A Dissertation

entitled

Perceptions of Becoming a Nurse from the ESL Perspective:

a Phenomenological Study

by

Carol Bryan

Submitted to the Graduate Faculty as partial fulfillment of the requirements for the

Doctor of Philosophy Degree in Foundations of Education: Educational Psychology

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August 2017

An Abstract of

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Understanding the lived experiences of English as a Second Language (ESL) novice

nurses can help people who work with students in this population find ways to support

their success and reach their goals. This author had three goals for doing this study. They

were: 1) to gain insight about the lived experiences of novice nurses who have English as

a second language and thereby increase the understanding about their experiences as

nursing students, 2) to explore ways to use this new knowledge to help ESL nursing

students succeed, and 3) to use this new knowledge to improve nurse to nurse, nurse to

patient, and faculty to student interactions supporting the overall good of health care and

patient welfare. Contributing to the success of these students is one way the American

educational system can address the needs of an ever changing and increasingly diverse

U.S. population. Nurses are needed who can effectively communicate with, understand,

and meet the needs of a diverse patient population whose primary language is not

English.

In this study, the researcher collected written reflections about the lived

experiences of ESL novice nurses. Questions focused on what they believed contributed

to their successes as well as stimulated them to share insight about what it was like to

complete nursing school, pass the NCLEX-RN, and begin careers in nursing when their

primary language was not English. This study is one of the first to explore ways to help

this population by reaching out to members of this group for answers and directions about

ways to support their success.

I would like to dedicate this study to my husband, Marion Bryan, who faithfully

supported all my efforts and always believed in me. He unfortunately passed away

suddenly December 17, 2016 and could not be here to see me complete my dissertation.

May I continue to show kindness and support for at-risk groups and underdogs in this

world, seek ways to support their successes and advances, and live as an example of his

positive and hopeful spirit.

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Thank you all so very much, and thank you to everyone else who ever gave me any bit of support or encouragement that I could do this.

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Chapter 1

Introduction

The first chapter of this document includes background information about this topic, my statement of the problem, the purpose of the study, the research questions that guided this study, my proposed methodology, and discussion of my participants' selection, my instrument, data collection, and data analysis.

In my 27 years as a registered nurse (RN) caring for acutely ill adult patients and 12 years teaching associate-degree and baccalaureate-degree nursing students, I can honestly say that I have seen many nursing students and novice nurses struggling both at the bedside working with patients and in the classroom attempting to master new content. There is a need for effective resources to help students and novice nurses succeed.

My decision to become a nurse was made from a deep-seated recognition of the need for caring in this world. The sacrificing of self for another on a daily basis represents acts of kindness and caring performed in circumstances of sickness, wellness, the unknown, at the beginning of life, through life's journey, and at death. The risk of failure for RNs can be found around every corner, and for some individuals, enhanced risks abound.

Individuals who have decided to pursue nursing as a career first and foremost must have the capacity to care for and empathize with the sick, the sad, and the unlovable. These individuals also must demonstrate a high level of academic proficiency. Being accepted into nursing schools is a highly competitive endeavor, largely due to a limited number of student openings along with a documented shortage of nurse educators. Therefore, the individuals who are in nursing programs have a strong motivation to become nurses. Their individualized journeys are then influenced by the social, financial, and educational circumstances in which they find themselves.

I became a nurse educator because I wanted to contribute to the continuation of the nursing profession. Effective nurse educators have a large role to play in influencing the success rates of all nursing students, especially students at risk for failure. What can nurse educators do, and how can they be most effective? What types of nursing education activities are most helpful? How can nurse educators decide which educational practices are most effective? These questions became more and more important to me in my development as a nurse educator.

Looking at the numbers of students who have gained entry into nursing programs compared to the numbers of students who graduate and pass the National Council of Licensure Examination for Registered Nurses (NCLEX-RN), it can be seen that many nursing students do not succeed for a variety of reasons. Changes in healthcare driven by advancements in the sciences and advancements in medicine, as well as an increasing emphasis on patient safety, have led to higher standards and increasing difficulty of questions on the NCLEX-RN, which have impacted student success rates (Carrick, 2011). Gilchrist and Rector (2015) in their discussion about strategies for attracting and retaining

diverse students to nursing programs identified several groups of students as being at risk

for failure. They identified at-risk students as those who are culturally diverse,

educationally disadvantaged or first in their family to attend college, male students, and

those who speak English as a second language (ESL). These also include some minorities

and non-traditional students.

ESL nursing students enter nursing programs having met the same criteria as

native English-speaking students, and in addition, these ESL nursing students must

overcome language barriers and often cultural differences in order to succeed. In the

population of nursing students, ESL students stand out as hard working and bright, but

they also carry added burdens as they seek to learn, grow, and succeed in nursing school

and in the nursing profession. Sanner and Wilson (2008) in their article discussing

experiences of ESL students in baccalaureate nursing programs found that approximately

25% of all college students in the U.S. came from non-European American ethnic

backgrounds. Many of these students did not complete their programs of study for a

variety of reasons, and many of those who were in nursing programs experienced course

failures.

In a review of the literature on success in higher education, Choi (2005) noted that

limited research has been conducted exploring the experiences of ESL students,

particularly the experiences of ESL nursing students. Sanner and Wilson (2008) designed

a qualitative study focusing on a nursing program in the southeastern United States. The

purpose of their study was to explore students' experiences in response to the concerns of

nursing faculty members about ESL students' ability to "write, comprehend didactic

information, and communicate verbally" (p. 808). Their work supported findings that

ESL students struggle with the English language, including reading comprehension, speech, and grammar. Sanner and Wilson's is one of the few studies conducted with an ESL population of nursing students, and this lack of research supports the need for studying the lived experiences of these successful graduates as a phenomenon. It further supports the idea that there is much to be learned about ways nurse educators can help ESL students succeed.

1.1 Diversity in Nursing

According to diversity estimates from a report published by the American Association of Colleges of Nursing (AACN, 2009), 66% of the US population is white, non-Hispanic. This same report also indicated that 89% of all RNs are white, non-Hispanic (AACN, 2009a; AACH, 2009b) and that only 16% of RN's are non-white. These statistics indicate that there is a larger percentage of nurses than patients in the white, non-Hispanic category. Traditionally, nursing students have been thought of as white, non-Hispanic females who are native English speakers and who enter nursing school directly from high school. Because the diversity of the patient population has been increasing in the US, a case can be made for the need to increase the diversity of the nursing workforce.

Unfortunately, according to Hansen and Beaver (2012), ESL nursing students have lower licensure exam pass rates than do students whose primary language is English. These lower pass rates among ESL nursing students have contributed to a lower number of successful ethnic and linguistic minority nurses in the nursing workforce. These lower pass rates demonstrate a need for improving the success rates of ESL nursing students, which would increase the number of successful ESL nurses needed for

an increasingly diverse population in the U.S. (Carr & DeKemel-Ichikawa, 2012).

Particularly during times when it is critical to educate patients and to discharge patients

from the hospital, there is a need for understandable and meaningful communication

between nurses and patients. ESL nursing students may play an important role in bridging

that communication gap if the patient's native language is the same as the ESL student's

native language. If this is not the case, this situation suggests an even greater need to

improve the ability of ESL nursing graduates to clearly communicate, listen, and

understand the needs of their patients.

According to the U.S. Census Bureau, the current population of the U.S. is

approximately 315 million people. According to projections recently released, the U.S.

population is projected to cross the 400 million mark in 2051, 12 years later than

previously projected, and the U.S. population will hit 420.3 million a half century from

now in 2060. By then, whites will drop to 43% of the U.S. population. African Americans

will comprise 14.7%, up slightly from today. Hispanics, currently 17% of the population,

will more than double in absolute number, making up 31%, or nearly 1 in 3 residents,

according to the projections. Asians are expected to increase from 5% of the population

to 8%. Among children, the point at which minorities become the majority is expected to

arrive much sooner, by 2018 (Yen, 2013).

In another study, Olson (2012) reviewed the research literature by scouring

several nursing-related databases and locating articles published between 2002 and 2009.

Her purpose was to seek notable bridges that facilitated student success among ESL

nursing students as well as barriers and obstacles that inhibited student success among

ESL nursing students. Olson cited attrition rates as high as 85% among ESL nursing

students. She found that scores on the NCLEX-RN among ESL nursing students were 21% lower than those of native English speaking students. Likewise, Bosher and Bowles (2008) explored ways to assist ESL nursing students and found many cases in which ESL graduates scored up to 40% lower than native English speaking graduates on the NCLEX-RN.

1.2 A Systems Theory View of Students' Academic Success

According to the systems theory, "The whole is greater than the sum of its parts" (Carrick, 2011, p. 78). In other words, the success of students is often the result of a variety of factors, and the stories of successful ESL nursing students may contain very different ideas and attributions regarding the strategies and resources that helped them achieve their goals. Limited research has been conducted on this phenomenon. When a segment of the student population that traditionally has been at risk for failure demonstrates success, it is important to explore whether these students employed similar strategies and resources so that these strategies and resources can be identified and used to assist other at-risk students.

The educational systems implemented within nursing school programs represent part of the whole. In fact, many circumstances in ESL students' lives also play a role in their ultimate successes or failures. These circumstances may include their family support, socio-economic status, social support, cultural practices, prior educational experiences in the U.S. and others. In addition, faculty members and students have interrelationships that comprise parts of the overall educational system. In other words, no one individual component is responsible for students' successes or failures within an educational context; however, the educational system as a whole, when it is working

properly, provides students with the knowledge, tools, and motivation they need to succeed.

As one component within the educational system, faculty members have responsibilities to the students they teach, the institutions they serve, and the nursing profession in which they practice. More specifically, faculty members are responsible for supporting students in ways that help them succeed when students meet criteria for success. Faculty members must be willing to step in if students find it difficult to meet the criteria for success, and they must hold students back, if necessary, in order to protect the integrity of the nursing profession and the population of patients, who depend on nurses to care for them safely. If students are allowed to meet academic requirements without meeting rigorous, predetermined criteria, then the quality of the profession becomes compromised, and the integrity of the nursing profession is diminished. Additionally, students who are unable to meet academic criteria will most likely fail the NCLEX-RN, which across time detrimentally influences the nursing profession and may result in closure of nursing programs and/or colleges of nursing. Perhaps this systems theory approach could then shed some light on issues important for nurse educators and ESL students.

Faculty members play a variety of roles in the lives of students. In one study, Poorman et al. (2008) interviewed 30 nurse educators and asked them to reflect on their experiences working with academically at-risk nursing students and share any strategies they found to have been helpful or harmful related to the success of these students. A commonly expressed response was that faculty members described actions that were examples of attending to the needs of their students. Attending to the needs of their

students included spending time with them, paying attention to them, and demonstrating compassion and empathy for their situations and struggles. However, at times it was found that there was a disconnect between what faculty members were doing to help and what the at-risk students reported that they needed. Teachers in this study reported that they found it helpful to clearly share their expectations with students so there would be more realistic expectations of the actions to be performed.

According to Shelton (2003), in a study of the role of perceived faculty support and its relationship to student retention of 458 associate's degree nursing students, students who perceived that they had faculty support were found to be more successful. Shelton reported that there are two types of support. The first type of support is psychological support, which promotes a sense of self-esteem and competency among students. The second type of support is functional support, which involves helping students to complete tasks required to achieve educational success. In other words, students who perceive they have support from faculty members are more likely to succeed. However, when students are at risk for failure, such as ESL students, faculty members have the ability and the responsibility to advocate for these students. However, questions have been raised concerning the most appropriate course of action for faculty members to take. Collecting written responses from successful ESL graduates may help identify information that can help faculty members develop a more supportive and helpful role when working with ESL students.

1.3 Theoretical Frameworks

Two theoretical frameworks correlated well with this study and understanding the thought processes of successful ESL nurses. Examining what they believed led to their

successes could be understood in terms of Bandura's theory of self-efficacy and Rotter's theory of locus of control. By examining and evaluating the participant responses through the perspectives of these two theories, the researcher hoped to more fully understand what the successful ESL nurses believed helped them succeed.

1.3.1 Bandura's Theory of Self-efficacy and ESL Success

In brief, this theory states that individuals' beliefs about their abilities to accomplish goals and overcome obstacles are typically quite accurate. In other words, this theory focuses on the beliefs that individuals possess regarding their ability to successfully execute behaviors that lead to a particular goal or outcome (Bandura, 1977). In this study, the ESL nursing school graduates who participated have executed behaviors that have led them to be able to complete their course work successfully, graduate, and pass the NCLEX-RN.

Bandura's self-efficacy theory focuses on the confidence of an individual in his or her own abilities to complete tasks and overcome obstacles in pursuit of a domain-specific and context-specific goal. Self-efficacy is the degree to which people believe they possess the tools they need to succeed in a variety of settings and/or conditions (p. 193). In his later work, Bandura discussed the effects of the belief in one's own abilities and found that the presence of this belief improved the ability to function in four ways: cognitively, motivationally, affectively, and psychologically. His theory indicates that individuals with high self-efficacy have an increased likelihood of succeeding based on their beliefs in their own capabilities. Bandura further emphasized the importance of social learning and modeling in the process of increasing self-esteem. Bandura noted that educators should engage in activities to help develop high self-esteem in learners.

According to Jeffreys (2015), nursing students who had high self-efficacy viewed new tasks in a positive way and sought new opportunities for learning.

Bandura (1997) noted the reciprocal relationship between the individual and the environment that produces self-efficacy. When an individual can work successfully within the environment and the environment supports what the individual is doing, the likelihood for success is increased. The individual's supportive environment can include people, places and things that contribute to the individual's self-efficacy and likelihood for success.

One of the threats to self-efficacy is challenges in communication. In a study conducted at the University of Sydney, a medical school, by Crawford and Candlin (2013), 22% of the students in 2009 were identified as speaking a primary language other than English. These students experienced problems with English speech and reading comprehension as well as communicating with patients during clinical applications. These communication difficulties resulted in ESL students being classified as at-risk for failure compared with native English speaking students. The researchers concluded that engaged faculty members can have a positive influence on students who are at risk for failure.

ESL students from a variety of backgrounds enter nursing programs. Many do not have social support systems as a result of being miles away from families and friends, and they also may experience other social and environmental challenges that place them at risk for academic failure (Choi, 2005). Various supportive strategies have been made available to help ESL students succeed. Koch et al. (2011) discussed the educational needs of this group of students and suggested utilizing online learning support to provide

new pedagogical approaches. This was suggested in order to address ESL students'

language learning needs so that barriers could be removed and they could be placed on an

equal footing with native English speaking students. Koch et al. reported that the use of a

structured online resource, Computer-Assisted Learning to Improve Academic

performance for English as a Second Language Students (CALAIS), helped to increase

confidence and provided ESL students with opportunities to "engage in autonomous and

self-paced learning" (p. 378). Koch et al. further noted that this and other similar

resources improved students' self-efficacy and were found to improve ESL students'

likelihood of success. These findings aligned with Bandura's self-efficacy theory, which

supports the fact that student activities that promote independent learning are important

components in increasing students' likelihood of success.

In a study designed to examine the relationship between (a) nursing student's

perceptions of faculty support and (b) nursing student retention rates, Shelton (2003)

found that students who perceived psychological and functional support from faculty

members were more likely to succeed in nursing school. Psychological support included

activities that increased students' self-confidence, and functional support included

activities directly related to helping students succeed at accomplishing tasks.

Many higher learning institutions across the country have marshalled a variety of

resources aimed at meeting the needs of students. Some examples of these resources

include writing centers, career centers, and college success programs. Various resources

are available on campuses to assist students in areas in which they may need help so that

they can remain competitive, succeed in passing their course work, and meet their goals.

Tutors and peer mentors are often available as resources for students in college success

programs, providing students additional resources for help when questions arise about their college plans of study. Some universities, such as the University of Toledo, in Toledo, Ohio, have incorporated support for diversity as part of their mission and vision statements. According to the University of Toledo Mission Statement, support for diversity includes maintaining a diverse population of students, such as students with disabilities, non-traditional students, and students belonging to under-represented ethnic and/or minority groups and others ("UT Mission Statement 2015"). Clearly, college and university campuses are populated with a variety of at-risk student groups; however, this study was focused on ESL nursing graduates from a Bachelor of Science in Nursing (BSN) program. These diverse nursing students must be equipped to complete their programs of study, graduate, and successfully pass the NCLEX-RN.

Bosher and Bowles (2000), in their work studying the way test items are worded and how that wording could affect students' success rates, suggested that by linguistically modifying test questions, ESL students' scores could be improved. These researchers provided several examples, such as using short, simple sentences and using a question/answer format instead of a fill-in-the-blank format.

The following studies have noted faculty support as a key element in ESL students' success. Greenberg (2013) suggested that faculty must be able to recognize barriers to ESL student success and utilize effective strategies to help ESL students succeed and help them meet their goals. Hansen and Beaver (2012) in their studies of ways faculty can support ESL students and help them succeed noted that "cultural adaptation does not mean holding students to different standards" (p. 249). It is rather important to make sure that all students are able to demonstrate knowledge about safe

nursing practice. In Kossman's (2008) discussion in Bosher and Pharris's publication exploring the educational environment in which students are charged to work and succeed, faculty behaviors of nurse educators that were found to be most appealing to students were identified as being respectful, caring, and welcoming, and it was noted that faculty members should display these qualities to help ESL students meet their goals.

1.3.2 Rotter's Theory of Locus of Control and ESL Success

Rotter's (1966) Theory of Locus of Control develops the premise that people's actions may be motivated through either an internal or external locus of control. According to Rotter people whose actions are directed by an internal locus of control or intrinsic factors do things because they believe and have confidence that their own actions will lead to accomplishing their goals and that they are in control of their own destinies. People whose actions are directed by an external locus of control or extrinsic factors believe that external factors determine their outcomes and their ultimate success or failure. Discovering whether individuals have either an internal or external locus of control helps to clarify what motivates them to succeed.

Examples of situations with internal locus of control include seeking a path to success due to having a desire to enter a helping profession for personal values of wanting to help others, having pride in oneself and one's accomplishments without external pressure or expectations, or finding fulfillment in setting and reaching personal goals for personal pride and enjoyment. Examples of situations of seeking a path to success with external locus of control include having the desire to please other family members, seeking the ability to financially support him or herself, or giving in to pressure to meet external benchmarks for achievement such as earning a particular grade point

average (GPA).   These factors whether they be intrinsic or extrinsic motivate the individual to succeed.

Exploring whether ESL students favored intrinsic or extrinsic motivation played a role in what factors they identified as most helpful in their paths to success. This along with their level of self-efficacy helped us to categorize what kinds of support could be most effective in helping this population of students. Looking at the participants' responses on their reflective journals with these things in mind helped to improve my understanding of what motivated them to work hard and succeed.

A study was done exploring the role of locus of control in peer relationships s of multi-ethnic early adolescents. Findings supported that the role of locus of control in peer relationships varied with participants' cultures and ethnic backgrounds. It was found that having an internal locus of control was more evident with European American adolescents, but less often noted as important to Asian, Hispanic, and African American students (Kang et al, 2015).

Another study looked into work stress and emotional exhaustion of nurses and what the relationship was with the nurse's locus of control.   There was found to be a negative relationship between internal locus of control and emotional exhaustion, but no relationship between internal locus of control and work stress. In other words nurses who had a high level of internal locus of control had a low level of emotional exhaustion during work stress. This study found that internal locus of control had a limited effect on the combination of work stress and emotional exhaustion. Suggestions were made to look into other variables with the hope of mediating the relationship between work stress and emotional exhaustion. (Gunusen et al, 2014).

Rotter (1966) discussed that rewards may impact an individual's success. Rotter writes that if an individual believes the reward has been given based on his/her own actions, the individual's response may be different and more internalized than if the individual believes the reward has been given based on actions outside of his/her control. A person's desire to work to succeed is based on whether their efforts may directly lead to the reward vs. the reward being given by chance or based on activities out of the participant's control.

Intrinsic or internal locus of control is paired with an individual's motivation to gain success through the person's own desire and efforts not related to external pressures, expectations or chance. On the other hand, extrinsic or external locus of control is paired with the individual's motivation to gain success because of external pressures, expectations or chance.

The ESL participants responded to the questions with varying levels of locus of control from internal to external. Their levels of locus of control impacted their written responses and provided one means for evaluating their reasons for wanting to succeed.

1.4 Statement of the Problem

Minimal research has been conducted comparing success levels of ESL students with different levels of comfort with the English language. Campbell (1996) in her article discussing faculty commitment to supporting retention of at-risk students noted that there is an under-representation of minority nurses in leadership positions and in the ranks of the nursing profession. Sutherland et al. (2007) in their discussion of ESL and other minorities being at risk for failure confirmed that the lack of minorities in nursing leadership positions affirms the fact that fewer minorities have been successful at

graduating and passing state board exams compared with members of the dominant

culture. In meeting the needs of patients who are different than themselves, nurses have

been challenged to meet patients' medical needs while still cooperating with patients and

valuing their cultural and diverse preferences—preferences with which nurses may or

may not be familiar. There is a general lack of consistency and evidence regarding the

most effective ways for faculty members to help this population of students.

1.5 Research Questions

The research questions for this study have been designed to help explore shared

elements in stories and responses to questions from successful ESL novice nurses about

the activities, strategies, and resources ESL nursing students say are most important. The

following research questions guided this study.

1.5.1 Research Question 1

What things do ESL novice nurses identify as most important and contributing to

their success, and how do they rate them in importance?

1.5.2 Research Question 2

How do ESL novice nurses describe their support systems; were there individuals

and/or groups that played a major role in their success?

1.5.3 Research Question 3

Do ESL novice nurses identify any educational services that effectively met their

learning needs and helped them succeed?

1.5.4 Research Question 4

What are the language factors that ESL novice nurses identify as being important?

1.5.5 Research Question 5

What are ESL novice nurses' impressions of faculty support?

1.6 Method

This study relies on a phenomenological design. According to Creswell (2005), phenomenological studies examine the lived experiences of individuals and seek to understand their perspectives—that is, how they describe the meaning of their experiences with a particular phenomenon. I used this qualitative phenomenological research design to explore the experiences, strategies, and resources that ESL graduates believed to have been most helpful in nursing school and contributed most to the passing of their NCLEX-RN. My interest in this subject was sparked by the statistical data that documented lower educational attainment rates for ESL students in the United States with little research of note seeking strategies to help improve the individual success rates of members of this population.

The focus of this study was on the lived experiences of successful ESL nursing graduates who have passed their NCLEX-RN. Identified graduates were asked to write out their responses privately at their convenience to written interview questions about their experiences as nursing students and share what they believed was most helpful to them in their paths to success. Few researchers have used this method to collect qualitative data. In a similar phenomenological study about the impressions of newly diagnosed women with breast cancer, participants were asked to journal their stories and individually share what they were going through. The researcher analyzed the journals of 43 women with the goal of examining the influence of self-expressive journaling on mood and outlook in the use in a cancer support group (Smith et al., 2005).

At the 9th Annual College of Nursing Research Day at UT one of the presenters shared information about her study: "The effects of home-based journaling on quality-of-life in women undergoing breast cancer treatment." Participants were asked to journal their thoughts and impressions of being diagnosed and treated for breast cancer. They were asked to journal their thoughts at specific intervals for a given number of days and then asked to submit their journaled entries for qualitative analysis. The researcher would use this information to help other cancer patients cope with their situations (Walsh, 2015).

This presentation gave me the idea of using a written interview format asking my participants to write out their answers as opposed to responding verbally to spoken interviews. This 1) provided a relaxed environment for ESL participants, 2) gave them a choice of time and place for writing out the responses to the questionnaires, 3) utilized the written method of answering questions that is known to be more desirable for ESL participants compared with the spoken word method (Carr & DeKemel-Ichikawa, 2012), and 4) provided me with written data for interpretation thereby skipping the step of transcribing tapes.

Ortlipp (2008) used the technique of reflective journaling to provide transparency in the writing up of her research findings in a study to determine how much individual influence was appropriate in the analysis of qualitative research results. Participants were asked to answer questions designed to allow them to share the experiences, strategies, and resources that they believed helped them succeed.

I then identified similarities (themes) within their stories and identified factors that helped them succeed. It was my hope as a researcher to provide a method of data

collection that would encourage participants to share details about their own experiences as well as provide the most non-threatening and relaxed setting in which they could share their thoughts meaningfully. In the spirit of this vision, I provided a series of questions with related sub-questions to self-identified ESL participants and asked them to write out their answers via electronic media and return them to me by email over a secure server within two weeks of opening the questionnaire.

