding of the perception of stress that all nursing students experience. The goal of this dissertation research was to contribute to the knowledge base pertaining to how male students perceive stress. By having a clear understanding of the stressors which are common to males, educators will be better able provide the necessary resources to help ensure male students are successful in nursing school. As stated, this leads to positive social change by having highly qualified practitioners enter the profession of nursing. Finally, having more male nurses entering the profession helps to align agencies more consistently with their community of patients/clients.

Finally, in reflecting on what was what I have learned and how I am different from undertaking this study, I now have a much clearer understanding of what male students perceive as stressful events in their nursing education. This study has given me a better perspective on how important it is for faculty to be able to recognize the stressors effecting male students in order to assist with appropriate resources. For example, I am now more acutely aware that the loss of a relationship, or friend, or loss of being part of the family unit while in nursing school can be just as difficult for a male student. I also now have a better appreciation for the stressors related to male students in specialty clinical rotations such as pediatrics. As a nurse educator, I will use the knowledge obtained from this study and help to implement appropriate resources for my male students. This will help to promote successful outcomes for these students.

References

- Abalos, E. E., Rivera, R. Y., Locsin, R. C., & Schoenhofer, S.O. (2016). Husserlian phenomenology and Colaizzi's method of data analysis: Exemplar in qualitative nursing inquiry using nursing as caring theory. *International Journal for Human Caring, 20*(1), 19-23. http://dx.doi.org.ezp.waldenulibrary.org/10.20467/1091-5710-20.1.19
- Abushaikha, L., Mahadeen, A., Abdelkader, R., & Nabolsi, M. (2014). Academic challenges and positive aspects: Perceptions of male nursing students. *International Nursing Review*, 61(2), 263-269. https://doi.org/10.1111/inr.12098
- Alsaqri, S. (2017). Stressors and coping strategies of the Saudi nursing students in the clinical training: A cross-sectional study. *Education Research International*, 1-8. http://doi.org/101155/207/4018470
- Alzayyat, A., & AL-Gamal, E. (2014) A review of the literature regarding stress among nursing students during their clinical education. *International Nursing Review*, 61, 406-415. http://doi:10.111/inr.12114
- Anthony, M., & Yastik, J. (2011). Nursing students' experiences with incivility in clinical education. *Journal of Nursing Education*, 15(3), 140-144. http://doi:10.3928/01484834-20110131-04
- Bergin, M. (2011). NVivo 8 and consistency in data analysis: reflecting on the use of a qualitative data analysis program. *Nurse Researcher*, 18(3), 6-12. https://doi.org/10.7748/nr2011.04.18.3.6.c8457

- Boulton, M., & O'Connell, K. (2017). Nursing students' perceived faculty support, stress and substance misuse. *Journal of Nursing Education*, 56(7), 404-411. http://doi:10.3928/01484834-20170619-04
- Bright, M. A., & O'Connor, D. P. (2007). Qualitative data analysis: Comparison between traditional and computerized text analysis. *The Osprey Journal of Ideas and Inquiry*, Paper 21. Retrieved from http://digitalcommons.unf.edu/ojii_volumes/21
- Burnard, P., Binti, H. T., Rahim, H. A., Hayes, D., & Edwards, D. (2007). A descriptive study of Bruneian student nurses' perception of stress. *Nurse Education Today*, 27, 808-818. http://doi:10.1016/j.nedt.2006.11.002
- Freeburn, B., & Sinclair, M. (2009). Mental health nursing students' experience of stress: burdened by a heavy load. *Journal of Psychiatric Mental Health Nursing*, 16, 335-342. https://doi.org/10.1111/j.1365-2850.2008.01376.x
- Gannon Tagher, C., & Robinson, E. M. (2016). Critical aspects of stress in a high-stakes testing environment: A phenomenological approach. *Journal of Nursing Education*, 55(3), 160-163. http://doi:10.3928/01484834-20160216-07
- Gibbons, C., Dempster, M., & Moutray, M. (2009). Surveying nursing students on their source of stress: A validation study. *Nurse Education Today*, 29, 867-872. http://doi:10.101016/j.nedt.2009.04.008
- Goodnite, P. M. (2013). Stress: A concept analysis. *Nursing Forum*, 49(1), 71-74. https://doi.org/10.1111/nuf.12044

Grove, S. K., Burns, N., & Gray, J. R. (2013). The practice of nursing research appraisal, synthesis, and generation of evidence (7th ed.). St. Louis, MO: Elsevier Saunders.

