Nursing Students’ Perceptions of Spiritual Well-Being, Academic Persistence and Academic Success

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DEDICATION

This dissertation is dedicated to my former students, who are now professional nurses. I was blessed to be part of your journey and unknowingly you became part of mine. I have learned something from each of you. I have learned that the gift of education is something to never take for granted. I have learned what real sacrifice looks like. I have learned to have more patience and to always explain the “why”. Most importantly, I learned about the type of nurse and professor I aspire to be.
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Abstract

This qualitative phenomenological research study explores the perceptions and beliefs of undergraduate senior-level nursing students about spiritual well-being in relation to academic persistence and ultimately academic success as measured by timely graduation at a private women’s university in the Midwest. By adding to the body of research and knowledge, nurse educators may better assist students to achieve academic success, which could potentially alleviate the national nursing shortage and decrease financial losses of academic institutions. Nine Bachelor of Science in Nursing (BSN) students at a private university in the Midwest participated in semi-structured, one-on-one interviews. Participants were in their senior year and had progressed through the nursing program without withdrawing or failing from any nursing courses.

Using NVivo 12 for data analysis, this researcher found that several themes emerged. Study findings indicated that a correlation between spiritual well-being, academic persistence, and academic success. Nurse educators are encouraged to explore opportunities to promote the spiritual well-being of nursing students. Further research should include quantitative measurements of spiritual well-being.

Keywords: spiritual well-being, academic persistence, academic success, undergraduate nursing students
Chapter I: Introduction

Introduction

This chapter provides the intent and rationale for a research study. The study was conducted among senior-level undergraduate Bachelor of Science in Nursing (BSN) students at a private, Midwestern U.S. university with an all-female undergraduate population. This chapter describes the purpose and significant background information associated with the study. In addition, details including the research questions, operational definitions, assumptions, limitations, and delimitations are outlined for the reader.

Purpose of the Study

This qualitative phenomenological research study explores the perceptions and beliefs of undergraduate senior-level nursing students about spiritual well-being in relation to academic persistence and ultimately academic success as measured by timely graduation at a private university in the Midwest.

Background and Rationale

In the United States between 2016 and 2026, an annual projection of 203,700 registered nursing positions will be left unoccupied (Torpey, 2018). Snavely (2016) writes, “An inability to match supply with demand can have significant unfavorable consequences not only for our health care system, but also our nation’s economic health” (p. 98). As the demand for professional nurses continues increasing, the academic success of undergraduate nursing students must be further explored (Beauvais, Steward, DeNisco, & Beauvais, 2014). It is important that sufficient qualified nurses are available to fill nursing positions.

Nurse educators are challenged with examining ways to promote student success (Beauvais, et al., 2014). In the literature, a lack of academic success was associated with student
attrition, and academic success was associated with student retention. Mullholland et al. (2018) write, “Student attrition is one of the most important challenges to financial, educational, and workforce development targets in the health and social care fields” (p. 49). Academic success also has been described in terms of completed courses using the ratio between the number of credits earned and the number of credits attempted by the student in any given year (Vanthournout, Gijbels, Coertjens, Donche, & Van Petegem, 2012). Academic success in nursing education results in more graduates eligible to take the National Nursing Licensure Examination (NCLEX); in turn, those passing the NCLEX are eligible for gainful employment and professional practice.

In addition to the positive impact that an increased number of qualified nurses would have on the healthcare system, an abundance of financial resources could be saved if more nursing students achieved academic success. At each university with an undergraduate nursing program, significant money is spent on student recruitment, tuition, other college fees, and continuing education for nursing educators (Peterson, 2009). Unsuccessful nursing students consume resources that are essentially lost to the nursing profession as those students never become registered nurses. Thus, nursing student attrition increases the overall costs of nursing education (Mulholland, 2008).

Multiple research projects have studied factors that contribute to undergraduate nursing student attrition (Hoeve, Castelein, Jansen, & Roodbol, 2017; Shelton, 2003, & Wray, Barrett, Aspland, & Gardiner, 2012). Contributing factors include previous college grades, finances, and employment status. Certainly, understanding factors contributing to this attrition is important; nevertheless, so too are the factors that drive students to persist and complete their program of
Beauvais, et al. (2014) write, “Nurse educators need to examine ways to promote student success by improving our current methodologies and practices” (p. 919).

While research related to nursing student attrition is vast, little research exists into non-cognitive factors that may promote student success [where success is defined as completion of a degree] (Beauvais, et al., 2014). Non-cognitive factors, also called *psychological factors*, include emotional intelligence, empowerment, resilience, and spiritual well-being.

Nursing students are more likely to persist when they feel psychological support from nursing faculty (Shelton, 2003). Psychological support from nursing faculty includes expressing a genuine interest in the student’s well-being, being approachable, and having a positive demeanor. The current study may be beneficial in better understanding persistence as there is a lack of literature to describe persistence from the nursing students’ perspectives and persistence in schools of nursing is a global problem (Fagan & Coffey, 2019).

Although spiritual care is a key component of holistic nursing practice and is included in undergraduate nursing curricula, there is a lack of research to describe the perceptions of nursing students regarding their spiritual care and spiritual well-being (Abbasi, Farahani-Nia, Mehrdad, Givari, & Haghani, 2014). What literature exists is related to the spiritual care of nursing students as related to the teaching of spiritual care in nursing education and the spiritual care a nursing student provides when caring for a patient. The literature did not describe how nursing students feel about their own spiritual care of self or spiritual well-being.

Therefore, this study explores the relationship between spiritual well-being, persistence, and academic success as perceived by undergraduate senior-level nursing students. Specifically, the study focuses on both the existential and religious definitions of spiritual well-being. Thus, it includes the students’ perceptions related to both purpose in life and belief in a higher power.
Introduction to the Theoretical Framework

The study is based on two existing and well researched theoretical frameworks and a new conceptual framework developed by the author. The first theoretical framework utilized was Jeffreys’s Nursing Universal Retention and Success (NURS) model. This model was created based on an organizing framework that examined multiple factors proven to have an effect on nursing student retention (Jeffreys, 2015). Nursing educators can identify at-risk undergraduate nursing students based on the eight key factors outlined in Jeffreys’s NURS model (Jeffreys, 2012). These factors include student profile characteristics, student affective factors, academic factors, environmental factors, professional integration factors, outside surrounding factors, academic outcomes, and psychological outcomes. The factors and outcomes are interrelated and combine to either interact positively to promote nursing student retention or interact negatively, which increases risk for nursing student attrition.

In the NURS model, self-efficacy and motivation fall under student affective factors (Jeffreys, 2012). Jeffreys explains the role of self-efficacy in relation to persistence, resilience and motivation (2015): Nursing students who have strong self-efficacy are more likely to view challenges as opportunities (resilience) and achieve favorable outcomes (persistence). In addition, students with high self-efficacy are more likely to push themselves beyond minimal expectations (motivation) (Jeffreys, 2015).

Spiritual well-being is the second theoretical framework utilized in the study. Raymond Paloutzian and Craig Ellison created the Spiritual Well-Being Scale in an effort to quantitatively describe spiritual well-being (1982). Although the Spiritual Well-Being Scale was not used in this study, the two main concepts associated with the scale (religious and existential well-being) were explored. In a concept analysis, Ellison described spiritual well-being as an expression of
spiritual health which drives humans to search for meaning in life and is affected by factors such as feelings, relationships, and physical health (1983). Paloutzian (2002) described spiritual well-being from a psychological perspective as “a subjective, perceptual phenomenon that reflects one’s assessment of the quality of life experience” (p. 18).

The Spiritual Well-Being Scale is comprised of two sub-scales, each containing ten items worded both positively and negatively. The first sub-scale measures religious well-being and centers on one’s relationship with a higher power or God. The second sub-scale, which is non-religious, centers on life purpose or existential well-being.

A conceptual framework is proposed by the author of this study to better describe the hypothesized relationship between spiritual well-being, academic persistence, and academic success. In the proposed conceptual model, spiritual well-being influences academic persistence. Academic persistence is influenced by both intrinsic and extrinsic retention factors. Academic success is correlated with both spiritual well-being and academic persistence.

**Problem Statement**

Because of a lack of research related to spiritual well-being and the undergraduate nursing students’ perceptions associated with their ability to persist through the selected nursing program, this study is essential: By adding to the body of research and knowledge, this author believes that nurse educators may better assist students to achieve academic success, which could potentially alleviate the national nursing shortage and decrease financial losses of academic institutions.
Research Question and Sub Questions

The central research question of the study is, What are the perceptions of undergraduate senior-level nursing students at a private university in the Midwest regarding their own spiritual well-being? Additional questions addressed in the study include:

- How do undergraduate senior-level nursing students at a private university in the Midwest believe spiritual well-being affects academic persistence?
- What are the perceptions of senior-level nursing students at a private university in the Midwest regarding their own experience of the relationship between spiritual well-being and academic success?

Operational Definition of Terms

Spiritual Well-Being. For this study, *spiritual well-being* referred to one’s beliefs about her or his purpose in life and/or a higher power or God.

Academic Success. In this study, *academically successful students* are defined as the undergraduate senior-level nursing students who received a passing grade in every course and did not withdraw from any courses.

Academic Persistence. *Academic persistence* is defined as the successful completion of previous undergraduate nursing course credits despite any difficulties encountered. Using this definition, students who matriculated through the undergraduate nursing program without interruption and who were in their senior year were considered to have achieved academic persistence.

Perception. “Perception is often defined as the lens through which people see others and themselves” (Young & Dematteo, 2008, p. 81). Perception allows two people to read the same phrase or look at the same picture and interpret them differently. Thus, in the study perception
refers to the unique and personal manner in which participants interpret their own spiritual well-being in relation to academic persistence and academic success.

**Participants.** This study defines the participants as undergraduate female nursing students who were currently pursuing a Bachelor of Science in Nursing at private university in the Midwest. The students were in their senior year and were planning to graduate within two semesters. Nine students participated in the study.