1.6.1 Participants' Selection

All graduates from the UT/BGSU College of Nursing (CON) BSN consortium during the years of 2012, 2013, 2014, and 2015 were contacted and asked to self-identify as (a) having passed their NCLEX-RN and (b) having a native language other than English. The participants in this study consisted of a group of ESL novice registered nurses who successfully passed the NCLEX- RN. Upon meeting these criteria and agreeing to participate, they were prompted to open up the questionnaire asking them open ended questions about activities, strategies, and resources they found to be most helpful in contributing to their success (see Appendix A). They were asked to read over each question and journal their answers electronically.

Participants were informed that they would have one week to complete the questionnaires. They further were informed that that they could pause and resume the process of completing the questionnaire at their own convenience as many times as they liked, but when they hit the submit button, the questionnaire would be submitted to the researcher, and they would not be able to open it again. It was hoped that they would answer truthfully and provide the researcher with honest and accurate personal stories

about the activities, strategies, and resources that were most helpful to them in succeeding in their educational programs and passing their NCLEX-RN.

Four years of BSN graduates represented approximately 960 graduates, because the UT/BGSU CON BSN consortium graduates approximately 80 students three times a year. Thus, it was projected that there would be 10 or more students who would agree to participate.

1.6.2 Instrument

The questionnaire was created by formulating sub-questions related to each research question. The questionnaire items were designed to gain information from the participants about the activities, strategies, and resources they believed helped them the most to successfully complete their nursing programs and successfully pass the NCLEX-RN. Questions were organized beginning with broad and general questions about general resources they believed helped them. The questions gradually became more specific in an attempt to encourage participants to share their own stories and describe the individual experiences that led to their successes. Every effort was made not to direct the participants' responses in any particular direction, although the questionnaire items were organized from general to specific.

This researcher was introduced to this method of data collection at the 2015 College of Nursing Research Day, during which a research study was shared. In this study, a researcher gathered data from recovering breast cancer survivors by asking them to privately journal daily responses to topical questions about their recovery. The researcher was able to collect these stories in which their lived experiences were shared

allowing for the purposes of helping other cancer survivors remain hopeful and realize that their lives were not over. .

1.6.3 Data Collection

Graduates of the UT/BGSU CON BSN consortium from 2012, 2013, 2014, and 2015 were sent an invitation to participate in this study via their last known email addresses. They were asked to self-identify as having a native language other than English and having passed the NCLEX-RN. These potential participants received the invitation to participate, and upon accepting the invitation, they were given access to the questionnaire. There was only one invitation and sharing of the questionnaire. Once they opened the written interview questionnaire, they were given two weeks to complete and return their responses. They were informed that they could enter and exit the questionnaire as often as they wished, but when they clicked on the "submit" button they would no longer be able to add to their responses.

Questionnaires were distributed and reviewed through Qualtrics, a secure server. In this data collection platform, confidentiality of the participants' answers and personal information were protected and kept secure. All proper institutional review board (IRB) paperwork was completed and observed to protect the participants.

1.6.4 Data Analysis

Once the participants were allowed sufficient time to complete the questionnaire items, the data were gathered and reviewed. The responses from each participant were examined to identify similarities and themes representing common opinions and beliefs about activities, strategies, and resources that were most helpful to these novice nurses in completing their nursing programs and successfully passing the NCLEX-RN exam.

1.7 Purpose of the Study

ESL nursing students have not graduated from nursing programs and passed the NCLEX-RN at the same rate as native English-speaking nurses have due to a variety of reasons. With the rising need for increased diversity within the nursing profession in the U.S., it is logical that nurse educators should seek ways to improve the success rate of ESL nursing students. In this study, several ESL novice nurses' wrote out responses to my research questions, and sub-questions were reviewed to explore their impressions of activities, strategies, and resources that helped them to succeed. My goal was to search for similarities in their answers and identify what they believed helped them succeed.

The purpose of this qualitative study was to identify activities, strategies, and resources that were most effective in helping ESL students succeed as seen through the eyes of a small group of ESL graduates. Successful ESL novice nurses were specifically asked about activities, strategies, and resources they believed contributed the most to their successes.

It was my intention to explore the insights and experiences of successful ESL graduates who passed the NCLEX-RN to identify any common experiences, strategies, or resources that they believed helped them succeed. By examining the experiences of successful ESL novice nurses, I hoped to identify themes and similarities in their stories of success. Once these stories were reviewed and explored, my hope was that the findings would help guide the practice of nurse educators in becoming more effective in working with ESL students or students who were non-native English speakers.

Students who pursue an academic major in nursing typically have completed two years of college, during which time they have passed all prerequisites and maintained a

minimum GPA of 3.5, which is the UT/BGSU CON BSN consortium's requirement for admission. These students must then apply for (and be granted) admission into the nursing program to begin taking nursing classes their junior and senior college years. ESL students must overcome additional struggles with language barriers and often cultural barriers that threaten their success. Educational institutions should be sensitive to their needs and their concerns, because they represent risk factors for attrition. It has been my goal to identify ways to help these students succeed by asking successful ESL nursing graduates to share the activities, strategies, and resources that they believed most helped them to succeed.

1.8 Significance of the Study

According to Gilchrist and Rector (2007) in their article discussing affective strategies for attracting and retaining diverse nursing students, it is important to encourage ethnically diverse men and women to enter the field of nursing to better serve an ever-changing and more diverse patient population in the US. However, communicating clearly, listening, and providing the required discharge instructions for patients is a challenge that can be difficult for ESL nursing students who struggle with the larger issue of language comprehension.

Cultural differences between healthcare workers and their patients may be best understood by looking at a few examples, such as a male novice nurse being asked to provide care for a Middle Eastern elderly woman whose cultural practices do not align with receiving care from caregivers of the opposite sex. Another example was shared with me by a fellow nurse who worked as an EKG technician in New York 40 years ago. At that time, she worked with an Orthodox Jewish man who could not be touched or have

skin contact from female caregivers. Another example might be a novice nurse trying to

discuss the plan of care for a female migrant mother who must return to the fields upon

discharge due to her family responsibilities, which may impact her ability to follow

discharge instructions.

Part of the responsibility of educational institutions and faculty members in

contributing to students' successes includes identifying students who are at risk for

failure and doing everything they can to help them meet their needs and reach their goals

(Harris et al., 2014). To this end, Jeffreys' (2015) nursing universal retention and success

(NURS) model emphasizes the idea that many factors contribute to nurses' overall

success. These factors include:

> Student profile characteristics, student affective factors, academic factors,
> environmental factors, academic outcomes, psychological outcomes, outside
> surrounding factors, and professional integration factors (p. 426).

Understanding the impact of these factors can help direct faculty members as they

seek to create effective teaching and learning strategies that may improve the success

rates of students, particularly those students who were identified as at-risk for failure such

as the ESL student population.

Chapter 2

Review of the Literature

In this section, selections from the research literature are presented to provide understanding about the importance of supporting diversity in nursing education both for the welfare of nurses and for the welfare of the increasingly diverse patient populations in the United States. The diverse cultural climate of North America presents a need for nurses who appreciate individual differences and who can provide culturally competent and culturally sensitive care. Jalili-Grenier and Chase (1997) investigated impressions of ESL students, as well as faculty members who taught ESL students. The researchers explored their perceptions of difficulties that ESL students experienced and their need for supportive programs. The results showed a significant difference between the perceptions of faculty members and those of ESL students. Areas of learning difficulties and language use, such as speaking English clearly and using specialized vocabulary, were rated by faculty members as significantly greater needs of ESL students than by ESL students. These differences in perceptions demonstrated a need for educational programs both for ESL students and faculty members.

Morton-Miller (2013) in her research on cultural competence among nurse educators suggested that nursing educators should embrace diversity and work towards

being culturally competent when working with diverse students. In a review of issues

pertaining to educating ESL nursing students, Choi (2005) shared six strategies that were

found to be helpful:

> (a) establishing trusting relationships with ESL students
> (b) seeking to understand students' cultural backgrounds
> (c) using different learning strategies in the classroom
> (d) carefully wording questions to make sure they were understood
> (e) having diverse faculty educators when possible
> (f) providing constructive feedback to ESL students, and
> (g) reviewing all materials to make sure they were culturally accurate and
appropriate.

It should be noted that nursing faculty members who valued their students

influenced their learning by modeling successful practices and providing support for ESL

students. Research with nursing students from diverse backgrounds has indicated that

faculty members who demonstrated enthusiasm, caring, knowledge, and the ability to

engage with learners have had a positive influence on their students' learning potential

(Williams & Calvillo, 2002).

Olson (2012) examined ESL nursing student success in her literary review and

highlighted facts according to the Sullivan Commission (2004) that diversity in

healthcare has become a national problem, because approximately 25% of the U.S.

population was comprised of minorities, while minorities comprised only "9% of nurses,

6% of physicians, and 5% of dentists" (p. 26). This overall discrepancy between the

diversity in the larger population and the diversity within healthcare professions has

validated the need for a more diverse body of nurses who could meet the needs of these

patients. Hospitals have recognized this increase in patient diversity, and many have

emphasized in their mission statements and vision statements the importance of valuing

diversity.

Klisch (2000), in her discussion about the increasing diversity of the U.S.

population, provided a rationale for improving the retention of ESL nursing students and

increasing the numbers of culturally diverse nurses. More specifically, Klisch noted two

ways that schools of nursing have reached out to address this need. They have (a)

increased the diversity in the curriculum in order to improve cultural competence among

nurses and (b) increased the number of diverse students in their programs in order to

increase the numbers of successful diverse and/or multicultural nurses. In her literature

review, Klisch reported six retention strategies that were found to be most effective at

meeting the goals of multicultural ESL nursing students:

> (a) providing support for students' financial, academic, social, and language
> enhancement
> (b) adapting teaching methods to recognize cultural differences and language
> challenges
> (c) reviewing and improving assessment and testing policies
> (d) providing faculty development to assure grounding in theory and cultural
> competence
> (e) including substantive cultural content and opportunities for application in
> curricula; and
> (f) providing institutional commitment and strategic management (p. 23).

Examples of these six strategies in Klisch's literary review included providing

ESL students with alternative settings for testing, allowing them to use a bilingual

dictionary if necessary, and reviewing test-taking strategies.

In an earlier article, Yoder (1996) explored ways faculty responded to and

interacted with students who were ethnically diverse. She identified five types of faculty

response patterns faculty members used with culturally diverse and ESL students:

> (a) generic
> (b) mainstreaming
> (c) being culturally non-tolerant
> (d) struggling to adapt, and
> (e) bridging.

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Yoder found some to be supportive while others interfered with student performance. In "generic" faculty responses, faculty members treated all students the same way and assumed all students' needs were the same. In "mainstreaming," faculty members recognized what students' needs were and expected ESL students (as well as other minority students) to adapt to the dominant culture. In situations involving "cultural non-tolerance," students' needs were not recognized, and in fact, faculty members created barriers that ESL students had to overcome to succeed. In situations described as "struggling," faculty members attempted to adapt their teaching strategies to meet the goals of ESL and minority students. Finally, in situations described as "bridging," faculty members recognized and valued ESL and other minority students, valued the diversity, and worked closely to meet all students' needs. Bridging has been found to be the best and most productive style of teaching, helping ESL students to meet their learning goals. Often, faculty members who used this style have undergone formal training in transcultural concepts, recognizing cultural competency, and supporting cultural competency.

The U.S. Census Bureau has reported that minorities comprised 36.6% of the U.S. population; in addition, minorities comprised a majority (50.4%) of the children in the U.S. under the age of one (U.S. Census Bureau, 2012). In fact, 55 million people spoke a language in the home other than English (U.S. Census Bureau, 2008).

2.1 A Need for Increased Diversity in Nursing

Across the U.S., healthcare has undergone a transformation. Patients have been discharged from acute-care hospital admissions with identified care needs. These discharged patients often have continued to require hands-on care as well as other types

of nursing care. These patients often have been charged to establish new medication regimes, perform wound care and or dressing changes, complete rehabilitation programs, and provide other healthcare functions. The community and home-care institutions have been challenged to meet the healthcare needs of recovering patients who have been discharged. The healthcare needs of discharged patients have often required a high level of knowledge and experience. New strategies for patient recovery and wellness have depended on the ability of discharged patients to follow carefully planned discharge activities.

Hansen and Beaver (2012), in their study of best practices for hospital discharges, discussed the importance of including nurses and other healthcare providers in discharge planning. Taking part in planning, educating, intervening, and evaluating patient success is within the scope of nursing and allowed for nurses to follow up after discharge if patients agreed to receive calls or visits to determine whether all discharge needs were met. Hospitals have followed the common practice of following up with patients after discharge to help decrease the number of readmissions for the same patient complaint.

Patients are noted to be culturally diverse, which generally reflects a diverse U.S. population. According to the U.S. Census Bureau (2010), diversity within the U.S. has increased substantially and is expected to continue. For example, this increase in diversity includes an increase in the Asian American population, which has grown from 10.2 million in 2000 to 14.7 million in 2010. This represents an increase of approximately 3% to 4% of the U.S. Asian American population. Growth rates among the Hispanic population also have increased from 2000 to 2010 by 43%. This is an increase from 35.3 million to 50 million Hispanics, who now comprise more than 16% of the overall U.S.

population. The majority of the U.S. Hispanic population speaks Spanish or comes from families who speak Spanish. The white, non-Hispanic population in the U.S. represents approximately 64% of the overall U.S. population, and this group is in the majority in several of the largest states in the country.

As expected, the diversity of the U.S. is reflected in the diversity of the patient population. This diversity highlights the importance of increasing and improving nurses' understanding of patient diversity in order to remain relevant in the provision of care to patients. Nurses historically have been a "middle-class, non-minority profession" (Kurz, 1993, p. 227). As the U.S. population has become more diverse, the population of nursing students also is expected to become more diverse. This increase in the need for the number of diverse nursing students highlights the need for educational institutions to address the needs of these at-risk students who have been recognized as experiencing difficulties completing their baccalaureate programs and passing the NCLEX-RN. Without an active strategy designed to identify and address areas of difficulty experienced by these students, there is no hope for increasing the numbers of diverse registered nurses who are needed in order to more effectively meet the needs of these patients. This corresponding diversity among the general population of patients and the population of nursing students plays a role in improving the health care provided to the U.S. patient population (Choi, 2005).

In a study conducted to identify factors interfering with nurses' ability to provide culturally competent patient care, nurses were interviewed and asked to identify barriers they perceived in the patient care setting. The responses were categorized into three themes: (a) tremendous diversity among patients; (b) lack of resources, such as

translators and written materials in Spanish and/or other locally spoken languages; and (c) prejudices and biases on the part of nurses and medical personnel (Hart & Mareno, 2013). Even though nurses are encouraged to provide an environment of support and empathy for others, nurses have been limited in their ability to provide consistent culturally competent care for their patients. These limitations again reinforce the need to increase diversity in the nursing workforce as an important way to provide culturally sensitive and culturally competent care.

This increase in the diversity among nursing students in the U.S. has presented a challenge to nurse educators in providing meaningful opportunities for students' learning experiences. Based on their study of planning effective teaching strategies for ESL nursing students, Hansen and Beaver (2012) concluded that faculty members must consider languages, cultures, and behaviors of ever-changing cohorts of diverse nursing students.

Hansen and Beaver (2012) suggested that newly graduating nurses might not have the cultural competence and understanding required to effectively care for the increasingly diverse patient population. They reported that more than 36% of the U.S. population has been classified as minorities. Likewise, the U.S. patient population has become more diverse, with 20% of the U.S. population speaking a language other than English in the home (Sullivan Commission, 2004).

With the goal of providing nurses to care for this increasingly diverse patient population, nursing education programs have a responsibility to meet the needs of an ever increasingly diverse student nurse population. Student nurses who speak English as a second language have been influenced by four factors that have interfered with their

academic success: language, learning models, test-taking comfort, and general differences among cultures. In order for new nurses to improve their care for diverse patients, they must develop strategies to improve in each of these areas.

In an older study, Memmer and Worth (1991) found that attrition rates among ESL students were higher than attrition rates among native English speaking students. Providing accurate written and understandable verbal communication is essential if nurses are to be effective, proficient, and safe. ESL students were found to have more difficulties communicating in the clinical setting than native English speaking students because of increased demands for interactive communication during report of the day's or night's events at change of shift, in the interpretation of doctors' orders, and during interactions with patients and healthcare personnel (Guhde, 2003).

Jalili-Grenier and Chase (1997) studied the relationship between faculty involvement and ESL student success and found that supportive learning activities used by faculty members working with ESL students played a positive role in ESL students' success in their classrooms. In addition, these authors found that improving communications between ESL students and faculty members helped to identify problems and strategies for addressing these problems, which increased the likelihood of ESL students' successes.

2.2 Diversity in Nursing Education

Diversity in nursing education can be achieved only if nursing educators are aware of and motivated to meet the needs of an increasingly diverse student nurse population. In an article about challenges experienced by community nurses in Norway when addressing the needs of minority patients in home-care situations, researchers found

that lack of experience and knowledge about the diverse patient population contributed to the inability of patients to carry out discharge care needed and achieve outcomes related to discharge planning (Debesay et al., 2014). This qualitative study explored therapeutic home-care interactions among 19 nurses in Norwegian home healthcare districts and patients who were largely immigrants. The researchers identified three situations that were particularly trying: (a) providing intimate care to people different than themselves, (b) teaching and monitoring patients going through post-stroke rehabilitation who had different opinions of what rehabilitation should look like, and (c) providing end-of-life care for patients and families with values and beliefs about the end of life that varied substantially from those of the nurses. Debesay et al emphasized the need for nurses to increase their appreciation for diversity, cultural understanding, and consideration of patients' healthcare needs after patients have been discharged. This is even more important in the U.S., which has greater diversity in its population than a relatively homogenous country such as Norway.

Cultural competence has been defined as "the process in which the healthcare provider continuously strives to achieve the ability to effectively work within the cultural context of a client, individual, family, or community" (Campinha-Bacote, 1999, p. 203). Other researchers have warned that educating nurses in cultural competence and culturally sensitive care may take educators out of their comfort zones as they seek to address issues that may challenge their beliefs and or personal values as cultures clash (Morton-Miller, 2013).

In an investigation into how cultural competency is developed in student nurses, Brown (2001) stated that three categories of competency are necessary for the effective

educator who values and engages students in cultural diversity in patient care: (a) communication, (b) diversity appreciation, and (c) learning. Increasing students' knowledge about and comfort in the provision of culturally sensitive care must include all three of these competencies. The ability of nurses simply to talk and listen to people who are culturally different was found to be insufficient. It was also equally important to develop an understanding and appreciation for the value of these differences. In addition, displaying an attitude of caring and compassion as nurses seek to meet the individualized needs of diverse patients, as well as showing interest in patients' cultures, all serve to bridge intercultural gaps and demonstrated to patients that nurses were truly interested in providing for their needs during their illness and/or period of recovery. These researchers further suggested that faculty members who expressed an appreciation for diversity as a norm within society likewise reflected the importance of improving patient outcomes and recovery potential through increasing their understanding of patient needs.

According to Hansen and Beaver (2012) there is a relationship between retention and the perceived support that ESL nursing students receive from faculty members. These authors recognized four areas of concern that directly influenced the success of students whose native language was not English: (a) language, (b) learning models, (c) test taking, and (d) cultural difference. To address language difficulties, these authors suggested using specific strategies to help ESL students improve their language skills, such as helping them with all four parts of language mastery: reading, listening, speaking, and writing. The authors suggested strategies such as the "pair-share" technique, in which one student is paired with another student and asked to share information in order to increase their comfort level first with one person, then with a small group, and then in

front of a large group. This was suggested to increase the students' ability to communicate comfortably and effectively in front of small groups and then large groups.

2.3 Faculty Roles and ESL Student Success

In general, a variety of services are available to at-risk students enrolled in nursing educational programs. For example, at-risk students who participated in a one-to-one peer tutoring study demonstrated reduced attrition rates (Higgins, 2004). In an earlier study of support provided to nursing students, Kurz (1993) noted that as demographics shift and the general population in the U.S. becomes more diverse, the student nurse population needs to also become more diverse and reflect the general population. Kurz further noted that there was a significant correlation between adapting to communication and cross-cultural adjustment. Examples reflecting this finding included exposing ESL students to situations in which meaningful communication was necessary. In these cases, the need to share and communicate with others provided the motivation and opportunity for these students to improve their language skills. Other methods used to increase these students' awareness and aptitude in communicating included using case studies, questionnaires, and simulations. These strategies helped to provide opportunities for students to improve the communication skills required in a clinical setting.

In addition to a variety of services available to at-risk nursing students, student tutors have been found to be effective in reducing attrition of ESL and native English speaking students who are at-risk based on low grades. Higgins (2004) conducted a study to determine whether there was a relationship between academic performance and retention among at-risk students enrolled in a medical-surgical nursing course. A group of students who participated in a peer-tutoring program was compared with a group of

students who did not participate in the program. The results indicated that with early intervention and identification of at-risk students who participated in a peer-tutoring program, attrition rates for this group of students were decreased. Higgins studied generally at-risk students but mentioned ESL students as one of the participating at-risk groups. She suggested that a tutor who spoke English as a second language may have knowledge of language-learning strategies that could help ESL students. She found that using peer tutoring with at-risk students can contribute to overall retention and success of at-risk nursing students in similar settings.

Flinn (2004) examined situations in which teachers and students were from different cultural backgrounds and suggested ways to improve intercultural communications. She identified the fact that although nursing students have become more diverse, nurses (including nurse educators) have consisted primarily of mostly white, middle-class women. She reported that when students and teachers are from the same culture, communication is easier and more understandable; however, when students and teachers are from different cultures, communication problems can arise. Flinn identified characteristics of individuals who have helped ESL students by providing understandable communication and helping them reach their goals. These characteristics included the following: (a) showing personal interest in ESL students; (b) being willing to work together with individuals to help them meet their goals; and (c) demonstrating care for individuals by striving to break through language barriers, reduce anxiety and fear, and improve cultural understanding. The results of this study reinforce the need for nurses who come from diverse backgrounds to be successful at passing the NCLEX-RN so they can pursue the career of nursing.

According to Hansen and Beaver (2012), students who receive attention and encouragement by faculty members who get to know them as individuals and make them feel comfortable experience a greater likelihood of success than students who do not receive personal attention. Some ESL nursing students have passed the NCLEX-RN exam without difficulty, but more often this population of students has experienced difficulty passing this exam.

Yoder (1996) conducted an earlier study to determine which processes were used by faculty members teaching ethnically diverse students Yoder organized a theory to explain the ways that faculty members communicate with students and how these ways of responding to students influence their success or failure. This was an explorative study that sought to identify issues and problems noted both by educators as well as by ethnically diverse minority students. Interview transcripts from both of these groups indicated effective communication consisted of three factors: (a) sending cues, (b) interpreting cues, and (c) acting and interacting. Cultural awareness and appreciation were noted to improve when individuals participated in sensitivity training activities. Educators and students both identified their own difficulties in being understood and discussed their attempts to reach out to improve the other's understanding. Yoder used a qualitative, grounded theory approach in analyzing the transcripts of interviews with 26 Californian nurse educators and 17 ethnic minority nurses representing three main population groups: Asian-Americans, Mexican-Americans, and African-Americans.

Yoder (1996) identified five ways faculty members interacted with ESL students in their learning environments: (a) generic, (b) culturally non-tolerant, (c) mainstreaming, (d) struggling, and (e) bridging. In the first three patterns, faculty members used the

method of *acculturation* to try to fit ESL students into the same learning situations as the traditional students. The fourth pattern, *struggling*, represented faculty members who had begun to understand some of the cultural challenges that ESL students had experienced. In the fifth pattern, *bridging*, faculty members encouraged ESL students to be themselves as they pursued their educational goals. Faculty members sought ways to adapt teaching strategies to meet the needs of the ESL students as well as valuing their diversity. This fifth pattern of interaction used by faculty members was identified as the most supportive of ESL students working toward success.

Olson (2012) reviewed several nursing-related databases to locate research studies conducted between 2002 and 2009 using the following search terms: "English as a Second Language (ESL)," "English Language Learners," "nursing students," "academic achievement," and "retention." Out of 87 articles located, 25 were used. Articles were eliminated if their focus was on graduate nursing education, accelerated nursing programs, and/or minority nursing students who were native speakers of the English language. The purpose of the inquiry was to seek information to improve the understanding of what was necessary for ESL students to succeed.