Hale, A. J., Ricotta, D. N., Freed, J., Smith, C. C., & Haung, G. C. (2019). Adapting Maslow's hierarchy of needs as a Framework for resident wellness. *Teaching and Learning in Medicine*, 31(1),109-118. https://doi.org/10.1080/10401334.2018.1456928

- Harris, R. C., Rosenberg, L., & Grace O'Rourke, M. E. (2014). Addressing the challenges of nursing student attrition. *Journal of Nursing Education*, 53(1), 31-37. http://doi:10.3928/01484834-20131218-03
- Hodges, E. A., Johnson Rowsey, P., Fowler Gray, T., Kneipp, S. M., Woods Giscombe,
 C., Foster, B. B., . . . Kowlowitz, V. (2017). Bridging the gender divide:
 Facilitating the educational path for men in nursing. *Journal of Nursing Education*, 56(5), 295-298. http://doi:10.3928/01484834-20170421-08
- Houser, J. (2015). *Nursing research: Reading, using, and creating evidence* (3rd ed.). Burlington, MA: Jones & Bartlett Learning.
- Ierardi, J. A., Fitzgerald, D. A., & Holland, D. T. (2010). Exploring male students' educational experiences in an associate degree nursing program. *Journal of Nursing Education*, 49(4), 215-218. http:// doi:10.3928/01484834-20091217-04
- Junious, D. L., Malecha, A., Tart, K., & Young, A. (2010). Stress and perceived faculty support among foreign-born baccalaureate nursing students. *Journal of Nursing Education*, 49(5), 261-270. http://doi:10.3928/01484834-20100217-02

- Lazarus, R. S., & Folkman, S. (1984). *Stress, appraisal, and coping*. New York, NY: Springer.
- McEwen, M., & Willis, E. M. (2014). *Theoretical basis for nursing* (4th ed.). Philadelphia, PA: Lippincott Williams & Wilkins.
- Michael, C. (2017). Effect of yoga nidra on stress among nursing students in selected colleges of nursing. Asian Journal of Nursing Education and Research, 7(3), 429-440. http://doi:10.5958/2349-2996.2017.00085.4
- Mirzaei, T., Oskouie, F., & Rafii, F. (2012). Nursing students' time management, reducing stress and gaining satisfaction: A grounded theory study. *Nursing and Health Sciences*, 14, 46-51. http://doi:10.1111/j.1442-2018.2011.00661.x

Merriam-Webster's collegiate dictionary. (2005). Springfield, MA: Author.

- Moscaritolo, L. M. (2009). Interventional strategies to decrease nursing student anxiety in the clinical learning environment. *Journal of Nursing Education*, 48(1), 17-23. https://doi.org/10.3928/01484834-20090101-08
- Owenz, M., & Fowers, B. J. (2019). Perceived post-traumatic growth may not reflect actual positive change: A short-term prospective study of relationship dissolution. *Journal of Social and Personal Relationships*, *36*(10), 3098-3116. http://doi:10.1177/0265407518811662
- Patton, M. Q. (2015). *Qualitative research & evaluation methods: Integrating theory and practice* (4th ed.). Thousand Oaks, CA: Sage.

- Pierceall, E. A., & Keim, M. C. (2007). Stress and coping strategies among community college students. *Community College Journal of Research and Practice*, *31*, 703-712. http://doi:10.1080/10668920600866579
- Patterson, B. J., & Morin, K. H. (2002). Perceptions of the maternal-child clinical rotation: The male student nurse experience. *Journal of Nursing Education*, 41(6), 266-272. https://doi.org/10.1097/01.nmc.0000357929.23174.b2
- Pruitt Walker, L. (2016). A bridge to success: A nursing student success strategies improvement course. *Journal of Nursing Education*, 55(8), 450-453. https://doi.org/10.3928/01484834-20160715-05
- Ravitch, S. M., & Carl, N. M. (2016). *Qualitative research: Bridging the conceptual, theoretical, and methodological.* Los Angeles, CA: Sage.
- Reeve, K. L., Shumaker, C. J., Yearwood., E. L., Crowell, N. A., & Riley, J. B. (2013). Perceived stress and social support in undergraduate nursing students' educational experiences. *Nurse Education Today*, *33*, 419-424. http://dx.doi.org/10.1016/j.nedt.2012.11.009
- Reiners, G. M. (2012). Understanding the differences between Husserl's (descriptive) and Heidegger's (Interpretive) phenomenological research. *Journal of Nursing & Care*, 1(5), 1-3. http://doi.org/10.4172/2167-1168.1000119
- Shindi, M. B., & Hiremath, P. (2014). Stressors, level of stress and coping mechanism adopted by undergraduate nursing students. *International Journal of Nursing Education*, 6(2), 231-236. http://doi:10.5958/0974-9357.2014.00640.0