**Setting.** The study took place at a faith-based private Midwestern university with approximately 1100 students; the undergraduate programs are all-female. Of those students, approximately 275 were seeking a Bachelor of Science in Nursing degree. Interviews were conducted using quiet space provided by the university library. The library is in a building separate from the researcher’s office and the building in which students took classes. Thus, the library was a location of neutrality.

**Assumptions/ Limitations/ Delimitations**

The first assumption in the research study was that students would participate in the study because of their own personal interests and no other motives. Second, it was assumed that participants would answer the interview questions thoughtfully, openly, and honestly. Third, it was assumed that after being given the operational definition of *spirituality*, participants would recognize and describe their personal spiritual well-being in relation to their own purpose and meaning in life and beliefs related to a higher power or God.

The study follows a qualitative research approach, involving structured interviews as the primary method. Participant availability limited was to female participants since the university’s undergraduates are only female. Only participants from the same cohort at the same private university were for the study. The private university attended by participants is faith-based.
Although the university accepts students of all faiths, the fact that the university is faith-based differs from the general United States population of undergraduate nursing students in the public sector. In addition, to participate in the study students had to have successfully matriculated through the nursing program without any interruptions in degree progression.

Although a variety of psychological factors are associated with academic persistence and academic success among nursing students, this study only addresses spiritual well-being and does not address emotional intelligence, empowerment, grit, or resilience.

**Conclusion**

This chapter described a research study aimed at better understanding nursing student perceptions of spiritual well-being in relation to academic persistence and academic success. The chapter provided a supportive background for the study. Marianne Jeffreys’s Nursing Universal Retention and Success (NURS) model and spiritual well-being as described by Raymond Paloutzian and Craig Ellison were introduced as theoretical frameworks for the study. In addition, a proposed conceptual framework developed by the author was introduced. The research problem and purpose were described. A research question and two sub questions were proposed. Finally, operational definitions, assumptions, limitations, and delimitations for the study were described.
Chapter II: Literature Review

Introduction

This chapter introduces the major concepts associated with the study, including *spiritual well-being*, *academic persistence*, and *academic success*. Sub-concepts that impact the major concepts also will be examined, including *existential well-being*, *religious well-being*, *spirituality*, *nursing-student retention*, and the *benefits of academic success*. The theoretical framework for the study will be presented in this chapter and is based on the work of Raymond F. Paloutzian in describing spiritual well-being (2002) and on the work of Marianne Jeffreys as related to undergraduate nursing-student retention (2012).

Finally, a conceptual framework developed by the author of this study will be proposed. The proposed conceptual framework seeks to further explore how spiritual well-being correlates with academic persistence and ultimately influences the likelihood of academic success in undergraduate nursing students.

Spiritual Well-Being

In this study, *spiritual well-being* is defined in terms of healthcare students. In the healthcare education literature, *spiritual well-being* has been defined in a variety of ways centered on one’s individual feelings and beliefs. The following definitions of *spiritual well-being* were chosen for this study because of the frequency in which they are cited, according to the Cumulative Index to Nursing and Allied Health Literature database.

Beauvais, Stewart, and DeNisco (2014) describe spiritual well-being as “acquiring and fostering life-affirming connections with other people and a relationship with God or a higher power” (p. 170). Similarly Abbasi, et al. (2014) defined *spiritual well-being* as how one feels about a variety of relationships including those with oneself, the community, the environment, and God.
Fisher described *spiritual well-being* in terms of the quality of relationships people have within four domains: environmental, communal, transcendental, and personal (2011). The environmental domain is a biological and physical connectedness with nature. The communal domain is founded on the quality one has in her interpersonal relationships. The transcendental domain describes concern with a higher power or cosmic force. Finally, the personal domain describes innermost regard for purpose in life. In a mixed-methods study of 248 students, as a person combines aspects of each domain, her spiritual well-being improved and positive spiritual well-being was indicative of positive psychological well-being (Gomez & Fisher, 2003).

*Spiritual well-being* can be further simplified into two different types of well-being, *existential well-being* and *religious*. Existential well-being relates to one’s personal beliefs about her purpose, meaning, and value in life; religious well-being relates to being connected to a higher power (Edmondson, Park, Blank, Fenster, & Mills, 2008).

**Existential Well-Being/ Purpose in Life**

Terms such as *life purpose*, *purpose in life*, and *meaning in life* are used interchangeably throughout the literature to describe existential spiritual well-being. Existential spirituality affects conscious and unconscious thoughts. Existential well-being affects how a person thinks, acts, and feels (Paulson, 2001). These thoughts, actions, and feelings evolve as one experiences life. The existential dimension of spiritual well-being is everchanging and ultimately defined based on one’s own values, goals, and experiences (Hodges, 2009). It is formed based on experiences related to subjectivity, authenticity, angst, crisis, death, and freedom (Webster, 2004). All the aforementioned experiences could lead an individual to develop or better understand or even question the purpose for her life. Life purpose was further defined by Hodges as “the degree to which a person realizes his/her own interpersonal, intrapersonal, and
psychologic uniqueness on the basis of life experiences that correspond with spiritual values and goals at a specific time in life” (2009, p. 169).

Very little literature discusses how existential spiritual well-being relates to college students and academic success. A quantitative study associated with adjustment and college students found a positive relationship between life purpose and ability to adjust to college life (Trevisan, Bass, Powell, & Eckerd, 2017). The findings of this study aligned with an earlier study, which found college students who scored higher on the existential Spiritual Well-being Scale had lower depression rates and higher self-esteem than those scoring lower on the scale (Genia, 2001). Both studies suggest that existential spiritual well-being affects college students.

**Religious Well-Being**

*Religious well-being* relates to one’s relationship with God or a higher power and is not associated with a particular religious denomination. The religious well-being sub-scale of the Spiritual Well-Being Scale was designed to measure what some refer to as God or belief in a higher power (Paloutzian, 2002). A study comprised of 211 college students from four different religious affiliations found that religious well-being was related to intrinsic faith, fundamentalism (literal following of scripture), and worship attendance (Genia, 2001).

The relationship with a higher power is described by Fisher (2011) under the transcendental domain in his Four Domains of Spiritual Health and Well-Being. The transcendental domain describes the “relationship of self with some-thing or some-one beyond the human level” (p 22). According to Fisher (2011), the transcendental domain interacts with the other domains to describe the quality of relationships that people have in their life. The other domains included in Fisher’s model include the personal domain, which associates with meaning and purpose in life; the communal domain, which relates to quality and depth of interpersonal
relationships; and the environmental domain, which relates to a sense of unity with the environment (2011).

Like the interaction among the domains in Fisher’s Four Domains of Spiritual Health and Well-being, Paloutzian emphasizes the importance of measuring both life purpose (also called existential well-being) and religious well-being in the Spiritual Well-Being Scale as the scores can behave differently (2002). It is possible for someone to have strong existential well-being and low religious well-being, or vice versa. While looking at the combination of both scores may provide an overall measure of spiritual well-being, the individual scale scores can help identify opportunities for future growth.

A correlational study of 75 first-year college students at a private university found that having a relationship with God had less impact on levels of depression in college students than did the students’ personal beliefs about meaning and purpose in life (Fehring, Brennan, & Keller, 1987). The researchers pointed out that these findings may have been related to a lack of maturity in the studied population and do not suggest insignificance in the studied students’ personal relationships with God (Fehring et al., 1987). Identifying college students with lower scores on the Religious Well-Being Scale may be helpful as Pauloutizian shared that when it is known that one has a lower score on this subscale, that information can be used to help the individual strengthen or grow religious well-being (2002).

**Spirituality**

*Spiritual well-being* describes the positive aspects of one’s spirituality. Spirituality is a key concept in both nursing practice and education (Abbasi, Farahani-Nia, Mehrdad, Givari, & Haghani, 2014). *Spirituality* and *religion* are not synonymous terms, and people may feel very differently about them (Dixie, 2004). *Religion* denotes an organized belief system while
spirituality relates to a way of being and how one responds to life (Dixie, Muller, Miller, & Priya, 2004). Spirituality also has been described as an inner attitude (Rowold, 2011). In a study of 136 undergraduate college students, 90 percent of students who identified themselves as being religious also identified as being spiritual while only 30 percent of those self-identifying as spiritual also identified as being religious (Astin, 2016). Astin (2016) shared that it is likely that only the students self-identifying as religious associate themselves with a particular religious denomination or group.

**Spiritual Well-Being as a Theoretical Framework**

*Spiritual well-being* can be described in terms of a relationship with a spiritual being such as God or as having purpose in life (Robert, Young, & Kelly, 2006). Moberg and Brusek (1978) describe spiritual well-being as a combination of both religious and socio-psychological well-being (1978). In a concept analysis, Ellison (1978) further described spiritual well-being as an expression of spiritual health which drives humans to search for meaning in life and is affected by factors such as feelings, relationships, and physical health. Paloutzian described spiritual well-being from a psychological perspective as “a subjective, perceptual phenomenon that reflects one’s assessment of the quality of life experience” (2002, p. 17). For this study, *spiritual well-being* refers to one’s beliefs about her purpose in life and/or a belief in a higher power or God.

Paloutzian and Ellison (1982) created the Spiritual Well-Being Scale in an effort to describe spiritual well-being quantitatively. The scale is comprised of two sub-scales, each centering on a different type of spiritual well-being. The first sub-scale measures religious well-being and centers on one’s relationship with a higher power or God. The second sub-scale is considered non-religious and centers on life purpose or existential well-being. This study
focused on both main concepts of the Spiritual Well-Being Scale (religious and existential well-being). Each sub-scale features 10 questions; half are worded positively, and half negatively (Paloutzian, 2002).