Olson conducted this literature review with the goal of identifying bridges and barriers in the processes of nurse educators as they responded to ESL students. Multiple articles were cited noting things that were helpful and detrimental to student success. Findings of her literary review were grouped into four categories including bridges and barriers related to; language, culture, academics, and personal qualities. Olson summarized that in order for nurse educators to effectively respond to ESL students' needs, they must be sensitive to ESL students' needs in each of these categories. Olson

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also suggested ways to improve nursing programs including: (a) identifying ESL students early who needed help; (b) providing language support programs that are thorough and inclusive of all forms of communication, including the spoken word and textbooks; and (c) increasing cultural understanding, appreciation, and empathy of faculty which increased students' likelihood of success.

Many faculty members have not been effective in supporting student success. When teaching and interacting with students struggling with understanding and learning new content in a language different from their native language, mistakes can be made by faculty members that interfere with student learning. Hanson and Beaver (2012) reported mistakes that faculty members make, such as assuming that students understand, speaking too fast, including unfamiliar words, or generally allowing their own personal feelings or biases to interfere with teaching and learning. The authors concluded that challenges exist for faculty members to find effective strategies to meet the needs of ESL students and increase the likelihood that ESL students will be successful in education and in nursing. They identified the four main areas of concern that have influenced the success of ESL students: (a) language, (b) learning models, (c) test-taking, and (d) overall cultural differences. Yoder (1996) studied nursing faculty interactions with ethnically diverse nursing students and identified five types of faculty responses that were used in addressing each of these areas of concern. These types of interactions were categorized as generic, mainstreaming, culturally non-tolerant, struggling, and bridging. The first four ways of responding were not supportive of these ethnically diverse students. The fifth and most supportive way of responding to these students was described as "bridging." In bridging, faculty members encouraged ESL students to be themselves as they pursued

their educational goals. Faculty looked for ways to adapt teaching strategies to meet these students' needs while also valuing their diversity. In each of these four areas of concern, faculty members were seen to be most effective when they sought to meet the students where they were in their individual journeys to succeed.

When faculty members used bridging, they valued ESL students for their individuality while at the same time helping them to meet the expectations required to succeed in their classes and in the nursing program. An example of bridging would be a faculty member who recognizes the value of having ESL students in class and share the ways ESL students may bring hope to patients whose native language is not English. Another example would be a faculty member who encourages international students to share their experiences trying to communicate with native English-speaking nursing students to help members of the dominant culture improve their understanding of other staff members, nurses, and patients who are not from this country and understand ways to communicate with people who are not like themselves.

Much of the research literature has indicated that the success of at-risk nursing students is associated with personal faculty mentoring. While not focused specifically on ESL students, McGann and Thompson (2008) conducted a descriptive study of 16 at-risk senior nursing students and examined the effect of their participation in a nursing course in which they participated in activities that included mentoring by faculty members, completing tutorials, journaling, and participating in other self-directed student activities. The GPA of these at-risk senior nursing students increased significantly from 2.48 to 2.92, and 87% of the group passed the NCLEX-RN successfully. This study suggests that

faculty mentoring can influence behavioral change and play an important role in the success of at-risk nursing students.

Other research has suggested that cultural values regarding domestic support outside of the classroom play a large role in students' success, such as the support of spouses and siblings. This could be the case if there were conflicts between practices within the native culture and practices within the culture in the learning environment. One example of this is a situation in which African culture and some Asian cultures consider it rude to display assertive communication in class or between students and faculty members whereas, the American culture encourages this assertiveness along with direct questioning of faculty members. Another factor affecting learning for students with differing cultural backgrounds relates to faculty members' ability to create an atmosphere of support and respect for students as individual learners. An earlier study similarly reported that students with culturally diverse backgrounds demonstrate better learning when faculty members cultivate a positive teaching-learning environment, encourage active learning, address each student's needs, recognize and value diversity, and make learning meaningful by offering different formats for learning (Williams & Calvillo, 2002).

Language and culture are very loosely related. One study of the relationships between language and culture suggested that there can be communication challenges if there are differences in cultural beliefs and values between those of students and those of the dominant culture (Jalili-Grenier & Chase, 1997). Cultural differences in communication, both verbally and nonverbally, were also identified as possible contributors to the learning challenges of at-risk ESL students as they encounter new

content inside and outside of the classroom (Pardue & Haas, 2003). An example that demonstrates the difficulty that may be experienced includes an ESL student who comes from a culture that believes making eye contact is rude. Examples of these cultures are some Asian cultures as well as some Native American cultures. Nursing students may have difficulty learning how to interact with patients in teaching situations in which direct eye contact is necessary. This is apparent in Sanner et al's (2002) study in which they noted that ESL students needed support in understanding language used in the classroom as well as language used in learning resources in order to be successful in reaching their goals. Carr and DeKemel-Ichikawa (2012) reported that this is particularly the case when ESL students are required to learn and study new material in a language different from their primary language.

At times, faculty members have been guilty of "unconscious incompetence" in dealing with culturally diverse students in that they sometimes believe all students should be treated the same way. This problematic strategy of communicating aligns with Yoder's (1996) identified faculty responses to students of either using the "generic response" or "mainstreaming." In the "generic response," faculty members assume ethnic students have needs that are no different than other students, and as a result, these faculty members treat everyone based on the same underlying values and assumptions. In "mainstreaming," faculty members identify the needs of ESL students but also expect them to adapt and conform to the dominant culture in order to learn. Yoder found that neither of these faculty responses is supportive of ESL student success.

With culturally diverse students, learning needs may extend to areas not covered in the traditional classroom, such as familiarity with the English language and

preferences for different learning strategies. This may also be the case with faculty members who demonstrate unconscious biases, such as trying to meet the needs of "those people" and hence stereotyping groups who may benefit from other resources that have not been explored or offered (Bednarz et al., 2010).

2.4 Admission, Graduation, and Licensure of Non-Dominant Groups in Nursing: ESL Student Nurses

ESL students applying for admission into nursing programs must meet the same prerequisite requirements as native English speaking students. However, because they do not speak English as a native language, they also have additional challenges they must successfully overcome in the admissions process and throughout their nursing education. The likelihood of graduating among this group of nursing students hinges on their retention in nursing school.

Klisch (2000) recognized the need for diversity in nursing as a response to the increase in diversification of the US population. She reviewed the literature to identify strategies to improve the retention and success of ESL nursing students. Klisch noted schools of nursing at that time had responded to the need for diversity in two primary ways. First, many schools made attempts to add diversity to the nursing curriculum by including cultural content, encouraging cultural appreciation, and the emphasizing the importance of providing culturally competent care. Secondly, she noted that the nursing workforce itself needed to become more diversified and recognized the need to recruit ethnically diverse nursing students. In order for these diverse students (and particularly ESL students) to succeed, Klisch also reviewed the literature to identify a series of

retention strategies to help culturally diverse nursing students make it through their nursing programs, graduate, and pass their NCLEX-RN.

Klisch organized success strategies for culturally diverse students (and particularly ESL students) into six categories:

> 1. Support for students, including financial aid as well as academic, social, and language enhancement.
> 2. Adaptation of teaching methods to recognize cultural differences and language challenges.
> 3. Assessment and testing policies.
> 4. Faculty development to assure grounding in theory and cultural competence.
> 5. Including in the curriculum substantive cultural content and opportunities for application.
> 6. Institutional commitment and strategic management (p. 23).

The purpose of these strategies is to address many possible barriers that can interfere with ESL students' progress through and eventual graduation from a nursing program. If these strategies were to be recognized and elaborated, the needs of individual students would be met, and these students would receive an equal opportunity for education and success, regardless of their language of origin.

Educators who have taken the time to introduce culturally diverse students and ESL students to these supportive resources have increased these students' chances for success. This leads to a discussion about the creation of a supportive environment for ESL students that includes orientation programs, mentoring programs, counseling services, involvement with students' families, workshops, and other resources that support ESL students (Memmer & Worth, 1991). All these academic factors contribute to ESL retention. As earlier researchers have shown, the importance of a supportive environment in fostering ESL student success continues to be apparent in the literature. For example, Jeffreys (2015) discussed the way educators who are interested and

engaged in helping the ESL students can make a difference in their overall performance and success.

Adapting teaching methods is one way of taking into consideration students' cultural values and beliefs. Jeffreys' (2015) retention model for nursing students indicates that self-efficacy and motivation play a large role in predicting students' success and helping them make strides toward meeting their goals when partnered with nurse educators who are aware and engaged in teaching and learning. Understanding ESL students' cultural values and beliefs includes understanding students' orientation to other factors, such as time perception, household responsibilities, work habits, and help-seeking behaviors. Jeffreys also pointed out that these and other variables may be specific not only to one student but also may be typical among others within that student's native ethnic culture. She also pointed out that most schools have integrated diversity throughout courses in the curriculum; however, although educators may believe that they have a clear understanding of what is needed, they may have a need for improvement themselves when it comes to providing the most effective culturally sensitive teaching and learning environment.

Research has indicated that ESL nursing students attempting to graduate and pass the NCLEX-RN have experienced difficulty. Nursing school attrition rates for ethnically diverse students is high, ranging from 15% to 85%, and many of these are ESL students. Only 33% to 47% of ESL students have successfully passed the NCLEX-RN on the first attempt, compared with native English speaking students, who have a 67% to 97% pass rate (Gilchrist & Rector, 2007).

A documented 18-year study conducted by Sims-Giddens (2002) reported an ESL student pass rate that was 21% lower than the pass rate for nursing students who spoke English as their native language. Bosher and Bowles (2008) reported a 40% difference between test scores of ESL students and native English speaking students regarding pass rates. Specifically, the average scores of these two groups were 85% for native English speaking students and 45% for ESL students. When a regression analysis was conducted, 20% of the variance in test scores could be explained by language. These authors in another study analyzed multiple-choice exams and found that 35% of the errors or flaws on the test were related to linguistic bias. These figures suggest a high risk for NCLEX-RN failure and attrition among the ESL nursing student population (Olson, 2012).

2.5 ESL and Faculty Mentoring

Learner characteristics affecting language acquisition include attitude, motivation, and self-confidence. Individuals with a positive attitude who are motivated and self-confident are more likely to experience success in learning new things. This parallels the way Bandura's self-efficacy model plays a large role in how well ESL students perform and whether they can succeed and reach their goals.

Students who demonstrate higher levels of self-efficacy have a higher likelihood of succeeding and reaching their goals (Bandura, 1997). Self-efficacy is a belief in one's ability to complete tasks and overcome obstacles. When individuals have higher levels of self-efficacy they believe in their own abilities and regulate their functioning in four ways: cognitively, motivationally, mood or affectively, and optimistically. Cognitive regulation involves having high aspirations and thinking through steps and procedures as a way of meeting challenges. Motivational regulation refers to people forming beliefs in

themselves and having the confidence that they can accomplish goals and overcome obstacles. Mood or affective regulation refers to regulating the way individuals cope with stressful situations and demonstrate resilience. Finally, optimistic regulation is necessary for individuals to succeed, because they must believe in themselves and in their abilities. Learner characteristics affecting language acquisition include attitude, motivation, and self-confidence. Individuals with a positive attitude and who are motivated and self-confident are more likely to succeed in learning new things. This parallels the way Bandura's self-efficacy model plays a large role in how well ESL students perform and whether they can succeed and reach their goals.

A strong sense of self-efficacy is noted to make the difference as to whether ESL students can be successful or unsuccessful at meeting their goals. ESL students who desire to reach their goals must overcome obstacles on the road to success. Without a strong sense of self-confidence and a belief in oneself, individuals likely will not reach their goals.

Olson (2012) found that bridges and barriers exist that impact whether ESL students meet their goals. They also suggested strategies for addressing this issue, and their study supported the fact that ESL student success is attainable if strategies are followed. Hansen and Beaver (2012) identified areas of concern among ESL students, including language, learning modules, test taking, and cultural differences, and these authors suggested strategies for addressing each of these areas of concern. Hansen and Beaver also emphasized the importance of faculty support for ESL students and indicated that faculty support and awareness of the needs of ESL students significantly influenced their likelihood of succeeding.

Overall, the literature supported the fact that in an increasingly diverse nation, nursing students are becoming more diverse and will continue to present challenges for faculty members in helping them meet their goals and succeed in nursing.

Chapter 3

Method

Minimal research has been conducted comparing success levels of ESL students with different levels of comfort with the English language. Campbell (1996) in her article discussing faculty commitment to supporting retention of at-risk students noted that there is an under-representation of minority nurses in leadership positions and in the ranks of the nursing profession. Sutherland et al. (2007) in their discussion of ESL and other minorities being at risk for failure confirmed that the lack of minorities in nursing leadership positions affirms the fact that fewer minorities have been successful at graduating and passing state board exams compared with members of the dominant culture.

In this study, I examined the journaled thoughts and impressions of successful ESL graduates who have passed the NCLEX-RN. I reviewed their written expressions identifying the activities, strategies, and resources they thought helped them succeed. I looked for similarities, identified themes, and common threads with the goal of discovering the activities, strategies, and resources that they believed most effectively contributed to their successes.

The research questions for this study were designed to identify shared themes in stories and responses to questions by successful ESL novice nurses about the activities, strategies, and resources that made ESL nursing students successful. Several research questions were constructed, in addition to interview questions designed to help answer these research questions, by eliciting these experiences from participants in this study. These successful ESL novice nurses hopefully identified ways faculty helped them reach their goals. Having this aforementioned desire to learn ways faculty could more effectively help these students succeed represented a bias on my part. Having the recognition of this bias was helpful because by noting it, I was able to make every effort to prevent this bias from influencing the data analysis process as I reviewed the participants' responses to interview questions designed to address the study's research questions.

3.1 Research Questions

The following research questions guided this study.

3.1.1 Research Question 1

What things do ESL novice nurses identify as most important and contributing to their success, and how do they rate them in importance?

3.1.2 Research Question 2

How do ESL novice nurses describe their support systems; were there individuals and/or groups that played a major role in their success?

3.1.3 Research Question 3

Do ESL novice nurses identify any educational services that effectively met their learning needs and helped them succeed?

3.1.4 Research Question 4

What are the language factors that ESL novice nurses identify as being important?

3.1.5 Research Question 5

What are ESL novice nurses' impressions of faculty support?

3.2 Research Design

This study was conducted using a phenomenological framework which studied the lived experiences of participants and sought to uncover similarities in order to gain knowledge and understanding about the philosophical perspectives of those lived experiences (Creswell, 1998, p. 51). The research design of phenomenology has been used by nursing researchers to investigate a variety of topics in the profession. In many insightful studies researchers have looked at the lived experiences of becoming a nurse, delivering heart felt nursing care, choosing this caring profession, and achieving a level of understanding of the human condition and more.

3.2.1 Support for Learning and the ESL Students' Lived Experiences

Regarding the component of learning models, Morton-Miller (2013) in her article about cultural competence in educating nursing students suggested that faculty members who demonstrated interest and enthusiasm in learning about students' various cultures and in incorporating culture into classwork were viewed as prioritizing cultural competence and as positive role models for students. The interview questions were designed based on the theoretical framework of Bandura (1977), who found that effective learning results from modeling of desired behaviors. The demonstration of these characteristics was found to improve students' success and decrease attrition of culturally diverse students. Brown (2001), in her article about the impact of culture and diversity in

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the classroom on communication and learning, agreed with Morton-Miller that positive

role models for ESL students and other culturally at-risk students were needed who

valued culture and diversity.

Higgins (2004) wrote about the value of peer tutoring for at-risk students and

found a significant relationship between at-risk students who worked with peer tutors and

their likelihood for achieving academic success. She specifically noted that it was helpful

to pair ESL at-risk students with ESL peer tutors. Interactions with peer tutors provided

ESL students and other at-risk students practice and experience in functioning

appropriately and confidently in social situations. This practice helped socialize ESL

students and thus encouraged them to begin to participate in more common learning

settings and increased their comfort level when asking questions in class.

Hansen and Beaver (2012) in their article about faculty support for ESL students

suggested that many cultures discourage students from asking questions of faculty

members; however, the active learning model utilized in nursing educational settings in

the U.S. encourages critical thinking and encourages students to interact and ask

questions of faculty members as they actively learn new skills and information. These

interactions can be more meaningful when ESL students have had the benefit of

socialization through their engagement and interactions with peer tutors.

3.2.2 Participants

The participants for this study included graduated baccalaureate ESL nursing

students who had successfully passed the NCLEX-RN. These new RNs, who spoke a

native language other than English, had varied backgrounds. They might have been

recent immigrants who travelled to this country as young adults. They might have been

immigrants who immigrated to the U.S. as children with their families and were raised in the USA in homes in which English was spoken very little, if at all. They also might have been international students.

I provided a written questionnaire to self-identified ESL participants and asked that they journal their responses via electronic media and return them to me by email in a secure server within two weeks of receiving the questionnaire. I was hoping this small sample of ESL novice nurses would identify strategies used by faculty members that have helped them succeed in their nursing education and ultimately on their NCLEX-RN.

All the participants were successful on their NCLEX-RN. These successful ESL RNs were charged to share the strategies, activities, and resources that they considered to be the most important contributors to their success. This researcher anticipated that the stories of these ESL RNs would include explanations of the strategies, activities, and resources faculty members employed to help them succeed. Interview questions were written in an open-ended style to encourage participants to share what was in their hearts about the activities, strategies, and resources that helped them the most.

3.2.3 Methodology

This researcher approached successful ESL graduates and asked them to journal privately at their own convenience by responding to several questions in writing about the strategies, activities, and resources that contributed most to their individual successes. The hope was that they would share their thoughts and impressions about the strategies, activities, and resources that were most helpful to them as they worked toward reaching their goals. Research has indicated that ESL students have been frequently hesitant to speak in public and are more comfortable with the written word (Hansen & Beaver,

2012). The participants in this current study already had proven their written language

competence by successfully passing their written NCLEX-RN. Research further

indicated that second-language learners often struggled with verbal communication.

Examples of their areas of struggle included "interpretation and use of eye contact, gaze,

posture, gestures and proxemics" (Carr & DeKemel-Ichikawa, 2012, p. 80). Due to these

factors and others, these authors also found that ESL students were more comfortable

communicating in writing as opposed to speaking. These authors observed the fact that

ESL students experienced increased stress and more difficulties in oral communication

situations due to difficulty understanding dialects, which would not have been a barrier if

they had been communicating via a written format. They also suggested that a computer-

assisted learning program could provide a means for ESL students to increase their self-

confidence as they communicate with others. For this reason, I chose to ask participants

for written responses rather than verbal responses to questions. This request also provided

me with a tangible set of written responses to review as I reviewed and analyzed the data.

I believed that requesting written responses provided participants with a positive, non-

threatening environment in which they could truthfully share and explain their beliefs,

their thoughts, and their feelings about the activities, strategies, and resources that helped

them succeed.

3.2.4 Phenomenology

According to Creswell (1998), a phenomenological study "describes the meaning

of lived experiences for several individuals" relating to a particular phenomenon (p. 51).

Researchers in phenomenological research explore the essence or underlying meaning of

experiences and seek clarity and understanding of these lived experiences. With nursing

being a helping and caring profession, the use of a phenomenology for exploring nurses'
lived experiences provides a method for gaining insight into what this life choice means
to individuals in a variety of situations.

Successful ESL graduates have their own stories to tell that help to clarify the
meaning and philosophical experiences they share. Asking participants to journal their
answers privately hopefully encouraged participants to share details about their own
experiences by providing the most non-threatening and relaxed setting in which they
could share their thoughts meaningfully. I reviewed the written responses to the carefully
designed interview questions and examined the data by looking for common themes.
Understanding the success stories of these successful graduates provided a first-hand look
into ways educators could provide relevant resources to benefit future at-risk ESL nursing
students.

In a landmark phenomenological study, the "caring interaction" between a nurse
and a patient was explored. The question for study in this case involved looking into
what necessitated a "caring interaction" between a nurse and a patient (Riemen, 1986).
This was initiated by first looking into the philosophy of caring and then exploring nurse-
patient interactions and determining what could be included as caring experiences. This
was done by analyzing structured interviews of ten adult patients who shared their
experiences under the care of nurses. Common themes were analyzed in the patients'
responses to help explain the lived experiences of being a part of a "caring interaction".
Wilson (2014) explored the lived experiences of being a mentor in nursing seeking to
determine if nursing mentors needed certain personality traits and/or levels of morality in
order to responsibly demonstrate to students the high level of empathy needed for

individuals to become nurses. This study in fact found three sub-themes by analyzing interviews, event diaries and participant drawings. These themes were: 1) being a gatekeeper, 2) maintaining a professional role, and 3) valuing passing on personal knowledge to students.

Hilli et al. (2014) studied the impressions of preceptors working with nursing students seeking to identify what makes up a good preceptorship. This was explored through the lived experiences of preceptors themselves as they shared their stories via interviews about their experiences working with students. Preceptors were found to value the development of caring relationships with their students, and that mutual respect was necessary for good learning, fellowship, and maintenance of an atmosphere supporting learning. Preceptors also believed they had a responsibility to the students and to the profession to prepare their students for patient care. These lived experiences were studied via interviews.

In another phenomenological study, students' impressions of their last level of preparedness for practice were examined by evaluating their written diaries for the first four weeks of their last ten weeks of practice. Findings showed that they felt ill-prepared for practice (Morell & Ridgway, 2014). This examination of written reflections of their lived experiences closely aligns with this study's chosen method of data collection: evaluating the reflective journals of ESL novice nurses.

In a fifth study, students' impressions of death and dying were studied. Students' interviews were undertaken to explore their views and experiences related to death and dying of their patients (Sampaio, 2014). The lived experiences of student nurses were examined as they worked with patients and families in end of life situations following the

pattern of a phenomenological design. In this case the findings reflected that the theme of death and dying had been sufficiently addressed in the students' educational experiences.

These and other studies reflect the use of a phenomenology as a method of qualitative inquiry used to investigate the value of life experiences. Evaluating data the researcher seeks to reduce these explanations of life experiences to a "central meaning or essence of the experience" (Cresswell, 1998, p. 236). Exploring lived experiences helps researchers explain things people do and how they react and behave in various situations based on things they have learned along the way.

This research design allowed me to investigate the perceptions of ESL nurses about the activities, strategies, and resources that they believed influenced their individual success. By closely examining their narrative responses on questionnaires, I hoped to gain an increased understanding of potential strategies to support this population of students at risk for failure.

Participants were asked open-ended questions designed to help them tell their stories and write about the activities, strategies, and resources that were most helpful to them. They were first asked about what helped them in general, and then they were asked about more specific faculty members or educational practices that they believed to be most helpful. The interview questions were at first general and then became more specific with the hope of capturing participants' true feelings without leading them in any one direction.

In reviewing the participants' answers to the questions, responses were reviewed and analyzed in order to identify similarities. It was hoped that their responses would lead me to a more complete understanding of what was most helpful to these ESL students. It

was also hoped that their responses would provide information that could be used to help nursing education programs and nursing faculty members improve the way they interacted and provided services to ESL students in helping them succeed and meet their goals.

Student success can be expressed in several ways, including the ability to earn high grades, the opportunity to experience a sense of accomplishment, and the experience of feeling pride at achieving goals (Ehow, 2014). Nursing student success in the U.S. is measured by achieving success on the NCLEX-RN (Redorbit, 2014). Even if students graduate from a nursing program, success is not achieved until the NCLEX-RN is passed, allowing students to practice as registered nurses. Faculty members who effectively support nursing students can be positive influences as they attend to the needs of ESL students and other students preparing for the NCLEX-RN and for their futures in the nursing field.

3.2.5 Participants: Recruitment of Study Participants

For this qualitative study, I focused on ESL novice nurses who graduated from the UT/BGSU CON BSN consortium and successfully passed the NCLEX-RN. I sent out an invitation to all recent graduates (2012-2015) and asked them to self-identify as being ESL students and as having passed the NCLEX-RN. I asked them to participate in this study and to complete the questionnaire within two weeks of opening it. Included in this study were students with a variety of backgrounds as long as the English language was not the primary language spoken in their homes.