- Shudifat, R., & Al-Husban, R. Y. (2014). Perceived sources of stress among first-year nursing students in Jordan. *Journal of Psychosocial Nursing*, 53(6), 37-43. https://doi.org/10.3928/02793695-20150522-01
- Singh, N., & Koli, C. (2015). Stress reactions and coping strategies among nursing students in Deli. Asian Journal of Nursing Education and Research, 5(2), 274-278. http://doi:10.5958/2349-2996.2015.00054.3
- Suresh, P., Matthews, & Coyne, I. (2012). Stress and stressors in the clinical environment: A comparative study of fourth-year student nurses and newly qualified nurses in Ireland. *Journal of Clinical Nursing*, 22, 770-779. http://doi1111/j.1365-2702.2012.04145.x
- Tharania, A., Husainb, Y., & Warwick, I. (2017). Learning environment and emotional well-being: a qualitative study of undergraduate nursing students. *Nurse Education Today*, 59, 82-87. http://dx.doi.org/10.1016/j.nedt.2017.09.008
- Timmins, F., Corroon, A, M., Byrne, G., & Mooney, B. (2011). The challenge of contemporary nurse education programs. Perceived stressors of nursing students: Mental health and related lifestyle issues. *Journal of Psychiatric Mental Health Nursing*, *18*, 755-766. http://doi: 10.1111/j.1365-2850.2011.01780.x
- Tzeng, Y.L., Chen, J.Z., Hsiu-Chin, T., & Tsai, T.W. (2009). Role strain of different gender nursing students in obstetrics practice: A comparative study. Journal of Nursing Research, 17(1), 1-9. https://doi.org/10.1097/jnr.0b013e3181999b85

- U.S. Census Bureau. (2013). *Male nurses becoming more commonplace, census bureau reports*. Retrieved from: http://www.census.gov/newsroom/press-release/2013/cb13-32.html
- Walker L.O. & Avant K.C. (2011). Strategies for Theory Construction in Nursing, (5th ed.). Pearson Education, New Jersey.
- Wallace, L., Bourke, M.P., Tormoehlen, L.J., & Poe-Greskamp, V. (2015). Perceptions of clinical stress in baccalaureate nursing students. *International Journal of Nursing* Scholarship, 12(1), 1-8. http://doi:10.1515/jnes-2014-0056
- Weitzel, M.L., & McCahon, C.P. (2008). Stressors and supports for baccalaureate nursing students completing an accelerated program. *Journal of Professional Nursing*, 24(2), 85-89. http:// doi: 10.1016/j.profnurs.2007.06.017
- Wolf, L., Warner Stidham, A., & Ross, R. (2015). Predictors of stress and coping strategies of US accelerated vs. generic baccalaureate nursing students: An embedded mixed methods study. *Nurse Education Today*, 35, 201-205. http:// dx.doi.org/10.1016/j.nedt.2014.07.005
- Yates, J., & Leggett, T. (2016). Qualitative research: An introduction. *Radiologic Technology*, 88(2), 225-230. Retrieved from: http://www.radiologictechnology.org/content/88/2/225.extract

Zhang, Y., Cherniak, M., & Hallett, K. (2017). Relationship issues among college nursing students: Associations with stress, coping, sleep, and mental disorders. *Teaching and Learning in Nursing*, 12, 246-252. http://dx.doi.org/10.1016/j.telin.2017.06.005 Zieber, M.P, & Williams, B. (2015). The experience of nursing students who make mistakes in clinical. *International Journal of Nursing Education Scholarship*, 12(1), 65-73. http://doi10.1515/ijnes-2014-0070

Appendix: Interview Guide

- 1. Tell me about your experience as a nursing student in your program?
- 2. What did you see as being the most stressful part of nursing school?
- 3. Did you have other responsibilities which you feel interfered with school? How did you handle your other responsibilities with school?
- 4. What was the most difficult thing about nursing school?
- 5. How do you manage your stress?
- 6. Is there anything else you would like to tell me?