The Spiritual Well-Being Scale has been found reliable and consistent in a variety of groups including students, religious groups, and those with medical problems (Bufford, Paloutzian, & Ellison, 1991). In a study of 211 college students from four different Christian denominations, both the religious and existential constructs of the Spiritual Well-Being Scale were found valid and internally consistent (Genia, 2001). A positive relationship has been found between both subscales of the Spiritual Well-Being Scale and quality of life (Bufford, Paloutzian, & Ellison, 1991).

Spiritual well-being of nursing students is one psychological factor that has the potential value to improve academic success (Beauvais, Stewart, & DeNisco, 2014). Research articles related to spiritual well-being continue relying on the Paloutzian and Ellison Spiritual Well-Being Scale as originally written. Research often refers to the results associated with measurements from the two sub-scales and/or the total scale. One study with 237 participants found a positive relationship between the Spiritual Well-Being Scale scores and quality of life in cancer survivors (Edmondson, Park, Blank, Fenster, & Mills, 2008; Fehring, Brennan, & Keller, 1987). Researchers studying undergraduate nursing students found that Spiritual Well-Being Scale scores correlated positively with the ability to manage emotions (Beauvais, Stewart, & DeNisco, 2014). Abassi, Farahani-Nia, Mehrdad, Givari, and Haghani (2014) found that Spiritual Well-Being Scale scores in 350 nursing students at the beginning and end of a nursing program were statistically consistent, which indicates an opportunity for nurse educators to intervene and provide opportunities for students to enhance their spiritual well-being (2014).
Academic Persistence

Nursing programs need to understand reasons for persistence as much as the reasons for attrition. Determinants of college persistence include personal attributes, spiritual responsibility, and family (Capps R., 2012). These determinants are crucial in influencing whether a student persists within an academic program. For the purpose of this study, academic persistence will be defined as the successful completion of previous undergraduate nursing course credits despite any difficulties the student may have encountered. Using this definition, students who have matriculated through the undergraduate nursing program and are in their senior year will be considered to have achieved academic persistence. In the study, students who achieved academic persistence were asked to articulate and share some of the challenges they had to work through in order to achieve academic success. Academic persistence differs from academic retention in that academic retention does not account for the individual challenges that a student may experience in her quest to achieve academic success.

Self-efficacy, motivation, and satisfaction are factors that promote nursing student persistence and retention (Jeffreys, 2015). Self-efficacy is described as “an individual’s perception of their ability to be successful in a given endeavor and it has been shown to have an important role in university education and clinical performance of healthcare workers” (Williams, Beovich, Ross, Wright, & Ilic, 2017, p. 335). Self-efficacy and motivation are both listed as affective factors in the NURS Model (see figure 1.1) (Jeffreys, 2012). Motivation relates to the driving force within oneself to accomplish desired tasks and goals.

Satisfaction, which is listed as a psychological outcome in the NURS Model (see figure 1.1), “refers to the emotional gratification that arises from the congruency between expected
academic, developmental, personal, and/or professional outcomes from the nursing educational process and what actually occurs” (Jeffreys, 2012, p. 162).

*Academic persistence* is multifactorial. A 2012 retrospective study of 695 students from five cohorts found that several factors correlated with an increased likelihood to persist within a nursing program. These factors included having an older age, having previous experience caring for others, and living in the same setting throughout the academic year and breaks (Wray, Barrett, Aspland, & Gardiner, 2012).

Another factor associated with academic persistence in nursing students is psychological faculty support. A 2003 correlational study of 458 associate degree nursing students found that students who perceived a higher level of psychological faculty support were more likely to be academically persistent (Shelton, 2003). *Psychological faculty support*, which was described in relation to the faculty being approachable and having a positive demeanor with students, is primarily based on the faculty and student relationship outside of the classroom. Psychological faculty support includes having a genuine interest in the student and providing her with accolades and mentoring.

Psychological faculty support or lack of it can impact student persistence positively or negatively (O’Neill & Thomson, 2013). In an ethnographic study, 28 nursing students in the United Kingdom shared that faculty preferred students with certain characteristics and that students who did not possess those characteristics may have been at a disadvantage (Crombie, Brindley, Harris, Marks-Marain, & Thompson, 2013). How students were treated by faculty was an important factor in the students’ decision to persist within the nursing program.

In a small narrative study comprised of 10 nursing students, academic persistence was studied from the student perspective (Williams, 2010). The research resulted in the following
four major themes: keeping up, not giving up, doing the work, and connecting (Williams, 2010). Students were described as being academically persistent if they continued within the nursing major beyond the first two years. The first three themes relate to psychological or intrinsic motivating factors such as time management, self-determination, and positive mindset. Making connections and having the necessary resources available associate with extrinsic persistence factors (Williams, 2010). This current study resembles the work of Williams (2010). However, this study contributes to the literature differently as spiritual well-being is a concept that was not included in Williams’s study.

Nursing Student Retention

Baker (2010) defined nursing student retention as “remaining enrolled in a baccalaureate (BSN) or associate degree (AD) nursing program and graduating from the program” (p. 216). However, this definition fails to capture the many possible changes in progression that nursing students can take on the path to graduation. Jeffreys describes nursing student retention in relation to three different pathways that capture the trajectory of the student moving through the curriculum. These pathways include ideal, continuous, and interim nursing student retention (Jeffreys, 2007). Ideal nursing student program retention includes progression through the curriculum without any course withdrawals and failures. Continuous nursing retention includes students progressing through the program but includes repeating courses. Interim nursing student program retention includes students stopping out or taking semesters off during their progressing through the curriculum. For the purposes of the study, nursing student retention will refer to the ideal type (i.e., undergraduate nursing students who have successful and continuous progression through the nursing curriculum without the need to repeat or withdraw from any courses).
Certain student characteristics may help predict retention and academic success among undergraduate students in various majors, including both intrinsic and extrinsic retention factors. Intrinsic factors that promote student success include commitment, self-efficacy, time management, problem-solving abilities, and a sense of responsibility (Ensign & Woods, 2014). Additional intrinsic factors that have been discussed in the literature include psychological empowerment, resilience, emotional intelligence, and spiritual well-being (Beauvais, Stewart, DeNisco, & Beauvais, 2013).

Extrinsic factors that may promote retention include student and faculty racial diversity, behaviors of faculty and staff, and characteristics of the institution such as student support services (Ensign & Woods, 2014). Faculty who interact with students outside the classroom may positively influence student retention.

Faculty have the ability to influence extrinsic factors associated with retention. Although related to graduate nursing students of diverse backgrounds, a study by Veal, Bull, and Miller (2012) found that students benefited when faculty took the time to acknowledge student concerns and worked with the students to overcome academic obstacles. The results of this current study accentuate the many learning experiences that can be enhanced when the institution responds to and accepts those from diverse backgrounds.

**Academic Success**

Nursing educators are challenged to examine methods of promoting student success (Beauvais, et al., 2014). Four themes that relate to academic success among nursing students include the desire to succeed, acceptance of personal failure, recognition of personal attributes, and responsibility for personal success (Robshaw & Smith, 2004). Success in academia also has been described in terms of completed courses using the ratio between the number of credits
earned and the number of credits attempted by the student in any given year (Vanthournout, Gijbels, Coertjens, Donche, & Van Petegem, 2012).

Traditionally, college student success is predicted using quantitative cognitive measures such as high school grade point averages, scores on entrance examinations, and scores on standardized assessments. For example, an explorative retrospective study examined the records of 327 nursing students and found that success in pre-requisite courses (including and also beyond science courses) was beneficial in predicting student success through the nursing curriculum (Abele, Penprase, & Ternes, 2013).

Nontraditional factors also predict student success. Nontraditional factors include demographics, employment status, financial aid, and psychosocial factors, which themselves are non-cognitive and include student behavior, attitude, and personality (Allen, Robbins, & Sawyer, 2010). Beauvais et al. (2013) write, “Given the potential value of such factors in advancing academic success and therefore influencing outcomes such as retention, attrition, and graduation rates, research is warranted as it may provide insights into non-cognitive strategies that could be of potential benefit to this population” (p. 219).

Wood, Saylor, and Cohen conducted a mixed-methods study to learn about the relationships between perceived locus of control, ethnicity, and academic success among 106 baccalaureate nursing students in their second semester of coursework at a large metropolitan university (2009): persistence was one of three factors found to be associated with academic success. Other factors associated with academic success included study strategies and supportive social connections. In describing persistence, students identified factors such as having determination, a never-quit attitude, personal effort, and sacrifice (Wood, Saylor, & Cohen, 2009). Finding indicated that students with a stronger internal locus of control were more likely
to achieve academic success than were those without a strong internal locus of control (Wood, Saylor, & Cohen, 2009).

**Benefits of Academic Success**

In the United States, the demand for professional nurses is expected to increase 15 percent between 2016 and 2026 (Bureau of Labor Statistics, 2018). Wharrad et al. (2003) write, “Predicting academic success and identifying factors that place undergraduate nursing students at risk of academic failure are important issues for nurse education to address, faced as it is with an acute need to stem nursing shortages by recruiting and retaining greater numbers of students” (p. 24). Factors such as the economy recovering from recession, a significant number of professional nurses reaching retirement, a lack of nursing faculty to fill open positions, and high attrition rates associated with the career field--all will lead to a national shortage of professional nurses over the next decade (Snavely, 2016). With a potential looming national nursing shortage, nursing programs must retain nursing students (Williams, 2002). It goes without saying that academic success in nursing education results in more graduates eligible to take the national nursing licensure examination who in turn then can then gain employment and practice as nurses. In addition to the positive community impact of an increased number of qualified nurses, financial resources could be saved, especially since each educational institution allocates extensive financial resources for recruitment, for nursing faculty continuing education, and for other expenses (Peterson, 2009).

**Jeffreys’s Nursing Universal Retention and Success Model as a Theoretical Framework**

Nursing student attrition and retention are multifactorial and should be studied and managed using a holistic approach (Fowler & Norrie, 2009). Jeffreys’s Nursing Universal
Retention and Success (NURS) model (figure 2.1) was based on an organizing framework that examined multiple factors proven to impact nursing student retention (Jeffreys, 2015).