These students were in my classes during these four years and were aware that I have been enrolled in a doctoral program. Many had shared encouragement and support

for me in my endeavors. I explained that I sought their input in helping to understand the best ways to help ESL students succeed in nursing. I explained in the invitation that I would be asking questions and gathering information from ESL students and reviewing their stories to help to improve my understanding of ways that schools of nursing could be more effective in helping ESL students meet their needs and reach their goals. These students might have been natives of another country who would return there after graduation. They might have been natives of the U.S. who were raised by immigrant parents who spoke primarily another language in the home. They might even have been raised in another country and then immigrated to the U.S. and live as young adults in the U.S. As long as they self-identified as people whose first or native language was not English, and they were registered nurses, they were appropriate for my study.

These graduates were asked to answer questions to gain insight about the activities, strategies, and resources that helped them the most in their pursuit of their nursing degree. It was hoped that they would include information about faculty input on their questionnaires, but it was up to them what they talked about. I asked questions about the ways in which the availability of resources influenced their educational successes. Questions were designed to gather information about their individual experiences as they worked toward their individual goals in nursing. Again, it was hoped that they would identify positive experiences working with faculty members and identify activities, strategies, and resources that were most helpful. Graduates' comments about faculty members and/or other things that they identified that led to their success were included and discussed in the results section.

3.2.6 Specific Method of Data Collection

Participants were asked to answer a series of questions and write out their answers electronically via a secure website through the Qualtrics data collection system. Qualtrics is a private research software company, and the UT College of Nursing has a license to use Qualtrics. I was given access to this data collection system in order to collect data for this study. Once opened, the participants had two weeks to complete the questionnaires and submit their responses electronically. Qualtrics provided a platform in which all personal information was protected and kept strictly confidential.

3.2.7 Data Analysis

The researcher gathered data through written responses to questions from successful ESL baccalaureate graduates of the UT/BGSU CON BSN consortium about their experiences working with faculty members during their nursing program. Participants included those who successfully passed their NCLEX-RN who spoke a native language other than English. In reviewing these written answers to questions, common threads were identified and similarities were investigated with the goal of finding common ground, identifying the best practices of nursing educational institutions, and identifying the most effective ways faculty supported and assisted these ESL graduates.

This qualitative study was focused on ESL baccalaureate nursing graduates' written interview responses to questions about what they believed to have been the most helpful resources and strategies that faculty members used in contributing to their success- especially resources and strategies that specifically helped them complete their coursework, graduate from nursing school, and pass the NCLEX-RN. This study

reviewed participants' written responses about their lived experiences in the qualitative style of a phenomenology.

Asking novice nurses to write out responses to written interview questions aligned with their experiences doing reflective journaling during their preceptorships as nursing students. After working alongside assigned RNs for a regular nursing day or night shift, these novice nurses did reflective journaling and wrote about their experiences as a part of one of their class requirements. The method of data collection for this study was thought to mirror their journaling experiences, and these nursing students were anticipated to have had a level of comfort in doing this activity.

Journaling has been used successfully in other research studies, such as in a study conducted by Hermansen and Purtzer (2014), who used journaling to collect stories from women diagnosed with cancer. These researchers asked them to share personal reflections about their lived experiences on their cancer journeys.

Olson (2012) studied the effects of varying cultural backgrounds and practices on learning and reaching goals. Olson suggested that in many cases cultural conflicts present barriers to learning. She noted that second-language learners are often more comfortable with the written word than the spoken word. Allowing these participants to write out their thoughts in their own chosen environments over a limited window of time provided these participants the opportunity and flexibility to explain themselves without the pressure of an interview and direct probing questions.

The technique I used to gather these ESL stories/answers was to send out an invitation to participate in my study with my questionnaire. I sent this out to all 2012-2015 graduates of the UT/BGSU CON BSN consortium who passed the NCLEX-RN.

The students were asked to self-identify as ESL students. The questionnaire was comprised of several interview questions. Participants were asked to thoughtfully write out their answers in an online format. They were asked to answer unhurriedly and to complete their questionnaires and return them within two weeks of opening the questionnaire. Participants received an additional email on day thirteen as a reminder that the questionnaire must be returned by a specific deadline. They were asked to reflect on their experiences and share their responses using a written format and submit their written answers through Qualtrics via the College of Nursing administrator. Reviewing and discussing the shared lived experiences that have contributed to nursing success as ESL students was presented as a phenomenology. The ESL graduates' descriptions of their experiences and impressions guided and directed the study.

Successful ESL graduates were asked open-ended questions and asked to write about their experiences. They were given two weeks and encouraged to complete the questionnaire at their convenience in a relaxed atmosphere. They were asked to elaborate on their responses with the goal of identifying what kinds of activities and resources they found to be most helpful and contributory to their successes. It was hoped that their responses would lead to an understanding of the activities, strategies, and resources that these successful ESL graduates felt were most helpful in contributing to their success.

I examined each of these successful ESL graduate's written responses about the activities, strategies, and resources that they believed contributed to their successes. I then reviewed their situations to identify common themes relating to their successes and identified the strategies these graduates thought were most effective in helping them to succeed. I reviewed these answered questions and looked for similarities with the goal of

identifying common strategies that were thought to be most effective in helping them succeed.

By reviewing and coding these ESL nursing graduates' stories for similarities, I hoped to identify similar experiences or common areas that led to their success. I also hoped to identity ways faculty effectively met the needs of ESL students. I plan to publish a manuscript with my impressions, the goal of which is to give a voice to successful ESL graduates, discussing shared experiences, and suggest ways knowledge of these experiences may help faculty more effectively support their successes. .

Findings of this investigation could be used to identify things that positively influenced ESL students' success. The investigative technique of collecting and reviewing written interview responses of successful members of an at-risk group of nursing students could also be used to help other at-risk groups of nursing students succeed. By seeking to improve faculty members' understanding of students' lived experiences, it was hoped that faculty members could become more effective and supportive of students' individual situations and increase their likelihood of success in education and in nursing.

In the future, this same strategy could be applied to investigate ways to help other at-risk groups of nursing students and increase their chances for success.

After I identified common themes, I hoped to determine whether there were any areas in common regarding faculty interactions. After I identified these commonalities, I summarized my findings about the activities, strategies, and resources that these ESL grads believed were most helpful in contributing to their success.

3.3 Protection of Human Rights

All proper preparation was made to ensure human subjects were protected prior, during, and after this study was conducted.

3.4 Evaluating the Method Used

Using the Qualtrics platform to collect data in a clear and confidential way by allowing participants to write out their answers in the form of reflections about their thoughts about each question was done in a deliberate attempt to provide them with the most supportive and least stressful method of gathering data. The method provided a means for collecting their responses without having an interviewer audibly asking questions expecting them to answer on the spot, but rather allowing them to decide when and where they wanted to complete the questionnaire. Research showed that this population preferred the written format to the audible format which is what this method provided.

One curiosity of using this method was that there were six participants who completed the questionnaire who were not ESL, and there was no way of stopping them from doing it. I am unaware of the reason they chose to complete the questionnaire as the instructions and invitation informed potential participants that the target participants were those who would self-identify as having both passed their NCLEX-RN and had a primary language other than English.

3.5 Reviewing the Qualtrics Data

The Qualtrics data could not be viewed while the questionnaire was open, but I was able to pull up screen shots at my discretion that showed a growing number of completed questionnaires.   The survey was sent out four times to the 1500+ participants due to the numerous last known email addresses. Qualtrics reflected these 6000+

questionnaires sent out. It also showed that 39 were opened and 11 were completed. This reflected a 20% completion rate according to Qualtrics.

The questionnaire was set up to stay open two weeks once it was open, and the participants could come and go at their will until they chose to submit it after which it would close and be sent to me. When I viewed the individual participants' data, I could see how much time they spent in the survey, and the date and time that they submitted their responses. I was not able to view how many times they went in and out, but only the total amount of time they had it open.

Another feature was that on the survey questionnaire when it was closed, the responses were numbered. There were 39 participants' surveys that were opened up. Several answered two or three questions and then stopped. Many answered zero questions and then stopped. There was a total of eleven who went all the way through the survey with five who noted their primary language was not English. These participants were numbered after the survey closed as the number 1 participant was the last one to submit responses. This would seem odd in that the numbers appeared to me as I reviewed them daily with the count climbing up to 39. The numbers 1 – 39 were paired with newest to oldest with the oldest number being 39 and the newest being 1. I knew this was so, because each participant completed questionnaire was paired with a date and time that corresponded to these numbers.

The Qualtrics tool was able to generate bar graphs and tables by question, but this was not needed for my study, since I was evaluating the responses for qualitative content. Also, the potential tables would have included all 39 participants mainly focusing on the

questions asking about demographic data, and I was only interested in investigating the 5 ESL participants who completed the survey.

3.6 Limitations of the Study

Several limitations were noted and addressed at the onset of this study. First there was a limitation in that I had a bias of desiring to find ways for faculty to improve their support of ESL student nurses. Being aware that I have been hopeful of receiving input about the role of faculty members in student success, I took extra care in wording the interview questions in order to avoid leading participants to respond in a way that reflected my personal biases. It was my goal to collect data from these successful graduates without pushing them in any direction. This was my bias, and I was aware of it, so I addressed it and made every effort to keep it out of the questionnaire and out of the review of completed questionnaires. It was my desire to do this well so that my participants could write what was in their hearts and essentially speak with their own voices.

It was my hope that they would write about their experiences with faculty members or other mentors that were helpful for them as they worked toward reaching their goals. My existing bias looking for information from the participants about their interactions with faculty was another reason why prewritten prepared questions were provided. Encouraging these individuals to write out the answers to these questions in a relaxed environment of their choice aligned with my desire for them to provide truthful responses not influenced by my own bias and opinions. In designing the questions, I sought to remain neutral as well as thorough in order to allow plenty of latitude as the participants wrote out their responses.

A second limitation that surfaced was related to the limitation of doing a qualitative study and the potential for low numbers of participants. Low numbers of participants who completed the questionnaire translated into descriptive and exploratory findings rather than conclusive research (Creswell, 1998, p. 51). This is a known limitation of a qualitative study. These noted impressions of the four participants represented a limitation in numbers and generalizability, but it opened the door for further investigation of these and other topics of interest.

A third limitation that was recognized at the onset of the study was that due to the email data base being constructed with all last known email addresses and being sent out four times, there was a possibility that the questionnaire would be completed multiple times by the same participants, and in fact it was decided that this likely occurred. This limitation was addressed at the onset by including in the invitation information included in the accompanying email about the questionnaire being sent out multiple times and a request that they complete it only one. These instructions were sent out with each questionnaire every time it was sent out, and yet the potential was there that individuals would disregard or misunderstand the instructions and complete the questionnaire again. It was decided that this represented a minor limitation as the data could still be collected and analyzed for meaning regardless if anyone had completed it more than once.

A fourth limitation was noted in that there was no way for the potential participants to ask questions during the completion of the questionnaire. This limitation was addressed by including my cell number and email address in the invitation and encouraging potential participants to send me any questions by phone or email. Several questions were asked, but only by those individuals who were non-ESL asking if the

questionnaire should be completed by them. I was able to answer those emails and ask

these non-ESL participants to refrain from completing it. However, one of the ESL

participants was noted to have misunderstood the meaning of the word, "hindered" by

giving examples of positive rather than negative activities associated with being hindered.

This clear lack of understanding could have been caught if there had been an effective

way of recognizing the mistake.

Another way to address this limitation would be to set up an optional discussion

board in which participants could interact with one another and/or with me in case

questions arose during completion of the questionnaire. In this way, I could have

continued to use the written interview format and thus provided a written platform for

data collection that has been found to be a chosen platform of the ESL population.

Examples of areas the ESL students struggled with included "interpretation and use of

eye contact, gaze, posture, gestures and proxemics" (Carr & DeKemel-Ichikawa, 2012, p.

80). Due to these factors and others, these authors determined that ESL students were

more comfortable communicating in writing as opposed to speaking.

An alternate way of addressing this would be to perform the interview verbally

one on one in either an online or personal setting. The questions could be provided in

writing to comply with the ESL population's increased level of comfort with the written

word as opposed to the audible word. In this way I could have addressed any questions

and/or inconsistencies that might have come up at the time of the data collection.

What is new and different about this study is using a written interview format.

There are positives and negatives to using this new method. In order to provide a means

for participants to ask questions while working on their questionnaires, I would suggest

designing some type of strategy for accomplishing this. Ideas are to supplement the

written interview with face to face interviews, to see if language is a barrier or if

responses vary, or use an interactive discussion board and provide a platform for

participants to ask questions of others to clarify unknown words or meanings. This is a

new method that bears investigation to improve its function ability.

3.7 Summary

It was my hope that information gained by reviewing the written responses of

these ESL novice RNs would lead to a greater understanding and strengthening of the

faculty role in helping ESL students succeed in their educational goals, including

graduating and passing the NCLEX-RN and entering the field of professional registered

nursing.

Chapter 4

Data Analysis

4.1 Introduction

It was my desire to explore the lived experiences of successful ESL novice nurses by reviewing and evaluating responses to written interview questions of a sample of novice ESL registered nurses. I studied their interview responses and organized them into themes representing similarities and differences in the ways they answered the research questions and sub-questions. I then reviewed their responses and suggested themes that were represented and discussed ways that these themes could help nursing faculty and others improve what we do in support of ESL and native English speaking students, nurses, and patients.

4.2 Creation of Distribution List

There was no data base available to selectively send my questionnaire out to students who spoke a primary language other than English. The available data base through the UT and BGSU Registrars' offices only included ethnicity and not primary language spoken. My challenge then was to seek out these students from the full list of UT/BGSU CON BSN consortium graduates from 2012 – 2015, and create a data base

with the last known email addresses of these nurses. Having taught the core courses for

the College of Nursing for these years, I had access to these students' email addresses via

my class records including the UT Banner information about students in my classes. I

was able to access the last known email addresses they had shared through this university

web-based service. In doing this, multiple emails of many of the students were available

to me. Not knowing which ones were active, I included all known email addresses in my

distribution list with the knowledge that many students would receive the written

questionnaire multiple times. This distribution list contained approximately 1500 entries.

Since the written questionnaire was sent out four times, there were actually over 6000

emails sent out requesting participants to take part in my study.

4.3 Recruitment of Participants

My population of participants was made up of registered nurses who graduated

from the UT/BGSU CON BSN consortium from the years 2012 -2015. Approximately

80 students graduate with their BSN degrees each semester, and the College of Nursing

graduates students three times a year. There were roughly 240 BSN graduates per year;

therefore, over four years there were roughly 960 BSN graduates.

I made the decision to ask these known BSN graduates to self-identify as having

passed the NCLEX-RN and having had a primary language other than English. They

received a recruitment letter which included an informed consent and invitation to

participate following strict IRB Instructions. This was included with the written

interview and instructions that if they met these criteria, they were invited to participate

and complete the questionnaire via the Qualtrics survey tool (Appendix 1).

Due to the fact that these students received this request via multiple last known email addresses, it was apparent that there existed the possibility that they might complete the questionnaire more than once. To decrease the chance of this happening, the following instructions were included in the email that accompanied the written interview and instructions.

> In the attempt to reach out to as many participants as possible, potential participants will receive this questionnaire via multiple last known e-mail addresses. If you choose to participate, please respond to only one of these emails as you complete your questionnaire. Thanks a lot.

Even with the addition of this to the email, there was still the possibility that participants might complete the questionnaire more than one time. This is viewed as a minimal limitation of the study, and not thought to be problematic due to the fact that the information being sought could be collected and evaluated whether the individual completed it once as requested or multiple times.

4.4 General Background about Expected Numbers of Participants

With the minorities in the U.S. making up approximately 36% of the population and the nursing work force being only 16% diverse, it follows that the numbers of BSN students who have a primary language other than English would be low. This same resource shares that in the U.S., 55 million people speak a language other than English in their own homes (Hansen and Beaver, 2008).   Another resource shared that in Australia where 24% of the population was born overseas, 22% of the university students overall spoke a primary language other than English (Crawford and Candlin, 2012). Finally an earlier article shared that among the 15 largest universities in the U.S., ESL students made up 11 to 25% of the total enrollment (Kurz, 1993).

These figures and others led me to the understanding that the number of BSN ESL graduates from the College of Nursing would be low. Our UT/BGSU CON BSN consortium graduates approximately 80 students three times a year, and group of participants was taken from the years 2012–2015. This represents an approximate total of 960 BSN graduates. Due to above available estimates and my own experiences working with this population of BSN students, I am suggesting that 5-10% of our graduates have a primary language other than English. In the case of the UT/BGSU CON BSN consortium graduating classes, no hard data was available, so I estimated the number of ESL graduates as low or 5% which would be approximately 48 students over four years.

Understandably this is a low number which led me to the decision to use qualitative inquiry. With an approximate number of 48 ESL BSN's who were eligible to respond, I set my target at 10 -20 participants, and knew I might not receive 10. I explored all quality responses that I received in order to begin to understand this lived experience.

These RN's were asked to answer the questions using the method of writing reflections as they had done weekly as undergraduate students when they had to write about their experiences working alongside their assigned RNs during their preceptorships. They were told that once they opened up the questionnaire, they would have two weeks to answer the questions, that they could stop at any time or skip any questions they did not want to answer, and that their answers would be kept confidential. They were also told they could come and go from the questionnaire as many times as they liked until they were ready to submit it, after which time they could no longer access

it, and it would be returned to me via the Qualtrics administrator. They were also informed that they could stop at any time without penalty. Many participants began but did not complete the questionnaire.

The questionnaire was sent out via Qualtrics, a platform for distributing research materials for collecting data in a safe and controlled setting.   During the period of time that participants were completing the questionnaire, I checked on the progress weekly. When the questionnaire closed there were noted to be 39 responses from participants who had opened the questionnaire and begun answering questions.   Upon review, it was noted that many of the participants began and then stopped after one or two questions. Others began and then stopped before they reached the demographics section.

Six students completed the written questionnaire and identified themselves as having English as their primary language. It is unclear why they completed the questionnaire since they were not members of my target group. From this point forward in Chapter 4, I have referred to the native English speaking participants as the non-ESL participants.

Table 1.1: ESL Participants' Demographics (1 – 4)

Participant	Age	Sex	Self-proclaimed primary language
1	30	Female	Russian
2	26	Female	Gujarati
3	27	Male	Arabic-Lebanese
4	37	Female	Vietnamese

Table 1.2: Non-ESL Participants' Demographics (5 – 10)

Participant	Age	Sex	Self-proclaimed primary language
5	23	Female	English
6	23	Female	English
7	25	Male	English
8	25	Female	English
9	24	Female	English
10	28	Female	English

4.5 Discussion: Tables of Participants' Responses

Upon review, it was found that there were ten participants who completed the questionnaire (Table 1). There were five questionnaires completed that indicated the participants' primary language was something other than English. Upon review of the demographics of these five questionnaires, it appeared that questionnaires 4 and 5 were completed by the same person (Participant 4 above). Responses were very similar and the demographics of both were that of a 37-year-old Vietnamese female who passed the NCLEX-RN on the first attempt. It was determined that it was unlikely that these questionnaires were completed by two different people. Therefore, I combined the responses from questionnaires 4 and 5 into one set of responses. Of these ten participants, there were six students who stated that their primary language was English.

This narrowed down my targeted participant number to four, and still allowed me the ability to explore the responses, to discuss the participants' phenomenological experiences, and to answer the research questions. These four participants' responses were the basis for my analysis of the lived experience of ESL graduates who passed the NCLEX-RN and became registered nurses.

In the following sections I discussed the responses of the participants who completed the questionnaire and who identified themselves as speaking a primary language other than English. I then reviewed the participants' responses that stated that their primary language was English and compare the two groups to see if there were marked similarities or differences.

I shared each of these individual's responses in a narrative summary telling their stories of their experiences and addressed each of my research questions. Next I shared similarities in their responses and identified common themes to help improve the understanding of this lived experience. I explored these analyses looking for problematic areas that these students identified as being notable and needing to be addressed and/or corrected by educators working with ESL students. I then discussed ways this new insight could be used to help direct further study on this lived experience, and I included suggestions of things I would replicate as well as things I would suggest to do differently.

4.6 ESL Participants' Responses

The following is a report of each of the four participants' responses who self-identified as having English as a second language. These responses are grouped in line with my data collected via my research questions (R 1 - 5) in Appendix A. For each participant's set of responses there are four headings which are used to organize data gathered by select research questions. These headings with their primary associated research questions are:

1) Success and Motivation (R1),
2) Support Systems: Individuals, Groups, Institutional Support Services (R2 and R3)

3) Language Factors and Nursing (R4), and
4) Faculty Support Impressions (R2 and R5)

4.6.1 Participant 1 Responses

Participant 1 was a 30-year-old female whose primary language was Russian. She identified her race/ethnicity as European. She rated her English language fluency as "good." She stated that she passed the NCLEX-RN on her first attempt, and she was currently not working.

4.6.1.1 Success and Motivation

When asked, "How do you define success?" Participant 1 wrote, "Success is an accomplishment of great things." She also wrote, "In Nursing success is ability to perform your job 100%, be compassionate toward patients and their families and have outstanding performance ratings from your patients."

When asked, "Which of the things in your definition do you say are most important?" she said, "Outstanding performance ratings from peers, managers, and patients." When asked, "What motivates you to learn?" she said, "My passion for nursing, curiosity in disease process, and being the best nurse who knows what she is talking about." When asked if she could describe what motivated her to pursue Nursing as a career, she said "Caring for someone who goes through the toughest time of their lives and being there for the healing process is the best part of being the nurse."

Participant 1 expressed caring and compassion for others in her responses to these first questions which contributed to the theme of "having a desire to work in a caring profession and caring for other people." She went on to say,

> Not many occupations deal with death and life as close as nurses do. At times it can be very terrifying, but for me it can be both: rewarding and scary

at the same time. It takes more than a physical labor to be a nurse. I believe nursing is a form of art, it is not just a profession, and it is a gift.

When asked, "What motivates you to continue in pursuit of your goals?" she talked about the fact that she is working on her masters' degree, and she said she would "…like to do more for my patients, and this is why I chose to continue my education."

She talked about being motivated to continue in the pursuit of her goals working on her master's degree and stated that her personal goals were to "help patients before they become critically ill" and emphasized "prevention and education for patients." She also stated that she wanted to do more for her patients.

4.6.1.2 Support Systems: Individuals, Groups, Institutional Support Services

When asked, "Was there an individual who played a significant role in your success?" she identified her husband and shared that he "paid for my education, worked full time, supported me in difficult times, and never stopped believing in me." When asked if that person was a faculty member, she wrote "N/A." When asked, "If that person you described was not a faculty member, can you talk about anything that a faculty member did that was helpful that contributed to your success?" She said, "No faculty members really contributed to my success."

When asked if there were any UT or CON institutional services that contributed to her success, she wrote "Yes", and identified "peer tutoring, online support, and practice tests." She stated that she used all these services about once a week for about three hours and particularly used them in preparation for exams. Her responses in this section aligned with the theme that ESL students deliberately and regularly use UT and CON institutional support services.

When asked, "Can you identify any interactions with faculty that played a role in your success?" she said "No." When asked, "Were there any times that faculty did things that hindered or interfered with you learning?" she said "Yes." When asked if the answer was yes, to describe these interactions, she wrote, "One time faculty member told me that I will not be successful in her class due to lack of nursing experiences. I felt unwelcome in her class." When asked how these interactions "hindered or interfered with your success" she said, "It made me doubt in myself and that my work history will affect my studies."

This was the one ESL participant who gave examples of negative things faculty had done and was also the one ESL participant who said, "No faculty really contributed to my success." Although this was only one person, it was eye-opening that there was even one ESL graduate of the CON BSN program who had trouble and associated their trouble with an interaction with faculty. It should be a reminder that faculty have a responsibility to demonstrate cultural awareness and cultural competency in their interactions with students. In theme 4 the ESL participants shared the understanding and appreciation of the need for ESL and other multi-lingual nurses in health care. This may be a notion that faculty are not universally aware of. Sharing information about the rising diversity of the patient population and the need to support diverse nursing students in order to increase the numbers of successful diverse nurses may improve faculty members' understanding of the importance of supporting this at-risk group of nursing students.

When asked about interactions with faculty, she stated there were no interactions that played a role in her success. When asked if faculty hindered her success, she did not answer that question.

4.6.1.3 Language Factors and Nursing

When asked about language factors and ways "not having English as a first language may have affected your work as a nursing student" she said, "Yes" and that there was "always a word that I didn't understand while taking a test", and that this "slowed me down." She stated, "I wish ESL students could use dictionaries during tests." When asked, "What are your thoughts about being a nurse who speaks more than one language?" she stated that she believed that nurses who could speak more than one language were "beneficial for the patient who speaks the same language." She also stated that it is "beneficial to the hospital which hires that nurse", and that bilingual nurses are "more sensitive to other religions, languages, and cultures."