Figure 2.1 depicts Jeffreys’s Nursing Universal Retention and Success (NURS) Model. Reprinted from Nursing Student Retention: Understanding the Process and Making a Difference (p. 12), by M. R. Jeffreys, (2012). Reprinted with permission (See Appendix A).

In a narrative review of literature, Mooring (2016) agreed with Jeffreys (2012) in indicating that nursing student retention is multifaceted and that solutions for attrition require a faculty-student collaborative approach. The literature review identified factors associated with nursing student retention and ways to improve nursing student persistence (Mooring, 2016).

This study utilized a five-step approach, including problem identification, a search of the
literature, analysis of the data, identification of emerging themes, and a synthesis of the information. The literature review focused on nursing student retention and excluded practicing nurses. Factors affecting nursing student retention that Moore and Jeffreys brought to light factors such as financial status, ethnicity, previous educational experience, and personal commitment (Jeffreys, 2012; Mooring, 2016).

Nursing educators can identify at-risk undergraduate nursing students based on the eight key factors outlined in Jeffreys’s NURS model (2012) including student profile characteristics, student affective factors, academic factors, environmental factors, professional integration factors, outside surrounding factors, academic outcomes, and psychological outcomes. The factors are interrelated and in combination either interact positively to promote nursing student retention or interact negatively, thereby increasing risk for nursing student attrition (see figure 2.1).

Student profile characteristics in the NURS model include factors such as age prior to nursing program entry, previous work experience, ethnicity, race, and gender. In a 2017 descriptive, comparative study using a convenience sample of 164 upper division undergraduate nursing students, Barbe et al. found that diverse student profile characteristics such as ethnicity, race, spoken language at home, and culture negatively impact retention at the end of the first semester. Gender proved of interest in a 2013 retrospective observational study of 1006 undergraduate nursing students, which found females were more likely to complete their nursing program than males (Lancia, Petrucci, Giorgi, Dante, & Cifone). In a longitudinal cohort design study comprised of data collected from 1,808 nursing students, both males and younger students were found to be less likely to complete their nursing programs (Mulholland, Anionwu, Atkins, Tapper, & Franks, 2008).
According to the NURS model, academic factors include study skills, class attendance, and utilization of resources such as the college library, laboratories, or college counseling services. Study skills include the student’s ability to determine which methods of studying fit the student’s unique learning needs, as well as what topic to study, when to study, and how long to study. In general, the student should be choosing to study the amount of time required to achieve short-term goals such as passing a content exam (Jeffreys, 2012).

Environmental factors affect both traditional and nontraditional students. They are separate from the academic process and include living arrangements, financial support and status, emotional support, family responsibilities, and transportation. These factors can interact with each other and influence academic success (Jeffreys, 2012). According to the NURS model, a student who lives on campus and has no additional family responsibilities would be more likely to achieve academic success when compared to a student with dependents and with transportation to arrange to and from campus. A combined methods study of 605 nursing and midwifery students found that financial need, especially when caring for dependents, was a risk factor associated with students considering leaving a nursing program (Fowler & Norrie, 2009). This is congruent with Jeffreys’s findings, which indicated that students who feel financially stable are more likely to achieve academic success (2012).

Social integration, an important aspect of the college experience, appears in the NURS model under professional integration. These factors included nursing faculty advisement, membership in professional organizations, peer mentoring, and encouragement from friends in the class (Jeffreys, 2012). A mixed-methods sequential exploratory study of 1080 nursing and allied health students in North West England found that particularly in the early stages of a
nursing program, students need to be encouraged to connect with others in an effort to promote nursing student retention (Hamshire, Willgoss, & Wibberley, 2013).

Outside surrounding factors included national and local events, issues in the nursing profession, the healthcare system, politics, and the economy. Experiencing a national disaster such as a major flood would be an example of an adverse event that could negatively impact nursing student retention. A local hospital achieving a national award would be considered a positive outside surrounding factor. A student may become motivated to achieve a career in nursing following the announcement of such an award at a local hospital (Jeffreys, 2012).

Academic outcomes include measurements such as overall grade point average and the grades associated with nursing courses. In the NURS model, a student may decide to leave the nursing program while in the middle of a specific course or after the course is completed (Jeffreys, 2012). How well the student performs in the course affects the student’s decision to stay in the program. According to a narrative inquiry study examining 14 community college nursing students repeating a course, repeat courses was found to be emotionally taxing (Lewis, 2018). This finding aligns with the NURS model, which indicates that students who are unsuccessful in a nursing course are considered to be at risk for not successfully completing the program (Jeffreys, 2012).

The last two key concepts in the NURS model are student affective factors and psychological outcomes. These concepts are of utmost importance to this current research study. Student affective factors include cultural values and beliefs, self-efficacy, and motivation. Cultural values and beliefs influence the ways that a student thinks and makes decisions influenced by heritage, identity, and acculturation (Jeffreys, 2015). Additionally, students with strong self-efficacy are able to demonstrate resilience, are highly motivated, and are able to take
on new tasks. High motivation results in exceeding expected academic benchmarks. These students know their limitations and seek out resources necessary to persist and achieve the desired outcomes.

Psychological outcomes are high and low levels of stress and satisfaction. Positive psychological outcomes affecting nursing student retention include low stress and high satisfaction. Negative psychological outcomes include high stress and low satisfaction. Satisfaction is based on the students’ feelings related to faculty and student relationships, peer relationships, and contentment with the overall college experience (Jeffreys, 2012). In the NURS model, motivation and self-efficacy (student affective factors) influence satisfaction (a psychological outcome), which then leads to positive academic outcomes (Jeffreys, 2012).

In a small narrative study comprised of 10 nursing students in the Midwest, mindset and the ability to connect with others were found to be key themes in the beginning nursing student’s ability to remain academically persistent (Williams, 2010). These themes were further broken down to include factors that are consistent with the multifaceted retention work of Jeffreys. Factors such as the utilization of campus resources, campus involvement, open communication between students and faculty, and practicing the role of being a nurse all align with the professional integration factors of the NURS model (Jeffreys, 2012). According to the study, students were satisfied with positive experiences and feedback, which led them to persist in the nursing program (Williams, 2010). Satisfaction is a positive psychological outcome in the NURS model (Jeffreys, 2012).

Although Jeffreys does not specifically list spiritual well-being or even spirituality as a psychological outcome or as a factor associated with affective behavior, an exploratory research study described motivation as caused by internal or external rewards (Barmola, 2016). In a
quantitative study involving 40 college students, Jeffreys (2015) discovered that spirituality was an intrinsic motivating factor. Jeffreys clearly indicates that other intrinsic factors such as resilience, self-efficacy, and motivation contribute to nursing student retention. These intrinsic factors fall under the category of student affective factors on the NURS model. This current study further explores spiritual well-being as an affective factor that may influence nursing student retention.

In a descriptive correlational study designed to determine factors associated with academic success among 124 nursing students, Beauvais et al. (2013) found a positive correlation between spiritual well-being and academic success when tested among a group of combined undergraduate and graduate nursing students utilizing the Paloutzian and Ellison Spiritual Well-Being Scale. The findings from this current study align with the work of Jeffreys, who indicates that intrinsic affective factors influence nursing student retention (2015). Although the study by Beauvais et al. is significant, it lacks the qualitative aspect associated with the students’ perceptions about academic success (2013).

The inclusion of both psychological outcomes and student affective factors in the NURS model make it an appropriate theoretical framework for this current study. The NURS model indicates that motivation is a student affective factor. Student affective factors promote professional integration factors and environmental factors. Environmental factors influence psychological factors and professional integration factors (Jeffreys, 2012). Professional integration factors, positive academic outcomes, and positive psychological outcomes influence academic retention (Jeffreys, 2012). Although this current study will emphasize psychological outcomes and student affective factors, each concept in Jeffreys’s NURS Model has the ability to
influence or interact with other concepts; therefore, the entirety of Jeffreys’s NURS model will used as a theoretical framework for this current study (Jeffreys, 2012).

**Proposed Conceptual Framework**

The conceptual framework for this current study supports further exploration of the concept of Spiritual Well-Being and its ultimate influence on the likelihood of academic success in undergraduate nursing students. The author of this study illustrates the conceptual framework in Figure 2.2. In the first box, spiritual well-being is comprised of both existential and religious well-being. It is proposed that one’s spiritual well-being is indicative of her psychological well-being and may correlate with her ability to overcome challenges when trying to meet personal goals. In the second box, academic persistence is influenced by both intrinsic and extrinsic retention factors. In the proposed model, intrinsic factors are influenced by one’s spiritual well-being. Academic persistence serves as a positive influence in the undergraduate nursing student achieving academic success. In the third box, academic success is depicted because academic success correlates with spiritual well-being and academic persistence. Academic success leads to an increased number of nursing student graduates and decreased institutional financial loss.

![Figure 2.2, Barna’s Proposed Model of Academic Success in Correlation with Spiritual Well-Being and Academic Persistence.](image-url)
Conclusion

This chapter presented the two facets of the study’s theoretical framework. These facets include Jeffrey’s Nursing Universal Retention and Success (NURS) model and Spiritual Well-Being (Moberg and Brusek, 1978) and measured with the Spiritual Well-Being Scale (Paloutzian and Ellison, 1982). Spiritual well-being, academic persistence, and academic success were presented as major concepts associated with the study. In addition, a proposed conceptual framework was presented. This proposed conceptual framework seeks to further explore the students’ perceptions of the concept of spiritual well-being, and how it can ultimately influence the likelihood of academic success in undergraduate nursing students.
Chapter III: Methods and Procedures

Introduction

This chapter describes the research design and methods used in the study. The population of interest, sample selection, and the setting for the study are described. The use of one-on-one face-to-face interviews and the researcher’s process are shared. In addition, this chapter provides details about how the data was analyzed and represented, how validity and reliability were established, and the ethical considerations the researcher has taken.

Research Design

The qualitative phenomenological research approach was founded by Edmund Husserl in the early 1900s with the goal to conduct research on subjective topics, such as emotion (Leavy, 2014). Creswell (2018) writes, “Phenomenological research is a design of inquiry coming from philosophy and psychology in which the researcher describes the lived experiences of individuals about a phenomenon as described by the participants” (p. 13). In addition, the phenomenological approach serves as a method to explore the interconnectedness between perception and lived experiences (Mason, 2018).

The researcher has 14 years’ experience as a nurse educator, during which the researcher developed a passion for helping students who might otherwise not achieve academic success. With strong beliefs regarding the positive impact of spiritual well-being, the researcher became interested in how nursing students perceive the subject. The study used the phenomenological approach, which was the appropriate research method as the research questions sought to explore phenomena through the perceptions of the participants’ lived experiences. Specifically studied were the phenomena of spiritual well-being, academic persistence, and academic success. The researcher interviewed undergraduate nursing students to better understand their perceptions of
their own spiritual well-being and their perceptions of how spiritual well-being affected their ability to achieve academic persistence and academic success.

Qualitative research occurs in an area that is natural for the participants (Creswell, 2018). Naturalistic settings allow participants to feel comfortable and for the researcher to make observations that might not be made in a laboratory. For instance, a researcher studying a participant at a university may observe the participant carrying a stack of books or piece of equipment. These objects could provide the researcher with clues about what the participant is studying. In the described study, the naturalistic setting was the university where the participants currently studied.

In qualitative studies, the researcher develops the interview questions, collects data, and analyzes the data (Creswell, 2018). In this study, the researcher conducted one-on-one, face-to-face interviews with the participants using interview questions designed by the researcher. The researcher then analyzed the participants’ responses as the data obtained from the interviews was not easily reduced into numbers (Patten, 2014). The participant interviews provided rich narratives detailing participants’ perceptions of the phenomena beyond what could have been expressed using quantitative methods. The researcher collected data until achieving data saturation, which occurs when the data no longer produce new findings or understandings about the phenomena being studied (LoBiondo-Wood & Haber, 2014).

The qualitative researcher will be focused on what participants share, including the participants’ narratives about lived experiences (LoBiondo-Wood, Haber, 2014). For the described study, transcendental or psychological phenomenology was used since it focused on the experiences described by the participants and not on the researcher’s interpretations.
The researcher had to focus on the meaning of what the participants shared. To do so, the researcher had to be well-versed in practicing reflexivity.

In the study, the researcher shared her work role and sought to identify self-understanding of biases, values, and experiences (Creswell & Poth, 2018). The researcher wrote reflexive comments throughout the study using the memo function in the selected qualitative software program. The researcher then detailed her understandings and experiences related to spiritual well-being, academic persistence, and academic success. In addition, the researcher shared a personal statement at the beginning of the findings section of the research.

The researcher collected data through individual interviews. The need to collect data that is as rich as possible often results in small sample sizes and open-ended interview questions (Lewis, 2018). Phenomenological research samples typically include 3-10 participants (Creswell, 2018). Open-ended questions encouraged participants to share thoughts instead of simple, one-word answers. These questions often require follow-up, which fits with the qualitative research methodology as it allowed for the researcher to make necessary changes in the interview questions (Creswell, 2018). An example of such a change used in the study was when the researcher prompted the participant with an additional question when seeking a more elaborate response from the participant.

After data collection, the researcher organized the data and identified emerging themes among all the data. Because qualitative research involves both inductive and deductive data analysis (Patten, 2014), the researcher first grouped data based on commonalities and differences and the researcher applied an inductive approach by reviewing the data until all commonalities were found. After commonalities were found, the researcher then applied a deductive approach
while looking for any additional words, phrases, or meanings that supported the current or additional themes (Creswell, 2018).

**Population**

Undergraduate senior-level nursing students were the target population for the proposed study. The population selected for inclusion in the proposed study was undergraduate Bachelor of Science in Nursing (BSN) students at a private, U.S. Midwestern university with an all-female undergraduate population; these nursing students also had fewer than two semesters of coursework remaining to complete before their graduation. The accessible population was available to the researcher and met the target population criteria (Lo-Biondo-Wood & Haber). The university has roughly 1,100 total students, with approximately 275 of the students in the BSN program and 76 students meeting the qualifications for the study (outlined above). The majority of the students were Caucasian and between 18 and 24 years old. This population was chosen because it was accessible to the researcher and met the target population criteria. The researcher worked at the university that made the population accessible.

**Sampling**

The study utilized a purposeful convenience sample. Purposeful sampling involves identifying participants whom the researcher believes will provide rich data (Creswell & Poth, 2018). Convenience samples are comprised of participants easily accessible to the researcher (LoBiondo-Wood & Haber, 2014). For the study, the convenience sample method was chosen based on the ease of inclusion as the population was accessible to the researcher. The primary disadvantage of this sampling method is the weakness that occurs when generalizing the results with the target population (LoBiondo-Wood & Haber, 2014). All the study participants attended the same faith-based, private university, which characteristics limit the scope of the study. In
addition, convenience samples include volunteer participants who may be partaking in the study because they feel strongly about the research topic (LoBiondo-Wood & Haber, 2014).

The sample included undergraduate BSN students who successfully progressed through the nursing program without interruption and had fewer than two semesters of required coursework to complete prior to graduation. The researcher excluded from the sample any student who had failed or withdrawn from a nursing course. Students completed all nursing courses at this institution since nursing courses are non-transferrable. It is worth noting that the sample excluded men since the study took place at a university whose undergraduate population (including the BSN program) is all-female; however, participants were not excluded based on age, religion, or race.

The sample included nine participants. Qualitative research typically includes smaller sample sizes than quantitative research because of the type of data being collected (LoBiondo-Wood & Haber, 2014). The need to collect data that is as rich as possible often results in small sample sizes (Lewis, 2018). The sample size was increased until the data saturation was achieved (Creswell & Poth, 2018).

**Setting**

The study was conducted at a small, Midwestern university with an all-female undergraduate population. Undergraduate nursing students at this university are all assigned a nursing faculty member to serve as their academic advisor. First year students participate in a course to assist in preparing them for college level academics and all nursing students have access to peer tutors. The researcher met with each participant in the private rooms of the university library, which itself served as a neutral space used by both students and faculty. The
library is a natural setting, or one in which the participants may have experienced the phenomena being studied (Creswell & Creswell, 2018).

**Data Gathering Process**

Prior to beginning the data-gathering process, the researcher obtained approval from the university’s Institutional Review Board (IRB). To obtain participants for the study, the researcher met with the cohort of undergraduate students who were within two semesters of graduating from the BSN program. All students in the BSN program take the same core nursing courses. The researcher sought and obtained permission from the faculty teaching NUR 303 Multisystem Medical Surgical Nursing theory, which is taught in the students’ final spring semester (see Appendix B); this permission allowed the researcher to meet with students at the start of a class session. The researcher visited the students in their classroom during the first 10 minutes of class on dates that were mutually agreed upon by the faculty and the researcher. The researcher provided the students with a brief overview of the study and explained the questionnaire (see Appendix C). After the interviews, the researcher offered students who participated in the study a $10 gift card to the campus coffee shop as a token of appreciation for their time.

The researcher then introduced a third-party person who collected the questionnaires from students interested in the study. The third-party person is member of the university staff who works outside the nursing program. To ensure that the students did not feel obligated to become participants in the study, the faculty member and researcher left the room after providing the questionnaire. The questionnaire was comprised of questions used to verify the inclusion criteria for the study and the contact information for the participants. The third-party person
collected the questionnaires, place them in a sealed envelope, and hand-delivered them to the researcher.

After the researcher used the questionnaire results to determine which students met inclusion criteria, the researcher began contacting the students via e-mail to schedule one-on-one, semi-structured face-to-face interviews. The interviews each took 30 to 50 minutes in order to address the concept of spiritual well-being, which is typically a difficult one for participants to articulate. The researcher was aware that discussion of one’s spiritual well-being could make the participants feel that there was an unequal power dynamic between the participant and the researcher (Creswell & Poth, 2018). To prevent an unequal power dynamic and to assist the participants in to articulating their thoughts, the operational definitions and planned interview questions were e-mailed to the participants prior to their interview.

The interviews were conducted with a semi-structured format that allowed for follow-up questions while being flexible enough to permit the interviewees to ask questions as needed (Leavy, 2014). The researcher recorded audio of the interviews using a laptop computer with the recording software VidGrid. As suggested by Creswell & Creswell (2018), in addition to the audio recording, the researcher left extra space between questions on the interview protocol to take handwritten notes, which then could be used if the audio recording device failed or was inadvertently deleted. While recording, the researcher kept the participants’ names confidential and only referred to the participants by an assigned number. Upon completion of the interview, the electronic audio file was submitted for transcription by the machine-generated, closed-captioning feature on VidGrid. The researcher then compared the transcript to the audio file and corrected the transcript as needed.
Data Gathering Tool

The interview questions were written with the goal of the participant responding with as much description and detail as possible. Interview questions were developed by the researcher to represent the main concepts associated with the study: spiritual well-being (including both existential well-being and religious well-being), academic persistence, and academic success. Each question was developed by the researcher based on information surrounding the key concepts found in the literature (see Appendix D).

Open-ended questions were primarily included in the study because the researcher could not predict what answers the participants would share (Lo-Biondo-Wood & Haber, 2014). The open-ended questions allowed the participants to provide meaningful answers and insights into their experiences. As needed, the interviewer asked follow-up questions to clarify responses or elicit further details.