She shared that the impact on patient care was that multi-lingual nurses could help patients with difficult medical conditions understand what was going on. They could "stay with patients and explain terminology." She also wrote that they could give patients a "sense of trust" and "one to one interaction" as well as "support the patient and the family."

When asked, "Looking forward as a practicing nurse, what could successful multi-lingual nurses bring to the practice of nursing?" she wrote, "Understanding a different culture may be getting rid of some common stereotypes about the culture, understanding that being from a different country doesn't mean that multi-lingual nurses can't do their job as well as American nurses can based on her language skills." Again,

this participant reached out to let the reader know she valued multi-lingual nurses and shared that they could "do a good job just like an American nurse." This aligned with the theme of valuing ESL nurses and sharing that they are needed in health care.

When asked, "What could successful multi-lingual nurses bring to the practice of nursing?" she said they bring an "understanding of different cultures", can also "get rid of some of the common stereotypes about culture" as well as "bring an understanding that being from a different country does not mean that a nurse cannot do the job as well as an American nurse based on language skills."

4.6.1.4 Faculty Support Impressions

When asked, "Can you discuss your impressions of effective faculty support for ESL students?" she said, "There is no support for ESL students that I have encountered throughout my studies." She stated that "maybe ESL help is not advertised enough", and said that "not many students know about services that are available."

When asked for "any suggestions for faculty working with ESL nursing students that might help these students succeed", she said there should be "a program that is developed exclusively for ESL students, to help them with language proficiency, communications skills, group work that includes public speaking." She went on to share that she had a lot of trouble with public speaking related to her strong accent and her fear that her fellow students and faculty would not be able to understand what she was saying.

She also suggested developing support groups for ESL students to "help them integrate into the American culture and build their confidence." She wrote that she believed this would be very helpful for ESL nursing students and faculty who work with them.

4.6.2 Participant 2 Responses

Participant 2 was a 28-year-old female whose primary language was Gujarti. She identified her race/ethnicity as Asian. She rated her English fluency as "very good." She stated that she passed the NCLEX-RN on her first attempt, and she was currently working in long term care.

4.6.2.1 Success and Motivation

When asked, "How do you define success?" Participant 2 wrote that success was not about accomplishing goals or completing a task, but rather she defined success as "enjoying the journey that led you to the goals you set." She emphasized that it was not just achieving the goal, but more importantly facing and addressing the challenges, even completing a process "against all odds." She included the belief that the "end result should not be more important than enjoying the journey along the way." She also shared, "…completing the race against all odds is a much bigger success than actually winning."

When asked, "Which of the things in your definition do you say are most important?" she said, "Setting goals; driving yourself to that goal keeping in mind not to forget to enjoy the journey…"

When asked what motivated her to learn, she shared that she pushed herself to succeed by comparing herself with only herself and tried to make improvements on herself. She saw importance in what she believed and in her own strength and purpose rather than comparing her with other people and what others had done.

When asked what motivated her to seek nursing as a career, she shared that she was unsure at first, but that she saw nursing as a career that could make a difference in

people's lives. She explained that she saw nurses as people who were able to be close to their patients and had "unlimited opportunities to make a difference in people's lives."

When asked to talk about what motivated her to continue in pursuit of her goals, she again said it was important for her to do something that would make a difference in people's lives. She shared that she believed enjoying the journey to become a nurse was more important than achieving her goal, and that by "enjoying the journey", she had been able to "look outside the box and explore" ways she could improve the health care system. She reiterated that if all she was trying to do was to become a nurse, she would have missed the learning experiences that she gained from the journey itself. She continued to explain that by enjoying the journey, she has been able to look beyond what she could do for just one person, and "explore what she could do for whole communities and populations." This was where she believed nurses could make a "true difference" affecting the lives of groups of people.

4.6.2.2 Support Systems: Individuals, Groups, Institutional Support Services

When asked, "Was there an individual who played a significant role in your success?" she shared that there were a lot of individuals who helped her along the way. She said individuals pushed her harder, challenged her even more when she got comfortable, and made her understand that the "sky is the limit." When asked what role these individuals played, she identified the roles of being an inspiration and a mentor. She said individuals challenged her and made her feel she "had a lot to learn" and that "the sky is the limit."

When asked "if that person was a faculty member, what did that faculty member do that was different from other faculty members?" she said, that faculty member told her:

> If you have a goal you want to achieve, then there is no stopping you; that if you want something so bad, there could never be a challenge too hard to overcome.

She stated that the faculty member taught her to believe in herself, and was constantly supportive and challenging. Lastly she said the faculty member went "above and beyond to ensure student success."

When asked, "Was there a group, formal or informal, that played a significant role in your success?" she wrote "family." When asked what they did and what role they played she wrote "When I stopped believing that I could attain my goal, they believed in me and encouraged me to be positive." She identified the role they played as being "very supportive in every way to make sure that when it got rough, I was fighting it out and not giving up."

When asked if there were any UT or CON institutional services that contributed to her success, she wrote that there were no specific services that she used. When asked, "Can you identify any interactions with faculty that played a role in your success?" she said, "Yes", but did not give any examples in this section." When asked, "Were there any times that faculty did things that hindered or interfered with you learning?" she said "No."

4.6.2.3 Language Factors and Nursing

When asked about language factors and ways "not having English as a first language may have affected your work as a nursing student", she said she had learned

English all through elementary school, so she "did not think not having English as my first language affected my work in nursing school."

When asked, "What are your thoughts about being a nurse who speaks more than one language?" she stated she believed it to be very helpful. On the other hand, she shared that "sometimes people/patients had a hard time understanding me because of my accent."

When asked, "Looking forward as a practicing nurse, what could successful multi-lingual nurses bring to the practice of nursing?" she wrote, "it depended on the population and the language spoken." She gave an example that the nurse who spoke Spanish might be very helpful with that population. She shared that she believed that sometimes patients felt that "the multi-lingual nurse could feel their thoughts without having to translate everything into English."

4.6.2.4 Faculty Support Impressions

When asked, "Can you discuss your impressions of effective faculty support for ESL students?" she said she believed that "being patient with the ESL students is very important." She also shared that faculty should provide them with the resources they needed to help them succeed. She also emphasized that once the student found a level of support, it was important for the faculty member to continue the support including "pushing students outside of their comfort zone" and "challenging them" to aim higher.

4.6.3 Participant 3 Responses

Participant 3 was a 27-year-old male who wrote that his primary language as he defined it was Arabic-Lebanese. He identified his race/ethnicity as Middle-Eastern. He

rated his English language fluency as "good." He stated that he passed the NCLEX-RN

on a later attempt, and said he was currently working in a hospital specialty unit.

4.6.3.1 Success and Motivation

When asked, "How do you define success?" Participant 3 wrote "success is the

ability to do stuff that one thought they could not do or reach." When asked, "Which of

the things in your definition do you say are most important?" he said, "one had to have a

willingness to reach the highest level of something."

When asked, "What motivates you to learn?" he said it was "human curiosity"

and "progress associated with learning." When asked, "What motivated him to pursue

Nursing as a career?" he said, "it was a profession that was very humane and considered

people precious creatures."

When asked, "What motivates you to continue in pursuit of your goals?" he

shared that his own personal motivation to pursue nursing came after his wife enrolled in

nursing, and he saw her progress in taking care of people. As far as what motivated him

to continue in the pursuit of his goals, he said it was "challenges."

4.6.3.2 Support Systems: Individuals, Groups, Institutional Support Services

When asked, "Was there an individual who played a significant role in your

success?" he said, "Yes". When asked what the individual did he said, "Supported me

when I needed help and assistance." When asked the questions about whether an

individual or group had supported him, he said both faculty and non-faculty gave him

support. When asked, "What role did he or she play?" he said "Guide." When asked "If

that person was a faculty member, what did that faculty member do that differed from

what other faculty members did that you have worked with?" he said, "extra office hours,

more conversation." He also shard that non-faculty provided "a lot of outside resources that made things easier."

When asked, "Was there a group: formal or informal, that played a significant role in your success?" He said, "No." Instructions read, if "No", skip the next section of questions, but he answered them anyway. The next question asked how he would characterize this group, and he selected "family." When asked, "What did the group do to help you?" he said, "assist me financially and support my decisions."

When asked if there were any UT or CON institutional support services that contributed to his success, he answered "No", but then identified three services that he used. They were: "peer tutoring, test taking strategies, and practice tests." He went on to say that he "probably used them once or twice a week", and shared that "they helped me prepare for exams and guide me through clinicals."

When asked, "Can you identify any interactions with faculty that played a role in your success?" he said "No." There were no additional comments were made in this section. When asked, "Were there any times that faculty did things that hindered or interfered with you learning?" he said "No", and also did not make any other comments in this section.

4.6.3.3 Language Factors and Nursing

When asked about language factors and ways "not having English as a first language may have affected your work as a nursing student?" he shared that a lot of times he could not understand what a teacher was talking about even though the rest of the class did understand. He shared that "sometimes comprehending ideas takes time" and that sometimes he "kind of have to translate it to Arabic before English."

When asked, "What are your thoughts about being a nurse who speaks more than one language?" He stated that he felt like a "grateful resource to his floor." When asked, "Are there aspects of patient care and/or the professions of nursing that could be impacted by nurses who are multi-lingual?" he said "Yes." When asked, "What are the aspects?" he said "the motivation to learn." When asked, "What could successful multi-lingual nurses bring to the practice of nursing?" he said, "educational tools, confidence in the patient-provider relationship."

4.6.3.4 Faculty Support Impressions

When asked, "Can you discuss your impressions of effective faculty support for ESL students?" he wrote, "Whenever we had exams, they provided extra time if needed."

When asked for "any suggestions for faculty working with ESL nursing students that might help these students succeed", he suggested, "Let them ask questions during exams if they don't understand a word." He shared that he could not recall "an exam during nursing school where I didn't miss a question because I couldn't understand a word in the question."

4.6.4 Participant 4 Responses

Participant 4 was a 37-year-old female whose primary language was Vietnamese. She identified her race/ethnicity as Asian. She rated her English language fluency as "satisfactory to good." She stated that she passed the NCLEX-RN on her first attempt, and she was currently working in a hospital inpatient setting.

4.6.4.1 Success and Motivation

When asked, "How do you define success?" Participant 4 wrote that she defined success as "to get the goals" or "what I got when I worked hard to get that target."

When asked, "Which of the things in your definition do you say are most important?" she said, "career, and happiness."

When asked, "What motivates you to learn?" she said she wanted "to get a better life", "…more money, my child will be taken care of better."   And when asked, "Can you describe what motivated you to pursue nursing as a career?" she said she wanted to "help people especially the population whose language was not English." She also shared that she had "a bad experience with the health care service", and she wanted to become a nurse to "make a change for my patients."

When asked, "What motivates you to continue in pursuit of your goals?" she gave several answers. She said she wanted to "help people and specifically to help my family who could not speak English", and valued the times "when I received the happiness and thankfulness from my patients and their families."

4.6.4.2 Support Systems: Individuals, Groups, Institutional Support Services

When asked, "Was there an individual who played a significant role in your success?" she identified her "husband, parents, and instructors." When asked what kind of support she received, she said they supported her "finance and spirit", and that they "took care of my child and me so that I could have more time to focus on studying."

She specifically shared that "some faculty was so nice" and they not only "helped me to understand my lessons, but went further to my life and encouraged me not to give up on my goals. They even showed me some ways to get through it."   She also said the faculty gave her support and "guided her not to give up her plan because of the language barrier."

When asked, if there were any UT or CON institutional support services that contributed to her success, she shared that she used the "Writing Center." She said she needed help with writing "whenever I had to write papers", and said she used it 4-5 times each semester for about 30 minutes each time.

When asked, "Can you identify any interactions with faculty that played a role in your success?" she said that she shared with them her personal life and problems. She said they helped her "find a way to continue to work hard, not give up when struggling." She also shared that faculty members gave her support "not only in lectures, but also my future goal that I shared with them", and she said that "because of their advice I did not give up my goal."

When asked, "Were there any times that faculty did things that hindered or interfered with your learning?" she said "Yes", but then she said, "when they gave us the examples to illustrate the lectures" and that "made me memorize the materials better which are very helpful when I start working." These examples showed she did not understand the word "hindered", because the examples were positive things that faculty had done to support her.

4.6.4.3 Language Factors and nursing

When asked about language factors and ways "not having English as a first language may have affected your work as a nursing student?" she shared that it took her "plenty of time to understand the same lecture" as other students and that many times in class she "did not understand things that were mentioned." She said she had to "spend double or even triple time to study the material." She shared that "if something was not written down as in class discussion", she missed many of the important parts that she did

not know. And she said the other students' notes were "not easy to read, because they may not need to write them down since they understood and remembered them already."

Also in a test ESL students "might not understand the word meaning, thus we got the wrong answer even we knew that material." She shared that "Due to language factors, it takes ESL students more time to write papers and many more errors in punctuation, wring words, grammars…" In general, the ESL students "do not understand all the materials that the instructors discussed in class."

When asked, "What are your thoughts about being a nurse who speaks more than one language?" she stated that, "I am patient and willing to repeat the materials with patients whose primary language are not English since they may take time understand or need the other words to know the meaning." She also shared, "there are many patients complained my pronunciation as well as if I ask them to explain to me again about what they said." When asked, "Are there aspects of patient care and/or the profession of nursing that could be impacted by nurses who are multi-lingual?" she said "Yes", and that, "It makes more diverse."

When asked," Looking forward as a practicing nurse, what could successful multi-lingual nurses bring to the practice of nursing?" she shared that successful multi-lingual nurses helped populations who could not understand English feel "more comfortable and also help to bring diversity into the practice."   Also by "speaking different languages, may help patients whose language is not their first language." She wrote about a disadvantage in that they "may not understand all of the conversations among patients, health care providers, co-workers…"

4.6.4.4 Faculty Support Impressions

When asked, "Can you discuss your impressions of effective faculty support for ESL students?" she said that effective faculty working with nursing students "made the students feel more confident and made them think they could do it." She identified impressions of faculty support noting a need for them to be "patient to hear feedback" from ESL students and said it would be helpful if they would "forgive some mistakes from writing papers." She also shared she preferred, "using multiple choice instead of fill in the blank or writing."

When asked for "any suggestions for faculty working with ESL nursing students that might help these students succeed", she made several suggestions including having them "post audio with sub-titles so that they can review if needed." She also shared that some faculty were helpful once she shared that English was her second language, but others "assumed that my English MUST be good as other students" and then said that was "not fair." She shared that she wished they could imagine how hard it would be to "study their degree in different languages." She also shared that it would be important to "express their support for the students so that they can be success and give the best support to go over the difficulty."

A specific request was that "If the lecture has both audio and notes, it will be perfect, because sometimes we can hear what the instructions are saying. It is not because we did not pay attention in the lectures, but because we did not understand/follow what they were talking about!"

Participant 4 expressed that it was important for faculty to express their support to the students and for the ESL students knowing that faculty supported them was helpful. This quote corresponded with Shelton's (2003) study of the role of perceived faculty

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support and its relationship to student retention. This study found that students who perceived that they had faculty support were found to be more successful.

4.6.4.5 Additional Comments

When given a chance for additional comments, Participant 4 added that she believed that "all faculty members know the information of the second language issue." She suggested providing a plan "to help the students if they come and ask for help, instead of showing them to a different department for help."

4.7 Non-ESL Participants' Responses

Six participants who had English as their primary language completed the questionnaire. It was unclear why they completed the questionnaire, since they were advised in the invitation to self-identify as ESL to be considered a part of the target population. With this study specifically focusing on the lived experiences of ESL novice nurses, it was decided to disregard the non-ESL participants' completed questionnaires, set them aside for possible future examination, and focus only on the ESL participants' responses.

4.8 Evaluation of Qualitative Data across the Research Questions

In the style of qualitative analysis, the findings of this phenomenological inquiry were described in the following pages. This method gave me a chance to examine the lived experiences of four ESL novice nurses through a review of their written interview responses. The gathered responses to these questions reflected experiences from a handful of participants and began to help the researcher understand what members of this population experienced on a regular basis. What we know is that there is so much to

learn and so much more work to do to improve how we work with and find new ways to support the success of this at-risk population.

In the following section I summarize the responses to provide an answer to each research question with sub-questions. After addressing the specific research questions, I identified themes that emerged as I reviewed the participants' responses to the questions and sub-questions. Since faculty support was discussed in Research Question 2, and Research Question 5 primarily addressed faculty, I will talk about responses to questions related to these two research questions together.

4.8.1 Discussion: Research Question 1

Research Question 1 asked: "What things do ESL novice nurses identify as most important and contributing to their success, and how do they rate them in importance?" Participants' responses that answered Research Question 1 were those responses to questions 1, 2, 3, 4, and 5 (See Appendix A).

Research Question 1 investigated what the ESL novice nurses believed to be most important to their successes. When asked what was most important, the views of success solidly emerged with equal emphasis on reaching the goals (eg. "reach the targets"), and enjoying the journey along the way (eg. "happiness").

When digging into what motivated these ESL nurses to succeed, two ideas emerged. The first idea was participants' personal desire for self-improvement. Responses supporting this idea were: "desire to better myself", "push myself to be better than I was", "and "compare myself with myself, not others." Another definition of success was having the desire to make a better life for themselves and for others in their

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lives. Examples from participants supporting the importance of success were: "to make a better life for myself", "to make a better life", and "my child, take care of better."

In the next section participants identified what motivated them to pursue nursing as a career. Participants shared responses that gave their definitions of success, motivations for success, importance of success, and what motivated them to continue in the pursuit of their goals. Participants shared that they valued helping people, enjoying the process, improving health care, facing and addressing challenges, and helping their family members who did not speak English.

4.8.2 Discussion: Research Question 2 and Research Question 5

Research Question 2 asked: "How do ESL novice nurses describe their support systems; were there individuals and/or groups that played a major role in their success?" Participants' responses that answered Research Question 2 were those responses to questions 6 -14.

Research Question 5 asked: "What are ESL novice nurses' impressions of faculty support?" Participants' responses that answered Research Question 5 were those responses to questions 18 – 23, 29, and 30.

4.8.2.1 Combining Content: Research Questions 2 and 5

The questionnaire was designed with general to specific questions to encourage participants to answer questions without being led in any particular direction. Some participants discussed faculty support in their responses to questions 6 – 14 associated with Research Question 2, and some discussed it in their responses to questions 18 – 23, 29, and 30 associated with Research Question 5. Faculty support was asked about separately and specifically in questions 18 – 23, 29 and 30 associated with Research

Question 5 in case participants failed to mention it in their responses to questions 6 – 14 associated with Research Question 2. For purposes of data analysis, I am combining the responses to these questions associated with Research Questions 2 and 5 since they are all responses addressing the participants' views about faculty support.

Research Question 2 encouraged the participants to discuss any and all of their support systems including both individuals and groups that helped them succeed. In all cases the participants identified family members as their main sources of support and shared a myriad of ways their families supported them.

Research Question 5 examined the participants' views on impressions of effective faculty support, and several ideas surfaced. Examples of ways support systems helped participants included providing basic needs, personal support, inspirational support, and challenging them to work hard and succeed.

First family supporters met their basic needs. Examples of their responses were providing: "financial help", "he (husband) worked so I didn't have to work", "…care for my child so I can study." A second type of support that was mentioned as being important was personal support. Responses supporting this point were: "supported me when I needed help", "helped me", "supported me in difficult times." Participants also stated the importance of receiving inspirational support. Supporting statements were: "believed in me", "mentor", and "inspired me." Finally, the need to be challenged to work hard and succeed was identified. Example statements supporting this idea of support were: "challenged me when I got comfortable", "made me know the sky is the limit", "made me know I have a lot to learn."

The only group that was identified as being a support group was the family group. The family support system was found to support their decisions, give encouragement, and provide financial support.

In their student-faculty interactions the faculty that were discussed as being most helpful were those in which the faculty members helped them with classwork and helped them work towards their goals (eg. "spent time with me and helped me understand", "provided more office hours", "helped me understand my lessons"). One participant said:

> One time a faculty member told me that I will not be successful in her class due to lack of nursing experience. I felt unwelcome in her class. She made me doubt myself. And that my work history will affect my studies.

Another participant provided an example of a positive way faculty had supported the students:

> The faculty member that helped me a lot said to me that if you have a goal you want to achieve, then there is no stopping you. If you want something so bad, then there can never be a challenge so hard to overcome. They taught me to believe in myself, and they believed in me when I had lost faith in myself. They were constantly supportive, encouraging and challenging- teaching me not to settle for anything less. And going above and beyond to ensure student success.

Participants identified ways faculty played a role in their success. Examples of faculty support shared by participants included: "supported me in lectures", and "made me memorize materials better; very helpful when I started working." Other comments were related to faculty helping them work towards meeting their goals. Examples included: "because of their advice I did not give up my goal", "supported my future goals that I shared with them", and "encouraged me not to give up when struggling."

Several of the participants' comments showed they valued the support of the faculty. As a group, the faculty was not mentioned as a support system, but individual

faculty members were found to be supportive and examples of faculty activities that provided support were identified.

Other ideas that surfaced in answers to questions associated with Research Question 5 were: a need for patience and consistency working with ESL nursing students (eg. "be patient and hear feedback from the ESL students"), a need for challenges and motivational support for ESL (eg. "challenge ESL students to aim high"), and a need for individualized strategies for testing. Examples of these suggested strategies were: "use multiple choice tests instead of fill in the blanks or writing out answers", and "provide extra time if needed for exams."

When asked for specific suggestions for ways for faculty to effectively support ESL nursing students, responses were grouped into three categories. They were:

> 1) Show empathy for the student experience (eg. "tell faculty members to imagine how hard it would be for them if they had to do this; to study something in another language").
>
> 2) Supply written materials to accompany audible learning materials (eg. "post audio with subtitles so they can review if needed").
>
> 3) Use individualized strategies to support success on exams (eg. "every exam I missed a question, because I didn't understand a word").

4.8.3 Discussion: Research Question 3

Research Question 3 asked: **"**Do ESL novice nurses identify any educational services that effectively met their learning needs and helped them succeed?" Participants' responses that answered Research Question 3 were those responses to questions 15 – 17.

Research Question 3 sought information about any educational services that ESL novice nurses identified as effectively meeting their educational needs. When questioned

about existing services, several of the ESL novice nurses shared that they used several of these services on a regular basis when they were students. This showed that even in this small group of ESL novice nurses, there was regular and deliberate use of the available services. It came to light in the information gathering that one of the ESL novice nurses did not know of services that were available, so exploring ways to help students be better informed and given access to resources would also help support their success.

Among those used were peer tutoring, online support, practice tests, test taking strategies, practice tests, and the writing center. Details were shared about frequency and usage, and these participants shared that these services were helpful to them, particularly when preparing for exams or when completing a written assignment. One of the four participants said she did not use any services. The other three named a variety they used. The specific theme of institutional support surfaced here as a subset of the Support theme, and participants were all aware that there were services available.

Regarding the use of supportive services by ESL students, several articles noted this as being a key to success for this population. The demonstrated use of academic support services compares with a study done by Higgins (2004) to determine whether there was a relationship between academic performance and retention among at-risk students enrolled in a medical-surgical nursing course. A group of students who participated in a peer-tutoring program was compared with a group of students who did not participate in the program. The results indicated that with early intervention and identification of at-risk students, their participation in a peer-tutoring program successfully reduced their attrition rates.

4.8.4 Discussion: Research Question 4

Research Question 4 asked: "What are the language factors that ESL novice nurses identify as being important?" Participants' responses that answered Research Question 4 were those responses to questions 24 - 28.

Research Question 4 examined the language factors that the ESL novice nurses believed to be important. These questions explored the students' experiences about how not being able to speak English as their primary language may have affected their work as a nursing student. Participants shared experiences with having problems with word recognition, needing more time to process things, and having difficulty understanding the spoken work in class.

Participants responded to questions about language in their educational experiences in a number of ways. Their responses related to sharing problems with word recognition included: "always a word I didn't understand on a test and this slowed me down", and "we might not understand a word meaning on a test, so we got it wrong even when we knew the material." One student suggested that it would be helpful for ESL students to be able to use "dictionaries in tests."