The interview questions were tested on a student and reviewed by a peer. An interview protocol was created based on a sample guide provided by Creswell and Poth (2018). The interview protocol included basic information such as the date and time of the interview, the location of the interview, and the interview questions (see Appendix E). Unlike the sample provided by Creswell and Poth (2018), the interview protocol did not include interviewee’s names. Instead, the protocol included the number assigned to the participant. The interview protocol also included an opening statement read by the researcher. After the opening statement, there was a reminder cueing the researcher to assure that the researcher had obtained both verbal and written consent from the participant for audio recording.
Data Analysis Plan

The data analysis plan included creating an organizational plan prior to collecting the data (Creswell & Poth, 2018). Prior to conducting any interviews, the researcher developed a database and file-naming system to ensure material could be easily located (Creswell & Poth, 2018). The researcher used a Microsoft Office password-protected user profile. Within the user profile, an electronic master folder was created and titled with the name of the study. In the master folder, there is a copy of chapters I, II, and III along with the interview protocol, which includes the interview questions. In addition, the master folder houses the single password-protected Microsoft Word document, which lists each participants’ name with an assigned number. Subfolders were created for each participant and were titled “Participant #” Individual files were named with the participant number and either “A” (for a link to the password-protected VidGrid audio recording), “W” (for written notes taken by the researcher scanned and saved as PDF Files), or “T” (for transcribed notes) followed by the date the interview was conducted.

To protect the privacy of the participants, the researcher did not save data that was copied in more than one place. For this reason, handwritten notes taken by the researcher during the interview were immediately shredded and disposed of after the notes were scanned and saved in the electronic folder. Upon completion of the interview, the researcher uploaded the audio recordings to an online machine-generated transcription service. After receiving the transcribed interviews and verifying that the transcription matched the audio recording of the interview stored on VidGrid, the researcher deleted the audio recording.

After the data storage was organized and the data was collected, the researcher became familiar with the data by reading the transcribed interviews several times. The researcher then
used the software NVIVO 12 to assist in the inductive data analysis process necessary for the study. While reviewing the transcribed interviews, the researcher created memos in the margins and used them to capture concepts which helped identify coding category themes (Creswell & Poth, 2018). To winnow the data, the researcher used the software to indicate words that represent concepts captured in the margins. The researcher reviewed the identified words and the concepts in the margins and used the software to identify clusters of similar topics.

Clustered topics were placed into two groups: expected findings, which included those that are based on the literature, and surprising topics, which are those that were unanticipated before the study began (Creswell, 2018). The researcher then reviewed the clustered topics and used the software to assist in abbreviating the topics as codes. Preconceived codes were not used as the researcher sought to use only codes that reflected what the participants said.

Once codes were created, the researcher used the software to find similar words, identify frequencies of words, and group words and their synonyms. During this part of the analysis, the researcher used the software to assist in finding indications of relationships between the coded words and to find additional themes that did not emerge before (Creswell, 2018). Finally, the researcher used the software to develop a visual diagram (concept map) to depict the identified themes and their interrelationships (Creswell & Poth, 2018).

**Data Quality Measures**

The study interviewed nine students and thus did not rely on a single source for information. The interview questions were piloted with a student and then reviewed by a peer. In addition, the researcher requested that an auditor review the analyzed data. The auditor has experience in advising and teaching undergraduate nursing students and is interested in the topic but has no authorship rights to the proposed study (Hays & Singh, 2012).
To establish credibility and trustworthiness, the researcher practiced reflexivity, used auditing and member checking, and shared instances of contradictory evidence. Reflexivity necessitates that the researcher identifies biases, values, experiences and that the researcher is clear about his or her position (Creswell & Poth, 2018). Prior to analyzing the data, the researcher shared personal experiences related to spiritual well-being, academic persistence, and academic success. The researcher identified how these experiences have shaped the researcher’s thoughts about spiritual well-being, academic persistence, and academic success. This type of self-reflection helped eliminate bias (Hays & Singh, 2012).

Each participant shared her lived experiences during the interviews. It was not expected that all participants would have the same experiences, thoughts, or beliefs. The researcher shared evidence about general perspectives of the themes and contradictory evidence when found. This contradictory evidence contributes to making the study more realistic and valid (Hays & Singh, 2012).

To ensure consistency in the study, the researcher verified the transcription, assessed codes for shifts in meaning, and operated as a single coder. Prior to starting the data analysis, the researcher listened to the transcribed interviews to ensure there were no transcription errors. The researcher frequently compared data with codes and their definitions to ensure the meaning of the codes did not change (Hays & Singh, 2012). The researcher completed the study independently. To ensure that coding was completed accurately, the researcher looked for inter-coder agreement by asking the person auditing the data to also cross-check a sample of the codes. The researcher requested that the person doing the cross-checking choose which codes to review.
The researcher shared a summary of the findings with participants to determine whether the themes accurately described their perceptions (Hays & Singh, 2012). This member checking occurred via e-mail communication so the participants could review and respond at a time best suited them. Participants were not required to respond unless they had concerns with the findings. This offered a platform for the participants to evaluate the authenticity of the study. The participants reported no concerns.

**Ethical Considerations**

The researcher obtained permission from the university’s Institutional Review Board (IRB) (see Appendix F) and the Bachelor of Science in Nursing (BSN) Program Director (see Appendix G) prior to meeting with potential participants. The application for approval addressed potential risks for the participants. It should be noted that there were no known risks that could physically, psychologically, socially, or economically harm the participants in the study. In addition, the researcher completed the “Protecting Human Research Participants” web-based course provided by the National Institutes of Health Office of Extramural Research (see Appendix H.)

The researcher adhered to the ethical standards outlined by the American Educational Research Association’s Code of Ethics regarding informed consent (AERA, 2019). All participants were asked to sign an informed consent form prior to participating in the study (see Appendix I). The consent form addressed confidentiality, purpose of the study, site of study, time commitment, potential risks, consent to audio recording, right for participant to remove herself from study, and a declaration that the participant was a volunteer and was not coerced into being in the study. The participants in the study will continue to be kept confidential. Their
names and any identifying data will not be shared. The participants received a copy of the signed consent form for their records.

Data is being kept in a password-protected electronic file. It is suggested that data be saved for a reasonable period of time and then discarded (Creswell, 2018). All data collected in the study will be kept for a period of five years except for handwritten notes, which were scanned and will be saved in the electronic folder for five years. Hard copies of the handwritten notes were shredded.

**Representation of Data**

Data associated with the study were represented using NVIVO 12 functionalities. The data initially were clustered into two groups (expected findings and surprising findings). Concept mapping is one method that allows the reader to visually see themes and their interrelationships (Creswell & Poth, 2018). Concept maps were used to display the themes and sub-themes associated with each research question as well as the overall final findings of the study.

**Conclusion**

This chapter explained the purpose for using the phenomenological qualitative research design as the best method for answering the research questions using one-on-one interviews. The researcher provided details about the target population, the sample population, and the setting for the proposed study. A table was provided to share research that supports the interview questions along with an interview protocol (see Appendix D). Details regarding data management, analysis, and representation were shared. Finally, ethical considerations and efforts to ensure validity and reliability were addressed.
Chapter IV: Results

Introduction

This chapter summarizes the data collection procedures, describes how the data was analyzed, and describes the participants’ demographics. The researcher provides a personal statement, and then the chapter describes the results for each research question. Twelve themes are described, and quotes from the research participants are shared to support each theme. In addition, the researcher describes any contradictory evidence or different points of view that participants shared.

Data Collection Procedure

The researcher met with 64 level-three students in the BSN program. Students interested in participating in the study were asked to complete a questionnaire about their academic success: 52 students returned the questionnaire and indicated their interest in participating in the study. The researcher analyzed the results of the questionnaire and determined that 32 met inclusion criteria (62%). The researcher contacted the eligible participants via e-mail. This e-mail included a copy of the consent form, the Rights of Research Participants, and a document outlining the planned interview questions and operational definitions. Interested students then were asked to provide a few available times to meet for the in-person interview. The researcher then scheduled interviews with the first nine students to respond. After completing nine interviews, the researcher e-mailed the other interested students who had not yet scheduled an interview to thank them and inform them that data saturation had already been reached.

The researcher met with nine participants in the study rooms of the college library to conduct semi-structured interviews. At the beginning of each interview, the researcher provided the participants with two copies of the informed consent form, the Rights of Research
Participants, and a document outlining the planned interview questions and operational definitions. The researcher then used the audio recording feature of VidGrid® to record each interview. After each interview, the researcher scanned a copy of all handwritten notes and the signed consent forms. Each scanned copy was saved in the participants’ password-protected file and the hard copies were shredded. The researcher then downloaded the closed-captioned transcript of the audio from VidGrid and saved it to the designated participant folder. The researcher replayed the audio recording of the interviews and edited the transcription, where needed, to reflect more accurately what was stated during the interview.

**Demographics**

Participants represented senior-level undergraduate BSN students within two semesters of graduation who had progressed seamlessly through the nursing program. Seamless progression was described as having not withdrawn or failed any nursing course(s). The ages of the participants ranged from 21 to 41 years with a mean age of 26.6 years. Five (55%) of the participants described themselves as Caucasian, one as Nigerian, one as Mexican-American, and two as Latina. All participants shared a belief in God. Five participants described their religion as Catholic, and four participants described their religion as Christian. The sample consisted of all females; one participant was married, and the rest were single. Six participants did not have children. Of the three participants who had children, two were currently parenting biological children and the third participant’s child had been adopted. Three participants self-identified as recipients of the Pell grant through Federal Financial Aid. Three participants who were not Pell recipients reported being first-generation college students. Four participants had previous healthcare experience, all sharing that they had worked as certified nursing assistants. Six
participants reported having previous college experience (See table 4.1 for participant
demographic information).

<table>
<thead>
<tr>
<th>Participant #</th>
<th>Age</th>
<th>Ethnicity</th>
<th>Marital Status</th>
<th>College Experience</th>
<th>First Generation College Student</th>
<th>Experience in Healthcare</th>
<th>Children</th>
<th>Pell Eligible</th>
<th>Belief in God</th>
<th>Religion</th>
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</thead>
<tbody>
<tr>
<td>P1</td>
<td>21</td>
<td>Mexican-American</td>
<td>S</td>
<td>No</td>
<td>No</td>
<td>No</td>
<td>No</td>
<td>Yes</td>
<td>Yes</td>
<td>Christian</td>
</tr>
<tr>
<td>P2</td>
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<td>S</td>
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<td>Yes</td>
<td>No</td>
<td>No</td>
<td>No</td>
<td>Yes</td>
<td>Christian</td>
</tr>
<tr>
<td>P3</td>
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<td>No</td>
<td>Yes</td>
<td>Yes</td>
<td>No</td>
<td>Yes</td>
<td>Catholic</td>
</tr>
<tr>
<td>P4</td>
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<td>Yes</td>
<td>No</td>
<td>Yes</td>
<td>No</td>
<td>Catholic</td>
</tr>
<tr>
<td>P5</td>
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</tr>
<tr>
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</tr>
<tr>
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<td>No</td>
<td>No</td>
<td>Yes</td>
<td>Christian</td>
</tr>
</tbody>
</table>

Table 4.1 Participant demographic information.

Data Analysis

The researcher initially read each transcript and noted participant experiences that were expected and a few that were surprising. The researcher then used NVivo 12© software to assist in analyzing the data. The researcher carefully coded the transcription associated with each interview. After completing the initial coding, the researcher reviewed the data again and proceeded by recoding each transcript a second time. The purpose of recoding the data was twofold: The researcher felt that the first attempt at coding may have been a rushed process, and the researcher wanted to assure that the research questions were reviewed and more prevalent in the mind of the researcher when coding a second time.

In reviewing each transcript, the researcher coded key words, concepts, and phrases. These codes became nodes. The researcher then identified which nodes were expected and which seemed surprising. The researcher then reviewed the nodes using an inductive process to identify similar concepts that then became themes. Several themes and sub-themes emerged for each research question. In addition to the themes, three instances of contradictory evidence were
found in which a participant or participants described something very different from the other findings.

**Personal Statement**

The researcher chose this topic because of a deep belief that spiritual well-being played an important role throughout her educational endeavors. Specifically, the researcher believes that spiritual well-being assisted the researcher in persisting to academic success when obtaining undergraduate nursing degrees (Associate and Bachelor of Science). The researcher remembers several trials and tribulations during that period of her life and believes that both existential and religious well-being assisted her through it. The researcher now works in higher education and has a career that provides an opportunity to share best practices related to the promotion of academic persistence and academic success.

**Results**

**Research question one** asked, “What are the perceptions of undergraduate senior-level nursing students at a private university in the Midwest regarding their own spiritual well-being?” The data analysis resulted in descriptions of both existential and religious spiritual well-being. Existential well-being themes included a desire to help others, goals and values associated with being a nurse, and having a positive perspective on life. Themes found to be associated with religious well-being included having a personal connection and belief in God, a belief that God is forgiving, and spiritual practices. See figure 4.1.
Desire to Help Others. Participants described existential well-being in relation to their desire to help others. Participants described their purpose in life in relation to becoming a foster mom, helping the ill, helping the less fortunate, and the participants’ desire to help their own families. In describing their purpose in life, participants shared the following:

[P2] “…I’m called to be with the least and lowest and feel that is my purpose in life and that the choices I’ve made have given me opportunities to fulfill that purpose.”

[P4] “…it goes back to me helping others and being kind when I can to those in need.”

Goals and Values Associated with Being a Nurse. Participants shared personal goals and values. They also shared why they felt both purposeful and successful. The responses often
included aspects of the nursing profession. Three sub-themes emerged from this theme, which included career goals, characteristics of caregivers, and the potential for self-growth.

Career goals were described by eight of nine participants. These goals included getting good grades in college, passing the national nursing licensure exam, and working as a nurse.

The following quotes are about the individual participant’s goals in life:

[P1] “…one of my goals was to graduate college”

[P8] “…one of my biggest goals is to graduate Summa Cum Laude.”

[P9] “…getting a job as a nurse somewhere, um, making a difference.”

All nine participants described characteristics of caregivers when asked questions about their values. Seven of nine used the word *honest* and five of nine used the word *kind* to describe a personal value. The following quotes describe personal values shared by the participants.

[P3] “…I feel like I’m very respectful of others, no matter where they come from or who they are. I don’t care. As far as you breathe, you are a human being, I’m good to go with you.

[P7] “So if on a small basis, every day, if I can focus on being honest with those around me, that’s going to build trust.”

[P1] “…I’m always going to be a very honest person.”

Although most participants described themselves positively when sharing values and goals, one student did share that she does not always demonstrate her values. For example, she said, [P1] “…I have my days when I’m probably not as kind as I should be.”

The potential for self-growth was described in terms of both continuing education and a desire to reach one’s full potential. One participant shared the desire to further her education stating, “…I want to continue my education and be the nurse I can be…” [P1]. Another student
shared, “…I think that there’s always room for growth and I think that, that’s also kind of what makes me satisfied with my life. ‘Cause I know there’s potential to be more” [P9].

**Positive Perspective on Life.** All nine participants shared a positive perspective on life. When asked if they saw the glass half-full or half-empty, all nine saw the glass as half-full. Reasons varied from participant to participant. One student shared the thought that just because her goals were not yet achieved, it did not mean that she was never going to achieve them. Another participant shared, “Um, I would say I see it half full because even though you have bad days, like you can always turn that around and something about it and I feel like it isn’t always going to rain” [P8]. Finally, one participant had a completely different perspective and shared that if she viewed the glass as being already full, there would not be an opportunity for further growth.

**Personal Connection and Belief in God.** The participants all described a personal connection with God. Four participants shared that their connection with God was continuing to grow, and participants commonly described God’s evaluation of them as being the most important evaluation in their life. In addition, four participants described their purpose in life as something given to them by God. One participant did share that her personal relationship with God was evolving and that it was not always what she believes it should have been. She shared, “It wasn’t that I didn’t always really care. I always had it in the back of my mind, even when I wasn’t being faithful” [P4]. The following quotes describe their connection with God.

[P1] “…he’s the center of like everything in your life. Everything you do revolves around him.”

[P9] “…he’s the one that has control of what’s going on.”

[P3] “…I feel like he creates me for a purpose.”
“I think God puts people out there for a purpose. I think everyone has a purpose. Some take longer to find it than others. I longer to find it. I took a long time to find it. But I feel that I am out there to do something important and to like make a difference”

God is Forgiving. Participants were asked to describe how they felt God evaluates them. In answering this question, six participants described God as being forgiving of their wrongs. They shared a common belief that no matter the mistake, God would forgive them, and their relationship would persist:

“[P1] “I think that he understands that we all are gonna make mistakes in our life, but as long as we realize it and we are able to talk to him about it, that that's what he wants.”

[P2] “…I think God looks at what I do as in, like a parenting way. Like how parents, you know, may be disappointed in their kids but still love them. And unconditionally”

[P7] “Um, but do feel like because I’m human and I sin and I fall short, that he is a loving and forgiving God.”

Religious Practices. While participants were sharing their personal relationship with God, eight commented on spiritual practices, including reading bible verses, going to church, praying, thanking God when positive things happen, and daily devotionals:

[P8] “Um, I pray every night before I go to bed.”

[P1] “I always have certain Bible verses in my head.”

[P9] “I do like spiritual practices every day. I try to make sure that I'm like connecting and thinking about my spirituality every day because I just feel like it's what gets me through each day to the next.”

Research question two asked, “How do undergraduate senior-level nursing students at a private university in the Midwest believe spiritual well-being affects academic persistence?”
Participants described experiences associated with scoring poorly in an academic situation such as poor scores on an exam, almost failing a course, and not doing well on a psychomotor clinical skills evaluation. The data analysis resulted in the following four themes: the process of acceptance, ability to find the positive, getting support, and not stopping. See figure 4.2.

**The Process of Acceptance.** All nine participants described an academic situation in which things did not go as well as planned and how they persisted. In doing so, the theme of acceptance emerged. This theme was further broken down into three sub-themes. The three sub-themes included Self-Reproach, Factors Beyond Control, and the event ultimately being non-defining.

Feelings of self-reproach were described by seven participants when first discovering the outcome of an academic situation in which they had not done well. The students described self-
reproach as a feeling of disappointment. One student described questioning whether she was really meant to be a nurse. She asked herself, “…are you supposed to be here? Should you be a nurse?” [P5]. It is worth noting that two participants shared that they had initially questioned God when learning of an academic outcome. One of these participants shared, “There were days I woke up crying saying like, God, why did this happen to me?” [P1].

Participants described an ability to recognize factors that were out of their control that contributed to their negative academic situation. Four described situations that were out of the control of the participant such as a car accident causing a concussion, the need to work more to be financially stable, and a postpartum depression. One participant recognized factors beyond her control may have contributed to her academic situation going awry:

[P7] “…because I knew the circumstances surrounding it. It was, that was the best that I could do and that should have been okay.”

[P7] “I knew that I had a lot going against me.”

[P7] “…I had some good hindsight to look back and think I wasn’t probably in the best place even starting out.”

Of the nine, five described an understanding that a negative outcome of an academic situation did not define them, describe the type of nurse they would become, determine whether they would be pass the nursing licensure exam, and, in the larger scheme of life, would not matter:

[P2] “I still consider myself a competent nurse, a competent peds nurse. And so I realized the last year or so that grades aren’t as much as I thought they once were.”

[P7] “…if I get a B, as long as I pass, the boards are going to count.”
“… the more chill part of me that realized that it really wasn’t gonna make a big difference in five years.”

“None of your patients are going to ask you what grade you got on this exam/”

**Ability to Find the Positive.** While sharing the experience in which the academic outcome was not what the participant desired, the participants described an ability to find the positive. These descriptions centered around acknowledgements that negativity would not help the situation and that it was important to remain optimistic:

“…seeing the bad things and being negative, it’s not gonna help the situation at all.”