Another common experience among these ESL participants was that they shared experiences of needing more time to process things. Example statements supporting these experiences were, "took more time to understand the same lectures", "comprehending ideas takes time", and "we might have to spend double hours to learn materials."

Other issues related to difficulties with language and difficulty understanding the spoken word in class were: "if it's not written down in class discussion, I missed many important parts I did not know", "I couldn't get what the teacher was talking about, yet

all the class did a lot of times", and "ESL students do not understand all the materials

instructor discussed in class." There were many more supporting statements so it seemed

that this research question stimulated a lot of thoughts and ideas explaining ways the ESL

students struggled to learn.

When asked about their thoughts about being a nurse in a clinical setting who

spoke more than one language, both benefits and disadvantages were identified. Benefits

included being multi-lingual would be helpful to ESL patients (eg. "helps patients who

speak a language other than English") and helpful for hospitals ("I am a grateful

resources for my floor").

A disadvantage was identified that at times there might be difficulty

understanding during interpersonal interactions due to the ESL nurse's accent (eg. at

times people have a hard time understanding ESL nurses, because of the accent").

On the other hand, these ESL novice nurses when asked about aspects of patient

care that could be impacted by multi-lingual nurses said that nurses who were multi-

lingual could help patients (eg "stay with patients and explain difficult medical

terminology"), and increased the trust between patients and nurses ("eg. give the patient a

sense of trust") noting that it depended on the language needs. For example, if the patient

was Spanish speaking and a Spanish speaking nurse was available, this could improve the

interactions and understanding between the patient and the nurse (eg. "if it is Spanish,

patients sometimes feel that multi-lingual nurses understand their thoughts without

having to translate into English").

Having multi-lingual nurses also increased diversity in the practice (eg. "getting

rid of some of the common stereotypes about the culture"). The participants shared that

they believed that multi-lingual nurses brought several things to the practice of nursing. Multi-lingual nurses improved the understanding between different cultures (eg. "increase understanding of different cultures"), improved the comfort level of the ESL patient population (eg. "patients will be better able to discuss plans of care and become more educated"), and helped to improve the health care environment (eg. "contributes to bringing diversity to the patients").

One student talked about an instructor who took the time to let students do practice interviews and said that this ultimately helped her get hired into her first nursing position. However, one of the ESL students, when asked to identify impressions of faculty support and asked, "Can you discuss your impressions of effective faculty support for ESL nursing students?" answered:

> There is no support for ESL students that I have encountered throughout my studies. Maybe ESL help is not advertised enough, and this is a reason why not many students know about services that are available to those students.

Following this question, "Do you have any suggestions for faculty working with ESL nursing students that might help these students succeed?", one of the suggestions given was:

> There should be a program that is developed exclusively for ESL nursing students, to help them with language proficiency, communication skills, group work that include public speaking. I had a lot of trouble with public speaking since I have a strong accent and I was afraid that my peers and teachers would not understand me. Developing support groups for ESL students to help them integrate into American culture and build their confidence. I believe that program like this can be very beneficial to ESL nursing students and faculty can be prepared to work with ESL students and optimize their learning experience.

4.9 Identified Themes across the Research Questions

In the above discussion of the responses to questions associated with Research Questions 1 – 5, several themes were identified, and evidence of these themes surfaced in participants' responses throughout the questionnaire.

A theme of **motivation for success** (Theme 1) surfaced in responses to questions associated with Research Question 1. Some of the statements that reflected this theme were participants' statements about valuing: "the accomplishment of great things", "crossing the finish line", "willingness to reach the highest level of something", and "when I work hard to get that target."

Related to this theme of motivation for success were responses of participants about valuing the journey itself and participating in their learning experiences as they worked toward achieving their goals. Examples of these supportive responses were: "success is about the journey", "…the end result of attaining the goal should not be more important than enjoying the journey along the way…", and "…the ability to do stuff one thought they couldn't do or reach…"

A theme of **support** (Theme 2) was noted in responses to questions associated with Research Question 2 about ways their families and others supported them. When asked about the role of faculty as a support system in Research Question 5, the **support** theme (Theme 2) surfaced again showing. They noted three ways faculty had supported them: helping them with setting goals (eg."if you have a goal, nothing is stopping you") , working toward meeting those goals (eg."they showed me some ways to get through it"), encouraging them to believe in themselves (eg. "believed in me when I didn't"), and

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helping them with their educational goals (eg. "spent time with me and helped me understand").

Responses to questions associated with Research Question 3 about the participants' use of academic support services also aligned with the theme of **support** as these ESL participants gave responses to related questions sharing that they valued and used academic support services.

A third theme identified was **Desiring to be a part of a caring profession** (Theme 3). Responses to questions associated with Research Question 3 that reflected this theme were: "help people", "consider people precious creatures', "make a difference in the lives of people", and "unlimited opportunities to make a difference in people's lives."

A fourth theme that emerged was **ESL Language Issues: in school and in patient care** (Theme 4). This theme was carried through participants' responses in questions related to Research Question 4 showing that they valued ESL and multi-lingual nurses as well as shared their struggles learning in a language other than their native language. Responses were given related to their experiences as nursing students and their clinical experiences caring for patients. These and other comments also aligned with the earlier noted theme of **Desiring to be a part of a caring profession** (Theme 3).

Chapter 5

Discussion and Conclusion

The previous chapter contained a detailed discussion about ways the four ESL participants answered the research questions and sub-questions and identified four themes that were noted in reviewing their responses. In exploring their responses and looking for similarities, several overall themes emerged that represented the thematic findings of this study. They were:

1) Theme 1: Motivation to work hard and succeed
2) Theme 2: Support: Relying on family and others who helped them succeed,
3) Theme 3: Love for people and desire to work in a caring profession
4) Theme 4: The Importance of having ESL and multi-lingual nurses in health care

Findings of this qualitative study have begun to look into the lived experiences of being ESL novice nurses going through their baccalaureate nursing education program speaking a primary language other than English. These themes were used to explore ways to strengthen this at risk group and suggest ways for faculty to effectively support them as they work toward achieving their goals.

5.1 Thematic Analysis of Data: Meanings and Patterns across ESL Participants'

Responses

As I reviewed the ESL participants' responses I looked for meanings and patterns that represented similarities in thought and focus. My hope in doing this was to identify meaningful similarities to begin to understand their life experiences and what these participants were trying to convey and provide direction for further investigation. I also compared what they said with what I had found in existing research in the hopes of improving the understanding of their lived experiences.

5.1.1 Theme 1: Motivation to Work Hard and Succeed

ESL participants were motivated to work hard and succeed. They believed that reaching their goals was important for their own successes. This goal to succeed echoed earlier research that shares that ESL students are hard workers who are willing to "do whatever it takes" to succeed in their nursing programs (Sanner &Wilson, 2008, p. 811). Participants when asked if they could describe "some of the ways that not having English as a first language" may have affected their work as nursing students shared comments that they might have had to "spend double hours to learn materials", and that "it took me plenty of time to understand the same lecture", that she had to "spend double or triple time to study." These comments reflected a theme of having a strong work ethic and being willing to work for what they wanted to achieve in these four ESL participants.

Interestingly in other research, the desire for success and the person's drive to succeed is affected by their internal or external locus of control. Responses of participants to the question asking them what motivated them to "continue in the pursuit of their goals?" or what motivated them to "pursue nursing as a career?" included a

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variety of motivators. Some shared that they desired to succeed to "get a better life",

wanted to "help people and my family who could not speak English", or "to have a better

life (more money, my child will be taken care of better)." These responses reflected the

internal locus of control as they were sharing they had personal desire to succeed and did

not mention any outside influences or pressure.   Internal locus of control is the belief

that your abilities come from within, from your hard work to develop them, and these

participants shared that they were willing tom work hard and that nothing could stop

them from reaching their goals.

Participants who gave responses such as, "challenges", and "when I receive

happiness and thankfulness from my patients" expressed personal reasons for wanting to

succeed not related to outside pressures. These responses also reflected an internal locus

of control. The four sets of responses primarily demonstrated internal locus of control.

Participants demonstrated an internal locus of control for the most part, by their own

desire to be members of a helping profession reflecting Theme 3 and working hard to get

to their professional goals reflecting Theme 1.   These ESL nurse novices worked hard to

be successful at their own chosen profession. Their levels of locus of control might have

impacted their written responses and provided one means for evaluating their reasons for

wanting to succeed. This suggested a need for exploring the role of locus of control,

whether it be internal or external, and ways it might affect the ESL students' motivation

to succeed.

5.1.2 Theme 2: Support: Relying on Family and Others who helped them Succeed

A second theme noted was that ESL participants relied on their families and

others who had helped them succeed. This included robust responses discussing

individuals and groups that contributed to their successes including a passionate appeal to the faculty for continued help, and identified several strategies for faculty they thought would be helpful.

5.1.2.1 Individuals and Groups that Contributed to their Success

In order to help these at-risk students, faculty must identify who they are and be willing to work with them to meet their goals and address their concerns. Part of the responsibility of educational institutions and faculty members in contributing to students' successes includes identifying students who are at risk for failure and doing everything they can to help them meet their needs and reach their goals (Harris et al., 2014).

Overall the ESL participants identified a variety of supportive individuals and groups including faculty members.

Jeffreys (2015) discussed ways educators who are interested and engaged in helping ESL students can make a difference in their overall performance and success. This student's comments above echo the importance of faculty and educational institutions addressing the needs of this at-risk group. This participant highlighted several ideas of ways this could be done. These ideas are again similar to those discussed in the Jalili-Grenier and Chase (1997) article focusing on the importance of faculty members working with ESL students who played a positive role in ESL students' success in their classrooms, and identifying problems and strategies for addressing these problems which increased the likelihood of these students' successes.

The literature shared that many times ESL student nurses did not speak up or ask questions in class. Highlighting their knowledge and experiences might be helpful in building their self- confidence as well as providing a vehicle of learning for the native

English speaking students and faculty of ways to support this population from the ESL perspective. This shares the views of Bandura (1997) in that students who demonstrate higher levels of self-efficacy have a higher likelihood of succeeding and reaching their goals. Self-efficacy is a belief in one's ability to complete tasks and overcome obstacles.

Sanner et al's (2002) study noted that ESL students needed support in understanding language used in the classroom as well as language used in learning resources in order to be successful in reaching their goals. Carr and DeKemel-Ichikawa (2012) reported that this is particularly the case when ESL students are required to learn and study new material in a language different from their primary language.

If faculty realized the possibility that student success might have been valued differently by members of different cultures, it could have both improved the faculty member's understanding of the student's experience and reminded them to consider cultural sensitivity as they planned their teaching and testing strategies. These students have the added struggle in interpreting the spoken work in class and the written word in text as they are learning all the new things along with other nursing students who speak English as their primary language. For this reason and others increasing faculty awareness of the struggles of the ESL students was thought to be one way to help improve the faculty role in supporting these students. This echoes Jalili-Grenier and Chase (1997) in their studies of the relationship between faculty involvement and ESL student success. They found that supportive learning activities and improving communications between ESL students and faculty members were effective strategies for addressing student learning needs which increased the likelihood of ESL students' success.

Another article reflecting the importance of faculty support and involvement as contributing to ESL student success is an article by Hansen and Beaver (2012) in which they talked about there being a relationship between retention and the perceived support that ESL nursing students received from faculty members. These authors noted four areas of concern that directly influenced the success of ESL students: (a) language, (b) learning models, (c) test taking, and (d) cultural difference. These authors shared that when faculty addressed these four areas, ESL students improved their language skills and likelihood of succeeding. Faculty addressing these four areas helped students improve their: reading, listening, speaking, and writing. This literature aligns with three out of four participants' sharing that they used academic support services such as test-taking strategies and the Writing Center. This information contributed to Theme 2, the providing of support, and Theme 4, the presence of language issues impacting ESL students' learning.

In another article about challenges experienced by community nurses in Norway when addressing the needs of minority patients in home-care situations, researchers found that lack of experience and knowledge of nurses about the diverse patient population negatively impacted the ability of these patients to carry out needed discharge care and achieve outcomes related to discharge planning (Debesay et al., 2014). This supports the need for diverse nurses to be able to interact effectively with patients who are increasingly diverse particularly those with the same background as the ESL nurses.

5.1.3 Theme 3: Love for People and Desire to Work in a Caring Profession.

A third theme that surfaced was participants' responses sharing their love for people and a desire to work in a caring profession. In reviewing the responses of the ESL

participants, it could be seen that there was a theme of caring in meeting the needs of other ESL students, nurses, and patients, and this was reflected in participants' responses to Research Questions 1 and 4.

There was a general holistic connection between the ESL novice nurses and other people who were struggling with language and learning with the added stress of not knowing the language as a native speaker.   Their desire to be a bridge or improve the communications and provide the best possible care all reflected the general theme of caring for others like themselves who struggled with language and communications (eg. "wanted to make a difference in the lives of other people").

Olson (2012) examined ESL nursing student success in her literary review and highlighted facts according to the Sullivan Commission (2004) that diversity in healthcare has become a national problem, because approximately 25% of the U.S. population was comprised of minorities, while minorities comprised only "9% of nurses, 6% of physicians, and 5% of dentists" (p. 26). This comparison reflected the need for an increase in diverse nurses as the diversity in the U.S. increases.

In another article about an investigation into how cultural competency is developed in student nurses, Brown (2001) stated that three categories of competency were necessary for the effective educator who values and engages students in cultural diversity in patient care. These categories are: (a) communication, (b) diversity appreciation, and (c) learning.   One of the ESL novice nurse's gave the following response that reflected appreciation for diversity and the willingness to help patients by improving communications with patients who have:

> … a difficult medical condition to understand, multilingual nurse can be a great help. The nurse can stay with the patient and explain difficult medical terminology. Patient will have a sense of trust and one-to-one interaction can be beneficial to the patient and their family.

This recognition that ESL nurses have a role in helping patients who have difficulty understanding medical terminology shows an appreciation for cultural competency. Increasing students' knowledge and abilities in the provision of culturally sensitive care includes all three of these competencies as these students begin their role as care providers for an increasingly diverse patient population.

Along the same lines Kurz (1993) noted that as the general population in the U.S. becomes more diverse, there is a need for the student nurse population to also become more diverse which would result in a more diverse population of nurses. Kurz suggested using methods such as case studies, questionnaires, and simulation to support student success and correlate communication with cross-cultural adjustment improving their basic language skills.

5.1.4 Theme 4: The Importance of Having ESL and Multi-lingual Nurses in Health Care.

A fourth theme that surfaced in the review of the responses of the ESL participants was that they shared recognizable need and recognition of the importance of ESL and multi-lingual nurses in health care for the betterment of the patients and the patient care environment. This is also related to Theme 2, because these participants want to be a part of a caring profession.

Suggestions were made by ESL participants that faculty should show empathy for ESL student nurses by trying to put themselves into their shoes and imagine what it

would be like to have to learn something in another language than their primary language. It was also suggested that faculty members supply written notes to accompany audible lessons as well as providing individualized support for success on exams. Some examples of this that were shared were: "allowing ESL students to ask questions if they did not know a word during an exam", "allowing additional time to complete exams if needed", and/or "allowing ESL nursing students to use dictionaries during exams." Several participants shared that they knew they missed at least one question during each exam that they had taken due to not knowing a word meaning.

Olson (2012) studied the effects of varying cultural backgrounds and practices on learning and reaching goals. Olson suggested that in many cases cultural conflicts presented barriers to learning. She noted that second-language learners are often more comfortable with the written word than the spoken word.

One suggestion might be for faculty to utilize the ESL students to share with the class things that they experienced and ways nurses could make a difference showing more support and empathy for ESL students, nurses, and patients. They could serve as resources for the native English speaking students and faculty. In this way the class could benefit from the specific knowledge of ESL student nurses. According to Gilchrist and Rector (2007) in their article discussing affective strategies for attracting and retaining diverse nursing students, it is important to encourage ethnically diverse men and women to enter the field of nursing to better serve an ever-changing and more diverse patient population in the U.S.

5.2. Implications for Faculty

Through increased understanding that ESL students rely on family support, have a holistic desire to do good for the welfare of their patients, and value the role of ESL nurses, faculty could use these general themes to seek to improve their cultural sensitivity as they plan their teaching and testing strategies. In the Brown (2001) article it was discussed that researchers suggested that faculty members who expressed an appreciation for diversity as a norm within society likewise reflected the importance of improving patient outcomes and recovery potential through increasing their understanding of patient needs. With the U.S. becoming increasingly diverse and there being a demonstrated need for more diverse nurses, the need for success of students in this population is needed.

By improving the understanding of ways to address the ESL students' struggles and heightening the awareness of the struggles of ESL patients and other nurses, all nursing students' experiences and their ability to understand and relate with patients' experiences and struggles could be improved. Due to the increasing diversity in the work force, learning ways to improve communications between people who were ESL and native English speaking was found to be a necessity and will be even more common in days ahead.

Another suggestion would be to involve ESL student nurses in class to help in the development of cultural understanding of other more traditional students. This can be especially effective if the faculty can use ESL nursing students in positive ways to share about and stimulate discussion about the important communication issues, and once in a while acknowledge their expertise in dealing with a non-native language. Just having the ESL students there makes for better learning experiences for all.

Generally, the ESL novice nurses shared that they received a great amount of support and help from their own families. They noted that individual faculty members provided support, but that overall, they did not see the faculty as a supportive group. To help these students succeed, it might help faculty to know that they define success as both achieving their goals and as embracing the path; enjoying the journey. As the nursing students progressed through their baccalaureate programs, they could begin to experience successes by their own definition as they began to experience the caregiver role during clinicals as they took care of patients. And maybe this is something to keep in mind for all students, the need for recognition for good work when they are in clinicals as well as pointing out mistakes.

As these novice nurses explained their impressions of faculty and suggestions for improving faculty interactions, they provided feedback that could be used to help increase nursing faculty understanding of their experiences. By reviewing the novice nurses' responses on these written interviews, nursing faculty could begin to improve their effectiveness working with this population of students, and find ways to individually make a difference and increase the levels of success of this at-risk population of nursing students.

5.3 Recommendations for Faculty.

With knowledge of the current situation and the increasing need for ESL nurses in the future, faculty must recognize and address strategies to improve the success rate for these at-risk students. Sanner et al's (2002) study noted that ESL students needed support in understanding language used in the classroom as well as language used in learning resources in order to be successful in reaching their goals.

Through increased awareness of stresses and identified struggles, faculty could begin to address ways of improving their success. Several examples were given by these participants such as allowing dictionaries during tests, and making arrangements for ways language questions/word meanings could be asked during an exam.

My method of using a written interview format allowed the participants to complete their questionnaires in a relaxed setting at the time of their own choosing, and allowed them to use the written format of communicating that is known to be more desirable for ESL participants compared with the spoken word method (Carr & DeKemel-Ichikawa, 2012). This method was also convenient for me in that it provided me with written data for interpretation avoiding me having to transcribe audio or video tapes.

Through careful planning and resource utilization, new ways of teaching and could be trialed and explored. Jeffreys (2015) wrote about adapting teaching methods as one way of taking into consideration students' cultural values and beliefs. His retention model for nursing students indicates that self-efficacy and motivation play a large role in predicting students' success and helping them make strides toward meeting their goals when partnered with nurse educators who are aware and engaged in teaching and learning.

It should be noted that nursing faculty members who modeled successful practices provided support for and influenced ESL students' learning. Research with nursing students from diverse backgrounds indicated that faculty members who demonstrated enthusiasm, caring, knowledge, and the ability to engage with learners had a positive influence on their students' learning potential (Williams & Calvillo, 2002).

One suggestion given might be for faculty to utilize the ESL students to share with the class things that they experienced and ways nurses could make a difference showing more support and empathy for ESL students, nurses, and patients. They could serve as resources for the native English speaking students and faculty. In this way the class could benefit from the specific knowledge of ESL student nurses such as developing some empathy for dealing with non-native languages and perhaps differences in family dynamics in different cultural groups. The literature shared that many times ESL student nurses did not speak up or ask questions in class. Highlighting their knowledge and experiences might be helpful in building their self- confidence as well as providing a vehicle of learning for the native English speaking students and faculty of ways to support this population from the ESL perspective.

Suggestions were made by ESL participants that faculty should show empathy for ESL student nurses by trying to put themselves into their shoes and imagine what it would be like to have to learn something in another language than their primary language. It was also suggested that faculty members supply written notes to accompany audible lessons as well as providing individualized support for success on exams. Some examples of this that were shared were: "allowing ESL students to ask questions if they did not know a word during an exam", "allowing additional time to complete exams if needed", and/or "allowing ESL nursing students to use dictionaries during exams." Several participants shared that they knew they missed at least one question during each exam that they had taken due to not knowing a word meaning.

5.4 Future Directions for Study

Clearly these novice nurses shared the appreciation of their families supporting them, their love of people, and their desire to work in this helping profession. (eg. "wanted to make a difference in the lives of other people", and "valued parents and family that supported me financially and supported my spirit.").

With the ESL students emphasizing the importance of family members as contributors to their successes, it suggested the need for further investigation about the ways family members helped them succeed. It might have been that not only were the ESL student nurses appreciative of their families' support, they might have also been expected to succeed by their families due to their locus of control lying in their parents' expectations that they succeed in their education (Wood et al, 2009). Depending on their cultural background, their inability to succeed might be thought of as dishonoring their parents' wishes and expectations for their success. Varying cultural beliefs about the importance of success in college might have played a role in the ESL students' stress and demonstrated a possible need for increased faculty support in order to understand and accommodate for their individual situations and responsibilities. This increased awareness of varying family dynamics and the ESL students' desires for approval from their family could help to explain some of the stresses the ESL students were under that might be different from the native English speaking students. Experiences shared in ESL responses suggested this in that there was a high reliance on family noted as well as a desire to do good for their patients.

The importance given to family support is noted to be higher in ESL than in more traditional students. A cultural difference seen is that the ESL nurses seem to embed themselves more in the family and family roles and connections are much more part of

the person's identity than is typically found in American students. ESL students appear to have a definition of self or a personal identity which includes family and one's position in the family as more important than typically found in American students. This has an impact on and shows a tendency for these students to have a good understanding of a more diverse group of patients and their families, too.

These findings suggest there is so much more work to do. ESL novice nurses shared that they rely on family, they value doing good, and they desire to support their own ESL population. This poses questions in my mind about what the impressions and struggles of other ESL professionals are who are also working with patients. RNs work closely with other professionals in the provision of patient care with more and more inter-professional activities in which nurses, doctors, therapists and others all come together for the good of the patients. Can we improve the care to our patients by improving our ability to communicate with one another? And then can we improve the way other ESL professionals interact with ESL patients by increasing their understanding of the ESL patient experience?

With the U.S. becoming more diverse, there is likelihood that the patient population as well as nurses, doctors, therapists and others are all becoming more diverse. So, improving interpersonal communications among these groups would help to ensure safe and appropriate patient care. This opens the door to the exploration of all kinds of studies to examine and find ways to improve interactions between members of the health care team with each other and with their patients.

It would be interesting to examine the interactions between the ESL medical professionals and their patients whether they were ESL or native English speakers.

How does this language factor fit into the overall picture of the provision of care? Are there potentials for improving patient care with increasing the awareness of ways ESL and native English speaking patients think and identify concerns? With diversity on the rise, the time is now to improve the understanding of members of the health care team about the ESL experience whether it is from the perspective of being a member of the health care team or from the perspective of being a patient.

5.5 Methods for Further Research

It was my desire to provide a platform for the collection of information that would be the most effective and limit the amount of stress and interference for the participants allowing them to answer the questions in the most supportive and comfortable setting. For this reason and others, I chose the written interview format. Examples of areas the ESL students struggled with included "interpretation and use of eye contact, gaze, posture, gestures and proxemics" (Carr & DeKemel-Ichikawa, 2012, p. 80). Due to these factors and others, these authors also found that ESL students were more comfortable communicating in writing as opposed to speaking.

Upon review, I see there were aspects of the information collection that could have been improved by my being present with the participants as they were answering the questions and writing out their thoughts. An example was the misunderstanding of the word "hindered" by one of the ESL participants. I could have easily recognized that the participant was not familiar with the word and provided a definition on the spot which would have clarified her response.

The participants not understanding words or meanings of the questions could also have been addressed by providing a discussion board for participants to interact with one

another during the completion of their interview questionnaires with or without me as a member of the discussion board. This would provide for a safe space for participants who could talk about any concerns including any word meanings they were unsure of. Providing a means for participants to ask questions is another way to show support and empathy for ESL participants who may not understand what is being asked.

5.6 Final Thoughts

Flinn (2004) identified characteristics of individuals who have helped ESL students by providing understandable communication and helping them reach their goals. These characteristics included the following: (a) showing personal interest in ESL students; (b) being willing to work together with individuals to help them meet their goals; and (c) demonstrating care for individuals by striving to break through language barriers, reduce anxiety and fear, and improve cultural understanding. Shelton's (2003) study of the role of perceived faculty support and its relationship to student retention found that students who perceived that they had faculty support were found to be more successful.

The results of this study reinforced the need for nurses who come from diverse backgrounds to be successful at passing the NCLEX-RN so they can pursue the career of nursing. And these helpful characteristics can be applied to working with and collecting data from this population during a research study such as mine. I would continue to explore ways to provide a workable system to provide support for participants and give them the opportunity to ask questions that might come up as they were completing their questionnaires.

As far as whether I would use Qualtrics again, I would say yes, but I would suggest identifying a data base ahead of time before planning to use this system. If the data base had been available, the tedious work of creating a distribution list from last known emails would not have been necessary. This would have improved the ease of distributing the study, and there would have been fewer unknowns as far as whether participants received the written questionnaire. This would have possibly increased the number of participants.

I would also provide a discussion board, a chat room, or some other system for optional use by the participants and me for the purpose of answering questions as they came up during the completion of the questionnaire. In the future, this same strategy could be applied to investigate ways to help other at-risk groups of nursing students and increase their chances for success.

5.7 Summary

By improving the understanding of the educational experiences of these successful ESL novice nurses, members of the nursing profession and nursing faculty as a whole may begin to understand the experiences of being ESL students and nurses and help to improve their likelihood of success and support their overall work environment.

With the increase in diversity in the U.S. there is a need for more ESL and non-traditional nursing students to provide for more compassionate care in a complex health care environment. With the national focus on health care there is a need to provide care for all people and to focus care on seeing people as human beings and not just units of cost. Health care is a human right of all people. As I begin my 35th year as a registered nurse, I continue to see inequalities in health care and even in the caring professional of

nursing that is designed to show mercy and care for all. It is with the continued desire to extend a helping hand that I reach out to find ways to help this population of new nurses as I see they are the ones who will make the difference to the scared, the sick, the suffering, and the dying patients who are increasingly different than the main stream of nurses and are ever increasing in numbers. Nurses need to remain open minded and look for ways to help and to improve what we do for the betterment to our patients as we strengthen each other.

In order to recruit and encourage members of this population, nursing faculty must find ways to support their successes, address their concerns, and meet their needs. In this way nursing faculty, nursing leaders, and other members of the health care team can improve their role and support the success of people who have English as a second language. This can also improve the understanding of the ESL experiences of nurses, patients, families, and others who work in health care who speak a primary language other than English, and faculty members may be able to design strategies that more effectively support ESL students' learning, goal achievement, and overall success. This is supported by the work of Hansen and Beaver (2012) who wrote that students who receive attention and encouragement by faculty members who get to know them as individuals and make them feel comfortable experience a greater likelihood of success than students who do not receive personal attention.

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Appendix A

Questionnaire

The following questions seek your input about what you believe to be most important and contributed the most to your success in nursing and ask you how you rate these things in importance. Remember when you wrote reflections during your preceptorship and talked about your day working with the RN? This is the type of deep reflective journaling I am seeking in response to these questions.

As you type your responses in the boxes below each question, the boxes will expand and give you as much room as you need. These questions are designed to be open-ended and you are encouraged to write as much as you are comfortable with. This effective response tool will remain open for two weeks. You may come and go to the document as many times as you like, and it will remain open until you click the submit button at which time it will close. This is intended to be done as a written interview, and designed to give you as much time as you want.

Your participation in this study gives me valuable information that can assist me in my goal to address the needs of students just as yourselves and help them succeed. This is important work, and I invite you to share your stories to help the next generation

of English of a Second language (ESL) students navigate the difficult pathways to success in nursing.

Please forward this invitation to friends, colleagues, family members, and others who match the criteria for participating. The participant criteria include the ability to self-identify as: 1) passed NCLEX on the first attempt and 2) speak a primary language other than English. The more responses the better to help gather as much information as possible to examine and begin to understand this lived experience.

Thank you in advance for your help and your participation.

Most important to your success.

1. How do you define success?

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2. Which of these things in your definition do you say are most important?

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Your motivation to succeed.

3. What motivates you to learn?

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4. Can you describe what motivated you to pursue nursing as a career?

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5. What motivates you to continue in the pursuit of your goals?

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Your support system: individuals

6. Was there an individual who played a significant role in your success? (If no, skip to question 11)   **YES**   **NO**

7. If you answered yes to question 6 above, what did he or she do to help you?

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8. What role did he or she play?

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9. If that person was a faculty member, what did that faculty member do that differed from what other faculty members did that you have worked with?

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10. If that person you described was not a faculty member, can you talk about anything that a faculty member did that was helpful that contributed to your success?

Your support system: groups

11. Was there a group, formal or informal, that played a significant role in your success?

(If no, skip to question 15)

     YES   **NO**

12. Would you characterize this group as one of the following?

__ **family**

__ **peer group**

___**something in the curriculum**

___**special services**

___**other**

13. What did the group do to help you?

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14. What role did the group play?

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Institutional Support Services and Interaction with Faculty

15. Are there any University of Toledo (UT) or College of Nursing (CON) institutional

services that you found to be helpful?   (If no services were used, skip to question 18).

YES   NO

16. Would you identify any of the following UT or CON institutional services as having contributed to your success? (mark all that apply)

___**peer tutoring**

___**test taking strategies**

___**on-line support**

___**practice tests**

___**writing center**

___**other**

17. For each service that you noted above as having contributed to your success, please discuss a)the amount of time you spent using that service, c) how often you used it, and d) how you utilized it in your educational preparation.

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18. Can you identify any interactions with faculty that played a role in your success? (If no, skip to question 21.)   **YES   NO**

19. If you answered yes to question 18, please describe these interactions.

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20. If you answered yes to question 18, please discuss how these interactions contributed to your success.

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21. Were there any times that faculty did things that hindered your learning? (If no, skip to question 24.) **YES   NO**

22. If you answered yes to question 21, please describe these interactions.

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23. If you answered yes to question 21, discuss how these interactions hindered or interfered with your success.

<div style="border:1px solid black; height:60px;"></div>

Language factors that ESL novice nurse identify as being important

24. Looking back at the student experience, can you describe some of the ways that not having English as a first language may have affected your work as a nursing student?

<div style="border:1px solid black; height:80px;"></div>

25. What are your thoughts about being a nurse who speaks more than one language?

<div style="border:1px solid black; height:60px;"></div>

26. Are there aspects of patient care and/or the profession of nursing that could be impacted by nurses who are multilingual? (If no, skip to question 28)

___Yes

___No

27. If you answered yes to question 26 above, discuss these aspects and how they could be impacted by nurses who are multi-lingual.

28. Looking forward as a practicing nurse, what could successful multilingual nurses

bring to the practice of nursing?

Things that ESL Novice Nurses identify as impressions of Faculty Support

29. Can you discuss your impressions of effective faculty support for ESL nursing

students?

30. Do you have any suggestions for faculty working with ESL nursing students that

might help these students succeed?

Demographic information about participants

Please share the following requested information in questions 31 – 37 about yourself in

order to help the researcher in the review of the reflective responses given on the

questionnaire.

31. What is your age?

32. What is your gender?

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33. What is your race/ethnicity?

____African American

___Asian

___European

___Hispanic

___Middle Eastern

___Other

34. What was your first language spoken at home when you were a child?

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35. What is your self-assessment of your English language fluency?

___Very good

___Good

___Satisfactory

___Poor

___Very poor

36. Please indicate when you passed your NCLEX-RN.

___on your first attempt

___on a later attempt

___other

37. Please indicate where you are working now in your primary employment, in what type of setting.

___hospital inpatient care setting

___hospital emergency care setting

___hospital specialty unit

___clinic or outpatient setting

___urgent care center

___long term care

___home health care

___currently not working

___other

Thank you very much for your help as I pursue the understanding of the ESL student nurse experience. Please share any other comments you would like to include.

Appendix B

Qualtrics Transcripts of ESL Participants

Participant 1: Russian

Q1. Hello, BSN registered nurses!
Carol Bryan is seeking your help finishing her dissertation and thereby completing her PhD.

Q2.
Introduction
The following questions seek your input about what you believe to be most important and contributed the most to your success in nursing and ask you how you rate these things in importance.

Remember when you wrote reflections during your preceptorship and talked about your day working with the RN? This is the type of deep reflective journaling I am seeking in response to these questions.

As you type your responses in the boxes below each question, the boxes will expand and give you as much room as you need. These questions are designed to be open-ended and you are encouraged to write as much as you are comfortable with. This effective response tool will remain open for two weeks. You may come and go to the document as many times as you like, and it will remain open until you click the submit button at which time it will close. This is intended to be done as a written interview, and designed to give you as much time as you want.

Your participation in this study gives me valuable information that can assist me in my goal to address the needs of students just as yourselves and help them succeed. This is important work, and I invite you to share your stories to help the next generation of English of a Second language (ESL) students navigate the difficult pathways to success in nursing.

Please forward my contact information, carol.bryan@utoledo.edu, to people you know who match the criteria for participating and are interested in being a part of the study. If they contact me, I will send them the questionnaire with the same invitation and instructions you are receiving. The participation criteria include the ability to self-identify as:

1) having passed the NCLEX-RN state board exam, and
2) speaking a primary language other than English. The more responses the better to help gather as much information as possible to examine and begin to understand this lived experience.

Thank you in advance for your help and your participation.

Q42. Most Important to your Success

Q3. Q1. How do you define success?

Success is an accomplishment of great things. In Nursing success is ability to perform your job 100%, be compassionate towards patients and their families and have outstanding performance ratings from your patients.

Q4. Q2. Which of these things in your definition do you say are most important?

Outstanding performance ratings from peers, managers and patients

Q43. Your Motivation to Succeed

Q5. Q3. What motivates you to learn?

My passion for nursing, curiosity in disease process, and being the best nurse who knows what she is talking about. Nothing is worth than having no knowledge of how to respond to doctor's or patient's questions.

Q6. Q4. Can you describe what motivated you to pursue nursing as a career?

Caring for someone who goes through the toughest time of their lives and being there for the healing process is the best part of being the nurse. Not many occupations deal with death and life as close as nurses do. At times at can be very terrifying but for me it can be both: rewarding and scary at the same time. It takes more than a physical labor to be a nurse. I believe nursing is a form of art, it is not just a profession, it is a gift

Q7. Q5. What motivates you to continue in the pursuit of your goals?

I'm currently in the master's program to become a nurse practitioner. My goal is to help my patients before they become critically ill. Prevention and education are the key elements in patient's health. I would like to do more for my patients and this is why I chose to continue my education.

Q44. Your Support System: Individuals

Q8. Q6. Was there an individual who played a significant role in your success? (if no, skip to Q11)

- ⊙ yes
- ○ no

Q9. Q7. If you answered yes to Q6 above, what did he or she do to help you?

My husband played a significant role in my success. He paid for my education while he worked full time and I was able to go to school full time without working anywhere. I was able to concentrate on my school and studies. He supported me in difficult times and never stopped believing in me and my success.

Q10. Q8. What role did he or she play?

He supported me through my education

Q11. Q9. If that person was a faculty member, what did that faculty member do that differed from what other faculty members did that you have worked with?

N/A

Q12. Q10. If that person you described was not a faculty member, can you talk about anything that a faculty member did that was helpful that contributed to your success?

No faculty members really contributed to my success.

Q45. Your Support System: Groups

Q13. Q11. Was there a group, formal or informal, that played a significant role in your success? (If no, skip to Q15)

    ○ yes

    ◉ no

Q14. Q12. Would you characterize this group as one of the following?

    ○ family

    ○ peer group

    ○ something in the curriculum

    ○ special services

    ○ other

Q15. Q13. What did the group do to help you?

Q16. Q14. What role did the group play?

Q46. Institutional Support Services and Interaction with Faculty

Q17. Q15. Are there any University of Toledo (UT) or College of Nursing (CON) institutional services that you found to be helpful? (If no services were used, skip to Q18).

    ◉ yes

    ○ no

Q18. Q16. Would you identify any of the following UT or CON institutional services as having contributed to your success? (mark all that apply)

☑   peer tutoring

☐   test taking strategies

☑   on-line support

☑   practice tests

☐   writing center

☐   other

Q19. Q17. For each service that you noted above as having contributed to your success, please discuss: a) the amount of time you spent using that service, c) how often you used it, and d) how you utilized it in your educational preparation.

> All services were used once a week about 3 hours. Utilized them all for preparation for exams

Q20. Q18. Can you identify any interactions with faculty that played a role in your success? (if no, skip to Q21)

- ○ yes

- ◉ no

Q21. Q19. If you answered yes to Q18, please describe these interactions.

Q22. Q20. If you answered yes to Q18, please discuss how these interactions contributed to your success.

Q23. Q21. Were there any times that faculty did things that hindered or interfered with your learning? (If no, skip to Q24)

- ◉ yes

- ○ no

Q24. Q22. If you answered yes to Q21, please describe these interactions.

> One time faculty member told me that I will not be successful in her class due to lack of nursing experience. I felt unwelcome in her class.

Q25. Q23. If you answered yes to Q21, discuss how these interactions hindered or interfered with your success.

> It made me doubt in myself and that my work history will affect my studies

Q47. Language Factors that ESL novice nurses identify as being important

Q26. Q24. Looking back at the student experience, can you describe some of the ways that

not having English as a first language may have affected your work as a nursing student?

> Yes. Many times I felt that there is always a word that I don't understand while taking a test. This really slowed me down. I wish ESL students were allowed to used dictionaries.

Q27. Q25. What are your thoughts about being a nurse who speaks more than one language?

> I think it is very beneficial that the nurse knows more than one language. It is beneficial for the patient who speaks the same language and to the hospital which hires that nurse. Also bilingual nurses is more sensitive to other religion, language and culture.

Q28. Q26. Are there aspects of patient care and/or the profession of nursing that could be impacted by nurses who are multilingual? (If no, skip to Q28)

- ⦿ yes
- ○ no

Q29. Q27. If you answered yes to Q26 above, discuss these aspects and how they could be impacted by nurses who are multilingual.

> For the patient who has a difficult medical condition to understand, multilingual nurse can be a great help. The nurse can stay with the patient and explain difficult medical terminology. Patient will have a sense of trust and one-to-one interaction can be beneficial to the patient and their family.

Q30. Q28. Looking forward as a practicing nurse, what could successful multilingual nurses bring to the practice of nursing?

> Understanding a different culture, maybe getting rid of some common stereotypes about the culture, understanding that being from a different country doesn't mean that multilingual nurse can't do their job as well as American nurses can based on her language stills.

Q48. Things that ESL Novice Nurses Identify as Impressions of Faculty Support

Q31. Q29. Can you discuss your impressions of effective faculty support for ESL nursing

students?

> There is no support for ESL students that I have encountered throughout my studies. Maybe ESL help is not advertised enough and this is a reason why not many students know about services that are available to those students.

Q32. Q30. Do you have any suggestions for faculty working with ESL nursing students that might help these students succeed?

> There should be a program that is developed excursively for ESL nursing students, to help them with language proficiency, communication skills, group work that include public speaking. I had a lot of trouble with public speaking since I have a strong accent and I was afraid that my peers and teachers would not understand me. Developing support groups for ESL students to help them integrate into American culture and build their confidence. I believe that program like this can be very beneficial to ESL nursing students and faculty can be prepared to work with ESL students and optimize their learning experience.

Q33. Demographic information about participants:
Please share the following requested information in Q31 - Q37 about yourself in order to help the researcher in the review of the reflective responses given on the questionnaire.

Q34. Q31. What is your age?

> 30

Q35. Q32. What is your gender?

> female

Q36. Q33. What is your race/ethnicity?

○ African American
○ Asian
◉ European
○ Hispanic
○ Middle Eastern
○ other

Q37. Q34. What was your first language spoken at home when you were a child?

russian

Q38. Q35. What is your self-assessment of your English language fluency?

○ Very good ⊙ Good   ○ Satisfactory ○ Poor ○ Very poor

Q39. Q36. Please indicate when you passed your NCLEX-RN state board exam.

⊙on your first attempt   ○ on a later attempt   ○ other

Q40. Q37. Please indicate where you are working now in your primary employment; in what type of setting.

○ hospital inpatient care setting

○ hospital emergency care setting

○ hospital specialty unit

○ clinic or outpatient setting

○ urgent care center

○ long term care

○ home health care

⊙ currently not working

○   other   ○

Q41. Thank you very much for your help as I pursue the understanding of the ESL student nurse experience. Please share any other comments you would like to include.

This question was not displayed to the respondent.

Location Data

Location: (41.632507324219, -83.750999450684)

Source: GeoIP Estimation

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Participant 2: Gujarati

Q1. Hello, BSN registered nurses!
Carol Bryan is seeking your help finishing her dissertation and thereby completing her PhD.

Q2.
Introduction
The following questions seek your input about what you believe to be most important and contributed the most to your success in nursing and ask you how you rate these things in importance.

Remember when you wrote reflections during your preceptorship and talked about your day working with the RN? This is the type of deep reflective journaling I am seeking in response to these questions.

As you type your responses in the boxes below each question, the boxes will expand and give you as much room as you need. These questions are designed to be open-ended and you are encouraged to write as much as you are comfortable with. This effective response tool will remain open for two weeks. You may come and go to the document as many times as you like, and it will remain open until you click the submit button at which time it will close. This is intended to be done as a written interview, and designed to give you as much time as you want.

Your participation in this study gives me valuable information that can assist me in my goal to address the needs of students just as yourselves and help them succeed. This is important work, and I invite you to share your stories to help the next generation of English of a Second language (ESL) students navigate the difficult pathways to success in nursing.

Please forward my contact information, carol.bryan@utoledo.edu, to people you know who match the criteria for participating and are interested in being a part of the study. If they contact me, I will send them the questionnaire with the same invitation and instructions you are receiving. The participation criteria include the ability to self-identify as: 1) having passed the NCLEX-RN state board exam, and
2) speaking a primary language other than English. The more responses the better to help gather as much information as possible to examine and begin to understand this lived experience.

Thank you in advance for your help and your participation.

Q42. Most Important to your Success

Q3. Q1. How do you define success?

Success is setting a goal and moving towards to it with a specific plan. I feel that success is not all about achieving the goal set, but actually success is in the journey you begin and complete in the process of achieving the goal. Its like someone running to marathon, you might not have won, but completing the race against all odds is a much bigger success than actually winning. Success is enjoying the journey, completing the tasks against all odds and challenges, and crossing the finish line. Its not all about achieving goals set, but about enjoying the journey that leads you to the set goal.

Q4. Q2. Which of these things in your definition do you say are most important?

Setting goals Driving your self to that goal keeping in mind to not forget to enjoy the journey The end result of attaining the goal should not be more important that enjoy the journey along the way

Q43. Your Motivation to Succeed

Q5. Q3. What motivates you to learn?

The constant desire to better myself. I believing in comparing myself not with others, but with myself which motivates to keep pushing myself to learn and be better than what I was before.

Q6. Q4. Can you describe what motivated you to pursue nursing as a career?

When I started nursing school, I wasn't sure of what I wanted to do exactly. All I knew was I wanted to make a difference in the lives of other people, and when I saw what nurses did and how close they were with their patients, I truly felt that this is where I belong. Nursing is truly the field that has the most closest patient interaction and we have unlimited opportunities to make a difference in people's lives.

Q7. Q5. What motivates you to continue in the pursuit of your goals?

The fact that I want to make a difference in the lives of other people, kept me going against all challenges that came along in the journey. I had a goal to become a nurse, however, I was not too focused on the end goal as much as I was at enjoying the journey. And as I started enjoying the journey of becoming a nurse, I realized that I wanted to do more than just making a difference in the lives of people I interact with. I started looking at how I can better the system in which healthcare is provided. My vision of nursing and my goals changed and thus I started to pursue higher education. Had I been so focused on being a nurse, and making a

difference in the lives of people I interact with, I would have lost the experience learning from my journey. The journey is what motivated me to look beyond one individual patient, and look at a whole community/population and how we as nurses can make a difference at that level.

Q44. Your Support System: Individuals

Q8. Q6. Was there an individual who played a significant role in your success? (if no, skip to Q11)

  ◉ yes

  ○ no

Q9. Q7. If you answered yes to Q6 above, what did he or she do to help you?

  There were a lot a people to helped me along the way, and the biggest help was that they were always there to push me even harder, to challenge me even more when I got comfortable- to make me understand that sky is the limit!

Q10. Q8. What role did he or she play?

  They were an inspiration, they mentored me, they challenged me, which made me feel that I have a lot to learn and that sky is the limit!

Q11. Q9. If that person was a faculty member, what did that faculty member do that differed from what other faculty members did that you have worked with?

  The faculty member that helped me a lot was said to me that if you have a goal you want to achieve, then there is no stopping you. If you want something so bad, then there can never be a challenge so hard to overcome. They taught me to believe in myself, and they believed in me when I had lost faith in myself. They were constantly supportive, encouraging and challenging- teaching me not to settle for anything less. And going above and beyond to ensure student success.

Q12. Q10. If that person you described was not a faculty member, can you talk about anything that a faculty member did that was helpful that contributed to your success?

  N/A

Q45. Your Support System: Groups

Q13. Q11. Was there a group, formal or informal, that played a significant role in your success? (If no, skip to Q15)

      ⊙ yes

      ○ no

Q14. Q12. Would you characterize this group as one of the following?

      ⊙ family
      ○ peer group
      ○ something in the curriculum
      ○ special services
      ○ other

Q15. Q13. What did the group do to help you?

      When I stopped believing that I could attain my goal, they believed in me and encouraged me to be positive.

Q16. Q14. What role did the group play?

      They were very supportive in every way to make sure that when it got tough, I was fighting it out and not giving up

Q46. Institutional Support Services and Interaction with Faculty

Q17. Q15. Are there any University of Toledo (UT) or College of Nursing (CON) institutional services that you found to be helpful? (If no services were used, skip to Q18).

      ○ yes

      ⊙ no

Q18. Q16. Would you identify any of the following UT or CON institutional services as having contributed to your success? (mark all that apply)

      ☐ peer tutoring

      ☐ test taking strategies

      ☐ on-line support

      ☐ practice tests

      ☐ writing center

      ☐ other

Q19. Q17. For each service that you noted above as having contributed to your success, please discuss: a) the amount of time you spent using that service, c) how often you used it, and d) how you utilized it in your educational preparation.

Q20. Q18. Can you identify any interactions with faculty that played a role in your success? (if no, skip to Q21)

- ◉ yes
- ○ no

Q21. Q19. If you answered yes to Q18, please describe these interactions.

Q22. Q20. If you answered yes to Q18, please discuss how these interactions contributed to your success.

Q23. Q21. Were there any times that faculty did things that hindered or interfered with your learning? (If no, skip to Q24)

○ yes ◉ no

Q24. Q22. If you answered yes to Q21, please describe these interactions.

Q25. Q23. If you answered yes to Q21, discuss how these interactions hindered or interfered with your success.

Q47. Language Factors that ESL novice nurses identify as being important

Q26. Q24. Looking back at the student experience, can you describe some of the ways that not having English as a first language may have affected your work as a nursing student?

> Even though English is not my first language, I had learned English all through my education from elementary to high school in an education system outside of US. So I don't believe that not having English as my first language affected my work in nursing school in anyway

Q27. Q25. What are your thoughts about being a nurse who speaks more than one language?

> I believe that it is very helpful knowing different languages, however, people/patients sometimes have a hard time understanding you because of your accent.

Q28. Q26. Are there aspects of patient care and/or the profession of nursing that could be

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impacted by nurses who are multilingual? (If no, skip to Q28)

     ⦿ yes
     ○ no

Q29. Q27. If you answered yes to Q26 above, discuss these aspects and how they could be impacted by nurses who are multilingual.

> It depends on the population you are taking care of. For example if you speak Spanish and you have a Hispanic   patient you are taking care of, it helps a lot in interacting with the patients and their families. Also, I believe that the patients sometimes feel that the provider understands them better as they are able to convey their thoughts in the exact way as they are thinking, without having to translate their thoughts from one language to English.

Q30. Q28. Looking forward as a practicing nurse, what could successful multilingual nurses bring to the practice of nursing?

Q48. Things that ESL Novice Nurses Identify as Impressions of Faculty Support

Q31. Q29. Can you discuss your impressions of effective faculty support for ESL nursing students?

> Being patient with the ESL nursing students is very important, providing them with resources to assist in their success. Once the student finds a level of comfort, it is important for faculty to not only support them , but also push them out of their comfort zone challenging them to aim higher.

Q32. Q30. Do you have any suggestions for faculty working with ESL nursing students that might help these students succeed?

Q33. Demographic information about participants:
Please share the following requested information in Q31 - Q37 about yourself in order to help the researcher in the review of the reflective responses given on the questionnaire.

Q34. Q31. What is your age?
    26

Q35. Q32. What is your gender?

    Female

Q36. Q33. What is your race/ethnicity?

- ○ African American
- ◉ Asian
- ○ European
- ○ Hispanic
- ○ Middle Eastern
- ○ other

Q37. Q34. What was your first language spoken at home when you were a child?

Gujarati

Q38. Q35. What is your self-assessment of your English language fluency?

◉ Very good　　○ Good　　○ Satisfactory　　○ Poor　　○ Very poor

Q39. Q36. Please indicate when you passed your NCLEX-RN state board exam.

◉ on your first attempt　　　○ on a later attempt　　　○ other

Q40. Q37. Please indicate where you are working now in your primary employment; in what type of setting.

○ hospital inpatient care setting

○ hospital emergency care setting

○ hospital specialty unit

○ clinic or outpatient setting

○ urgent care center

◉ long term care

○ home health care

○ currently not working

○ other

Q41. Thank you very much for your help as I pursue the understanding of the ESL student nurse experience. Please share any other comments you would like to include.

Very good work and would love to see the results of your study! Keep in mind that

not all ESL student nurses face the same level of challenges. I believe that a lot has to do with the kind of education they received growing up as a kid. English is my third language, however, since I was educated as a kid in a school where English was mandatory, I grew up learning this language which was valuable when I came to US for college education.

Location Data

Location: (41.602401733398, -83.633697509766)

Source: GeoIP Estimation

Participant 3: Arabic-Lebanese

Q1. Hello, BSN registered nurses!
Carol Bryan is seeking your help finishing her dissertation and thereby completing her PhD.

Q2.
Introduction
The following questions seek your input about what you believe to be most important and contributed the most to your success in nursing and ask you how you rate these things in importance.

Remember when you wrote reflections during your preceptorship and talked about your day working with the RN? This is the type of deep reflective journaling I am seeking in response to these questions.

As you type your responses in the boxes below each question, the boxes will expand and give you as much room as you need. These questions are designed to be open-ended and you are encouraged to write as much as you are comfortable with. This effective response tool will remain open for two weeks. You may come and go to the document as many times as you like, and it will remain open until you click the submit button at which time it will close. This is intended to be done as a written interview, and designed to give you as much time as you want.

Your participation in this study gives me valuable information that can assist me in my goal to address the needs of students just as yourselves and help them succeed. This is important work, and I invite you to share your stories to help the next generation of English of a Second language (ESL) students navigate the difficult pathways to success in nursing.

Please forward my contact information, carol.bryan@utoledo.edu, to people you know who match the criteria for participating and are interested in being a part of the study. If they contact me, I will send them the questionnaire with the same invitation and instructions you are receiving. The participation criteria include the ability to self-identify as: 1) having passed the NCLEX-RN state board exam, and
2) speaking a primary language other than English. The more responses the better to help gather as much information as possible to examine and begin to understand this lived experience.

Thank you in advance for your help and your participation.

Q42. Most Important to your Success

Q3. Q1. How do you define success?

      The ability to do stuff that one thought can't do or reach

Q4. Q2. Which of these things in your definition do you say are most important?

Willingness to reach the highest level of something

Q43. Your Motivation to Succeed

Q5. Q3. What motivates you to learn?

The human curiosity and progress associated with learning

Q6. Q4. Can you describe what motivated you to pursue nursing as a career?

Nursing as a profession is very humane and consider people precious creatures. motivation came after my wife enrolled first in nursing and saw her progress in taking care of people's lives

Q7. Q5. What motivates you to continue in the pursuit of your goals?

Challenges

Q44. Your Support System: Individuals

Q8. Q6. Was there an individual who played a significant role in your success? (if no, skip to Q11)

- ● yes
- ○ no

Q9. Q7. If you answered yes to Q6 above, what did he or she do to help you?

Supported me when I needed help and assistance

Q10. Q8. What role did he or she play?

Guide

Q11. Q9. If that person was a faculty member, what did that faculty member do that differed from what other faculty members did that you have worked with?

Extra office hours, more conversations

Q12. Q10. If that person you described was not a faculty member, can you talk about anything that a faculty member did that was helpful that contributed to your success?

Yes, they provided a lot of outside resources that made things easier

Q45. Your Support System: Groups

Q13. Q11. Was there a group, formal or informal, that played a significant role in your success? (If no, skip to Q15)

○ yes
◉ no

Q14. Q12. Would you characterize this group as one of the following?

◉ family

○ peer group

○ something in the curriculum

○ special services

○ other

Q15. Q13. What did the group do to help you?

Assist me financially and supported my decisions

Q16. Q14. What role did the group play?

Support when my back was against the ropes

Q46. Institutional Support Services and Interaction with Faculty

Q17. Q15. Are there any University of Toledo (UT) or College of Nursing (CON) institutional services that you found to be helpful? (If no services were used, skip to Q18).

○ yes
⊙ no

Q18. Q16. Would you identify any of the following UT or CON institutional services as having contributed to your success? (mark all that apply)

☑ peer tutoring

☑ test taking strategies

☐ on-line support

☑ practice tests

☐ writing center

☐ other

Q19. Q17. For each service that you noted above as having contributed to your success, please discuss: a) the amount of time you spent using that service, c) how often you used it, and d) how you utilized it in your educational preparation.

I would say I probably used them once or twice a month . They helped me prepare for exams and guide me through clinicals

Q20. Q18. Can you identify any interactions with faculty that played a role in your success? (if no, skip to Q21)

○ yes
⊙ no

Q21. Q19. If you answered yes to Q18, please describe these interactions.

Q22. Q20. If you answered yes to Q18, please discuss how these interactions contributed to your success.

Q23. Q21. Were there any times that faculty did things that hindered or interfered with your learning? (If no, skip to Q24)

○ yes
⊙ no

Q24. Q22. If you answered yes to Q21, please describe these interactions.

Q25. Q23. If you answered yes to Q21, discuss how these interactions hindered or interfered with your success.

Q47. Language Factors that ESL novice nurses identify as being important

Q26. Q24. Looking back at the student experience, can you describe some of the ways that not having English as a first language may have affected your work as a nursing student?

> Yes, a lot of the times I couldn't get what the teacher is talking about yet all the class is fine . Sometimes comprehending ideas takes time . I kind of have to translate it to Arabic before English

Q27. Q25. What are your thoughts about being a nurse who speaks more than one language?

> Grateful resource to my floor

Q28. Q26. Are there aspects of patient care and/or the profession of nursing that could be impacted by nurses who are multilingual? (If no, skip to Q28)

- ⦿ yes
- ○ no

Q29. Q27. If you answered yes to Q26 above, discuss these aspects and how they could be impacted by nurses who are multilingual.

> Motivation to learn

Q30. Q28. Looking forward as a practicing nurse, what could successful multilingual nurses bring to the practice of nursing?

> Educational tools, Confidence in the patient provider relationship

Q48. Things that ESL Novice Nurses Identify as Impressions of Faculty Support

Q31. Q29. Can you discuss your impressions of effective faculty support for ESL nursing students?

> Whenever we had exams, they provided extra time if needed

Q32. Q30. Do you have any suggestions for faculty working with ESL nursing students that might help these students succeed?

> Let them ask questions during exams if they don't understand a word. I can't recall an exam during nursing school where I didn't miss a question because I couldn't understand a word in the question .

Q33. Demographic information about participants:

Please share the following requested information in Q31 - Q37 about yourself in order to help the researcher in the review of the reflective responses given on the questionnaire.

Q34. Q31. What is your age?

27

Q35. Q32. What is your gender?

Male

Q36. Q33. What is your race/ethnicity?

○ African American

○ Asian

○ European

○ Hispanic

○ other

◉ Middle Eastern

Q37. Q34. What was your first language spoken at home when you were a child?

Arabic-lebanese

Q38. Q35. What is your self-assessment of your English language fluency?

○Very good   ◉ Good   ○ Satisfactory   ○ Poor   ○ Very poor

Q39. Q36. Please indicate when you passed your NCLEX-RN state board exam.

○ on your first attempt   ◉ on a later attempt   ○ other

Q40. Q37. Please indicate where you are working now in your primary employment; in what type of setting.

○hospital inpatient care setting

○hospital emergency care setting

◉hospital specialty unit

○clinic or outpatient setting

○urgent care center

○long term care

○home health care

○currently not working

○other

Q41. Thank you very much for your help as I pursue the understanding of the ESL student nurse experience. Please share any other comments you would like to include.

Location Data

Location: (41.703506469727, -83.605201721191)

Source: GeoIP Estimation

Participant 4: Vietnamese

Q1. Hello, BSN registered nurses!
Carol Bryan is seeking your help finishing her dissertation and thereby completing her PhD.

Q2.
Introduction
The following questions seek your input about what you believe to be most important and contributed the most to your success in nursing and ask you how you rate these things in importance.

Remember when you wrote reflections during your preceptorship and talked about your day working with the RN? This is the type of deep reflective journaling I am seeking in response to these questions.

As you type your responses in the boxes below each question, the boxes will expand and give you as much room as you need. These questions are designed to be open-ended and you are encouraged to write as much as you are comfortable with. This effective response tool will remain open for two weeks. You may come and go to the document as many times as you like, and it will remain open until you click the submit button at which time it will close. This is intended to be done as a written interview, and designed to give you as much time as you want.

Your participation in this study gives me valuable information that can assist me in my goal to address the needs of students just as yourselves and help them succeed. This is important work, and I invite you to share your stories to help the next generation of English of a Second language (ESL) students navigate the difficult pathways to success in nursing.

Please forward my contact information, carol.bryan@utoledo.edu, to people you know who match the criteria for participating and are interested in being a part of the study. If they contact me, I will send them the questionnaire with the same invitation and instructions you are receiving. The participation criteria include the ability to self-identify as: 1) having passed the NCLEX-RN state board exam, and
2) speaking a primary language other than English. The more responses the better to help gather as much information as possible to examine and begin to understand this lived experience.

Thank you in advance for your help and your participation.

Q42. Most Important to your Success

Q3. Q1. How do you define success?

success is to get the goals.

Q4. Q2. Which of these things in your definition do you say are most important?

career, happiness,

Q43. Your Motivation to Succeed

Q5. Q3. What motivates you to learn?

to get a better life

Q6. Q4. Can you describe what motivated you to pursue nursing as a career?

Because I want to help people, especially the population whose languages are not English

Q7. Q5. What motivates you to continue in the pursuit of your goals?

I want to help people and my family who could not speak English well.

Q44. Your Support System: Individuals

Q8. Q6. Was there an individual who played a significant role in your success? (if no, skip to Q11)

⦿ yes

○ no

Q9. Q7. If you answered yes to Q6 above, what did he or she do to help you?

support finance, timing, spirit

Q10. Q8. What role did he or she play?

parents, husband, and instructors

Q11. Q9. If that person was a faculty member, what did that faculty member do that differed from what other faculty members did that you have worked with?

She was willing to spend time with me so that I can understand the content. Support me. Guide me not to give up my plan because of the language   barrier

Q12. Q10. If that person you described was not a faculty member, can you talk about

anything that a faculty member did that was helpful that contributed to your success?

Q45. Your Support System: Groups

Q13. Q11. Was there a group, formal or informal, that played a significant role in your success? (If no, skip to Q15)

- ⦿ yes
- ○ no

Q14. Q12. Would you characterize this group as one of the following?

- ⦿ family
- ○ peer group
- ○ something in the curriculum
- ○ special services
- ○ other

Q15. Q13. What did the group do to help you?

support me finance and spirit

Q16. Q14. What role did the group play?

parents and husband

Q46. Institutional Support Services and Interaction with Faculty

Q17. Q15. Are there any University of Toledo (UT) or College of Nursing (CON) institutional services that you found to be helpful? (If no services were used, skip to Q18).

- ○ yes
- ⦿ no

Q18. Q16. Would you identify any of the following UT or CON institutional services as having contributed to your success? (mark all that apply)

- ☐ peer tutoring
- ☐ test taking strategies
- ☐ on-line support
- ☐ practice tests
- ☐ writing center

☐ other

Q19. Q17. For each service that you noted above as having contributed to your success, please discuss: a) the amount of time you spent using that service, c) how often you used it, and d) how you utilized it in your educational preparation.

Q20. Q18. Can you identify any interactions with faculty that played a role in your success? (if no, skip to Q21)

   ⦿ yes

   ○ no

Q21. Q19. If you answered yes to Q18, please describe these interactions.

> they support me not only the lectures but also my future goal that I shared with them

Q22. Q20. If you answered yes to Q18, please discuss how these interactions contributed to your success.

> Because of their advice, I did not give up my goals

Q23. Q21. Were there any times that faculty did things that hindered or interfered with your learning? (If no, skip to Q24)

   ○ yes

   ⦿ no

Q24. Q22. If you answered yes to Q21, please describe these interactions.

Q25. Q23. If you answered yes to Q21, discuss how these interactions hindered or interfered with your success.

Q47. Language Factors that ESL novice nurses identify as being important

Q26. Q24. Looking back at the student experience, can you describe some of the ways that not having English as a first language may have affected your work as a nursing student?

> It took me plenty of time to understand the same lecture. I have to spend double or triple time to study. Also, there were many things that were mentioned in class but   I was unable to understand it. Unfortunately, it was not written down. Thus, I missed many of the important part that I did not know. It was not easy to look at these   notes from other students because they may not need to write them down since they understood and remembered them already.

Q27. Q25. What are your thoughts about being a nurse who speaks more than one language?

Advance: I am patient and willing to repeat the materials with my patients whose language are not English since they may take time to understand for need the other words to know the meaning. However, there are many patients complained my pronuncition as well as if I ask them to explain to me again about what they said.

Q28. Q26. Are there aspects of patient care and/or the profession of nursing that could be impacted by nurses who are multilingual? (If no, skip to Q28)

- ⦿ yes
- ○ no

Q29. Q27. If you answered yes to Q26 above, discuss these aspects and how they could be impacted by nurses who are multilingual.

it makes more diversed

Q30. Q28. Looking forward as a practicing nurse, what could successful multilingual nurses bring to the practice of nursing?

They make the populations who could not understand English feel more comfortable and contribute to bring the diversity into the   practice

Q48. Things that ESL Novice Nurses Identify as Impressions of Faculty Support

Q31. Q29. Can you discuss your impressions of effective faculty support for ESL nursing students?

They make the students feel more confident and think that they can do it.

Q32. Q30. Do you have any suggestions for faculty working with ESL nursing students that might help these students succeed?

When I alerted the faculties that English was my 2nd language, most of them are helpful. However, some of them assumed that my English MUST be good as other students. It is not fair. I wish I can tell them if they could image how hard it was for them to study their degree in different languages. Please express their support for the students so that they can be success and give them the best support to go over the difficulty. Also, if the lecture has both audio and notes, it will be perfect

because sometimes we can hear what the instructors are saying. It is not because we did not pay attention in the lectures, but because we did not understand / follow what they are talking about!

Q33. Demographic information about participants:
Please share the following requested information in Q31 - Q37 about yourself in order to help the researcher in the review of the reflective responses given on the questionnaire.

Q34. Q31. What is your age?

37

Q35. Q32. What is your gender?

female

Q36. Q33. What is your race/ethnicity?

○ African American

◉ Asian

○ European

○ Hispanic

○ Middle Eastern

○ other

Q37. Q34. What was your first language spoken at home when you were a child?

Vietnamese

Q38. Q35. What is your self-assessment of your English language fluency?

○Very good   ○ Good   ◉ Satisfactory   ○ Poor   ○ Very poor

Q39. Q36. Please indicate when you passed your NCLEX-RN state board exam.

◉on your first attempt   ○ on a later attempt   ○ other

Q40. Q37. Please indicate where you are working now in your primary employment; in what type of setting.

◉ hospital inpatient care setting

○ hospital emergency care setting

○ hospital specialty unit

○ clinic or outpatient setting

○ urgent care center

○ long term care

○ home health care

○ currently not working

○ other

Q41. Thank you very much for your help as I pursue the understanding of the ESL student nurse experience. Please share any other comments you would like to include.

> All of the faculties know the information of 2nd language issue. Also, please provide a plan to help student if they come and ask for assistance instead of show them to different department for help!

Location Data

Location: (42.3291015625, -83.487701416016)

Source: GeoIP Estimation

Participant 5: Vietnamese

Q1. Hello, BSN registered nurses!
Carol Bryan is seeking your help finishing her dissertation and thereby completing her PhD.

Q2.
Introduction
The following questions seek your input about what you believe to be most important and contributed the most to your success in nursing and ask you how you rate these things in importance.

Remember when you wrote reflections during your preceptorship and talked about your day working with the RN? This is the type of deep reflective journaling I am seeking in response to these questions.

As you type your responses in the boxes below each question, the boxes will expand and give you as much room as you need. These questions are designed to be open-ended and you are encouraged to write as much as you are comfortable with. This effective response tool will remain open for two weeks. You may come and go to the document as many times as you like, and it will remain open until you click the submit button at which time it will close. This is intended to be done as a written interview, and designed to give you as much time as you want.

Your participation in this study gives me valuable information that can assist me in my goal to address the needs of students just as yourselves and help them succeed. This is important work, and I invite you to share your stories to help the next generation of English of a Second language (ESL) students navigate the difficult pathways to success in nursing.

Please forward my contact information, carol.bryan@utoledo.edu, to people you know who match the criteria for participating and are interested in being a part of the study. If they contact me, I will send them the questionnaire with the same invitation and instructions you are receiving. The participation criteria include the ability to self-identify as: 1) having passed the NCLEX-RN state board exam, and
2) speaking a primary language other than English. The more responses the better to help gather as much information as possible to examine and begin to understand this lived experience.

Thank you in advance for your help and your participation.

Q42. Most Important to your Success

Q3. Q1. How do you define success?

   Success is when I get what I work hard to get that target.

Q4. Q2. Which of these things in your definition do you say are most important?

    get the targets

Q43. Your Motivation to Succeed

Q5. Q3. What motivates you to learn?

    to have better life (more money, my child will be taken care better)

Q6. Q4. Can you describe what motivated you to pursue nursing as a career?

    because I had bad experience of health care service, I want to become a nurse to make a change for my patients.

Q7. Q5. What motivates you to continue in the pursuit of your goals?

    when I receive the happiness and thankfulness from my patients and their family

Q44. Your Support System: Individuals

Q8. Q6. Was there an individual who played a significant role in your success? (if no, skip to Q11)

- ⦿ yes
- ○ no

Q9. Q7. If you answered yes to Q6 above, what did he or she do to help you?

    my parents take care of my child and me so that I have more time to focus on studying.

Q10. Q8. What role did he or she play?

    parents

Q11. Q9. If that person was a faculty member, what did that faculty member do that differed from what other faculty members did that you have worked with?

Q12. Q10. If that person you described was not a faculty member, can you talk about anything that a faculty member did that was helpful that contributed to your success?

Some faculties are so nice. They not only helped me to understand my lessons, but went further to my life and encourage me not to give up my goals. They even showed me some ways to get through it

Q45. Your Support System: Groups

Q13. Q11. Was there a group, formal or informal, that played a significant role in your success? (If no, skip to Q15)

   ◉ yes
   ○ no

Q14. Q12. Would you characterize this group as one of the following?

   ◉ family

   ○ peer group

   ○ something in the curriculum

   ○ special services

   ○ other

Q15. Q13. What did the group do to help you?

support money and my dicision.

Q16. Q14. What role did the group play?

parents, daughter, and husband

Q46. Institutional Support Services and Interaction with Faculty

Q17. Q15. Are there any University of Toledo (UT) or College of Nursing (CON) institutional services that you found to be helpful? (If no services were used, skip to Q18).

   ◉ yes

   ○ no

Q18. Q16. Would you identify any of the following UT or CON institutional services as having contributed to your success? (mark all that apply)

- ☐ peer tutoring
- ☐ test taking strategies
- ☐ on-line support
- ☐ practice tests
- ☑ writing center
- ☐ other

Q19. Q17. For each service that you noted above as having contributed to your success, please discuss: a) the amount of time you spent using that service, c) how often you used it, and d) how you utilized it in your educational preparation.

I needed help whenever I had to write papers. couple times (4 - 5) / semester (30 min/each).

Q20. Q18. Can you identify any interactions with faculty that played a role in your success? (if no, skip to Q21)

- ◉ yes
- ○ no

Q21. Q19. If you answered yes to Q18, please describe these interactions.

I shared with them my personal life and problems.

Q22. Q20. If you answered yes to Q18, please discuss how these interactions contributed to your success.

It helped me to find a way to continue to work hard, not give up when struggling

Q23. Q21. Were there any times that faculty did things that hindered or interfered with your learning? (If no, skip to Q24)

◉ yes ○ no

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Q24. Q22. If you answered yes to Q21, please describe these interactions.

> when they gave us the examples to illustrate the lectures

Q25. Q23. If you answered yes to Q21, discuss how these interactions hindered or interfered with your success.

> that made me memorize the materials better which are very helpful when I start working

Q47. Language Factors that ESL novice nurses identify as being important

Q26. Q24. Looking back at the student experience, can you describe some of the ways that not having English as a first language may have affected your work as a nursing student?

> we might have to spend double hours to learn materials. In the test, we might not understand the word meaning, thus we get the wrong answer even we know that materials. It takes ESL students more time to write papers and of course we will have many punctuation, wrong words, grammars,...do not understand all of the materials that the instructors discuss in class.

Q27. Q25. What are your thoughts about being a nurse who speaks more than one language?

> Advance: can speak different languages, may help patients whose language is not their first language. Disadvance: may not understand all of the conversations among patients, health care providers, co-workers,...

Q28. Q26. Are there aspects of patient care and/or the profession of nursing that could be impacted by nurses who are multilingual? (If no, skip to Q28)

- ⊙ yes
- ○ no

Q29. Q27. If you answered yes to Q26 above, discuss these aspects and how they could be impacted by nurses who are multilingual.

> They love to have a nurse who can speak their language because it is easier to understand and they feel that the nurse is getting closer.

Q30. Q28. Looking forward as a practicing nurse, what could successful multilingual nurses bring to the practice of nursing?

>   patients will be discussed the plans and educated better.

Q48. Things that ESL Novice Nurses Identify as Impressions of Faculty Support

Q31. Q29. Can you discuss your impressions of effective faculty support for ESL nursing students?

>   patient to hear feedback from them. Forgive some mistakes from writing papers. Using multiple choice instead of filling the blank and writing

Q32. Q30. Do you have any suggestions for faculty working with ESL nursing students that might help these students succeed?

>   Post audio with sub-tittles so that they can review if need.

Q33. Demographic information about participants:
Please share the following requested information in Q31 - Q37 about yourself in order to help the researcher in the review of the reflective responses given on the questionnaire.

Q34. Q31. What is your age?

>   37

Q35. Q32. What is your gender?

>   female

Q36. Q33. What is your race/ethnicity?

>   ○ African American
>
>   ◉ Asian
>
>   ○ European
>
>   ○ Hispanic
>
>   ○ Middle Eastern
>
>   ○ other

Q37. Q34. What was your first language spoken at home when you were a child?

>   Vietnamese

Q38. Q35. What is your self-assessment of your English language fluency?

○ Very good   ○ Good   ◉ Satisfactory   ○ Poor ○ Very poor

Q39. Q36. Please indicate when you passed your NCLEX-RN state board exam.

◉on your first attempt   ○ on a later attempt   ○ other

Q40. Q37. Please indicate where you are working now in your primary employment; in what type of setting.

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○hospital emergency care setting

○hospital specialty unit

○clinic or outpatient setting

○urgent care center

○long term care

○home health care

○currently not working

○other

Q41. Thank you very much for your help as I pursue the understanding of the ESL student nurse experience. Please share any other comments you would like to include.

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