“But I realized that just like having a negative attitude is just gonna make things so much more worse. So every day I try to wake up and just be like, you know what just happened but I’m going to get through it.”

“…there’s honestly nothing you can do to go back in time and change it. So why dwell on the past? It already happened.”

“I need to do my best with what I can control and then things that I can’t just, let it go.”

**Getting Support.** Another theme that related to participants’ experiences getting support when an academic situation did not go as well as planned. Five indicated that they got through the situation with the support from others in (parents, instructors, and friends):

“But I, um, realized that talking to my instructors could probably help me over that hump. …. I really appreciated that conversation.”

“They said, ‘don’t worry, you can go through this. I know you are a strong girl. You can pass this. Just make sure you do your best.’”
Not Stopping. The final theme that emerged from the less-than-expected academic situations was the mindset to not stop and to persist. In addition, a sub-theme emerged: turning to God. All nine described a need to move forward: “…I just recognized I had to pick myself up and, um, do better on the next one.” and [P1] “You just have to keep on going with life” [P5]. Turning to God to help keep going was described by six participants:

[P3] “So I just said, God, as from now on, I give you everything…”

[P7] “And again, God doesn’t give you more than you can handle even when you feel like you are drowning, because at times I did. Um, but I had to just learned to trust and to, um, remember he’s walking by my side through everything.”

Research question three asked, “What are the perceptions of senior-level nursing students at a private university in the Midwest regarding their own experience of the relationship between spiritual well-being and academic success?” Students primarily shared how they felt their personal spiritual well-being had helped them become academically successful. It is worth noting that they shared other factors that contributed to their success. These other factors included support of family, peers, and instructors. The data analysis resulted in two main themes, God’s Presence and Support and Religious Practices as a Coping Mechanism. See Figure 4.3.
God’s Presence and Support. In describing how academic success was related to spiritual well-being, eight participants described God’s presence and support in some manner. These included feelings of being valued by God regardless of academic success, recognizing that God had a part in the individuals’ path and success thus far, and feeling that God’s presence provides a sense of security:

[P2] “…knowing that no matter what I do in nursing school, even if I were to fail, that God would still love me and that I would still be, you know, valuable.”

[P6] “God has allowed me to get as far as I have.”

[P8] “…believing in God has really helped me throughout nursing school…”

[P9] “…I think my spirituality plays into that cause that’s what my God is for me. It’s kind of more like a safety and a comfort.”

Religious Practices as a Coping Mechanism. While describing how spiritual well-being contributed to academic success, seven participants described the use of religious practices
as a coping mechanism, including praying, going to church, listening to Christian music, and meditating in front of the Blessed Sacrament:

[P2] “…I always know when I go to church that I’m going to a safe place and I know that I can express my faith there, and that kind of helps me like decompress, whether I’m really thinking about it or not.”

[P6] “I like to sit in front of the Blessed Sacrament and meditate and, um, sometimes just offloading all of the stress is really helpful.”

Conclusion

This chapter summarized data collection procedures, described how the very rich data was analyzed, and described the participants’ demographics. The researcher provided a personal statement sharing her beliefs and the personal meaningfulness of this study. The results for each research question was shared, and illustrations were provided to help the reader visualize the results. These findings included 12 themes and seven sub-themes. In three instances, contradictory evidence was shared. The contradictory evidence included one participant describing how her goals did not always match her values, one student sharing that her personal relationship with God is evolving and has not always been as strong as she would have liked, and two participants sharing that they initially questioned God when an academic situation did not go as planned.
Chapter V: Conclusion, Discussion, and Summary

Introduction

This chapter describes the findings associated with each research question and provides a synthesis of the major themes and sub-themes. The findings associated with each theme are described in comparison to the literature and in relation to the other findings. A visual diagram is provided to help the reader understand the many ways the findings are related to one another. Limitations, suggestions for future research, and implications for practice also are provided.

Research Question One: What are the Perceptions of Undergraduate Senior-level Nursing Students at a Private University in the Midwest Regarding Their Own Spiritual Well-Being?

The findings of this research question were divided into two categories: existential and spiritual well-being. A total of six themes and three sub-themes were identified:

1. Desire to Help Others
2. Goals and Values Associated with Being a Nurse
   a. Career Goals
   b. Characteristics of Caregivers
   c. Potential for Self-Growth
3. Positive Perspective on Life
4. Personal Connection and Belief in God
5. God is Forgiving
6. Religious Practices
Desire to Help Others

The literature describes existential well-being as centered on one’s purpose or meaning in life. Furthermore, Abbassi (2014) described people who appreciate spiritual well-being as those who “tend to feel alive, purposeful, and satisfied” (p. 244). The study participants were asked to describe their purpose in life and to explain why they felt satisfied with their life. In doing so, the participants described a deep desire to help others.

In further explaining this desire, participants commonly shared a feeling of being on this earth to provide some sort of help to those around them. They commented on wanting to help their own family, friends, and even those they had never met. One described a desire to help her mother financially, and another participant shared that she aspired to become a foster mother. As participants described wanting to help those who were less fortunate, they shared that they desired to help in a non-judgmental way. This may stem from having been taught the importance of empathy early on in their nursing curriculum.

Findings from this theme are similar to the next theme: goals and values associated with being a nurse. Although similar, they remain two distinct themes as the participants shared a desire to help others that exceeds the care provided by a nurse. As this theme centers on a desire to help others that goes beyond nursing practice, it would be best supported by offering opportunities for students to help others outside of their traditional nursing clinical experiences. These findings support the need for service-learning opportunities. Additional opportunities may include peer mentoring, peer tutoring, or even mission trips. Findings for this theme suggest nurse educators should be encouraged to help nursing students find ways to help others when possible. To ensure that the opportunities impact all students, it may be worth embedding activities into the curriculum where possible.
Goals and Values Associated with Being a Nurse

Participants described existential well-being when articulating their personal goals and values. Hodges (2009) writes, “Personal values and individual goals are necessary for defining life purpose, since life purpose originates from one’s own experiences and observations” (p. 163). The participants repeatedly shared a common description of their goals and personal values, and this common description reflected the common goal of being a professional nurse and attributes of nurses. These findings resulted in the overarching theme of goals and values associated with being a nurse and three sub-themes: career goals, characteristics of caregivers, and potential for self-growth.

Participants described goals that placed them on the trajectory for becoming a professional nurse, including passing the remainder of their courses, graduating, and then passing the national nursing licensure exam. All participants shared the larger goal of becoming a practicing nurse. These are expected findings for a student at this level in a nursing program.

In talking about their personal goals, participants recognized that although they were near graduation, there was much more in life to learn. They shared a common goal of wanting to learn more and described that in various ways. One participant shared that she had a desire to obtain a master’s degree; another described a desire to travel so she could learn about other cultures. The sharing of goals was demonstrative of the participants’ motivation. The goals related to continuing their education reflect going beyond minimal expectations and are congruent with Jeffreys’s findings related to motivation and academic persistence (2015).

After describing their goals, the participants were asked to share their personal values. Personal values were all common characteristics associated with caregivers. The most commonly shared value was honesty. In addition to honesty, participants shared values such as
kindness, respectfulness, and listening. It was no surprise that honesty was shared as a common value. According to Reinhart (2020), a Gallup Poll ranked nursing as one of the most honest and ethical careers for a number of years.

These findings support the current literature related to existential well-being and academic persistence. In addition, findings suggest that it would be beneficial for nursing educators to help nursing students further explore their personal values, goals, and the connections among them. Self-reflective essays are one strategy that might be helpful. Students could reflect on values they look for in others and values they themselves want to display. The students also could be taught the specific, measurable, attainable, realistic, and timely (S.M.A.R.T) goal-setting technique.

**Positive Perspective on Life**

All participants described a positive perspective on life. They saw the glass as half-full and were hopeful and optimistic, both attributes associated with existential well-being or purpose in life (Hodges, 2009). Participants variously described their positive perspective on life: One participant described a desire for personal growth, and another shared that there could not always be days of rain and that eventually, there would be sunshine. In addition to a positive perspective on life being associated with existential well-being, it was also found to be associated with academic persistence (Williams, 2010).

This finding was not surprising. In order to remain academically persistent, participants could not allow negativity to impede their progress. They needed to focus on the positive and grow from past mistakes. This finding also supports the research of Jeffreys (2015), who found academic persistence was related to the students’ ability to demonstrate self-efficacy and resilience (2015).
It should be noted that the timing of the study may have resulted in the participants being overwhelmingly positive. The interviews were conducted shortly after a long break, and participants had not been given large assignments or any exams prior to the interviews. It would be interesting to see whether students who had failed a course in the past would share the same positive beliefs.

**Personal Connection and Belief in God**

All nine participants described both a belief in God and a positive personal connection with Him. Given that the study was conducted at a private, faith-based university, this finding was expected. This theme supports the literature, as spiritual well-being has been found to be associated with a positive relationship with God (Ellison, 1983). Some participants described a belief that God was with them and constantly guiding them. Other participants shared that they were becoming nurses to fulfill the purpose God had created for them. This description of their “purpose” is interwoven with the existential themes of a desire to help others and the goals and values associated with being a nurse.

This finding suggests that universities with undergraduate nursing programs should provide opportunities to help students further explore their relationship to God or a higher power and their purpose in life. It might be helpful for the students to participate in self-reflective activities that allow articulation of their personal beliefs. These offerings could be conducted through extra-curricular activities such as participating in campus ministry or Bible study groups.

**God is Forgiving**

Participants described God as being loving, non-judgmental, and forgiving. One participant compared God’s love to that of a parent by sharing that His love was unconditional. Another participant shared that because she is human, there will be times that she sins or falls
short and that God would be there, and his love would remain constant. Again, this is an expected finding given the university where the study was conducted is a private, faith-based institution. Participants described their relationship with God as a safe place. It is possible that, because the participants believed that God was forgiving and that they would be loved by God no matter what, they may have suffered less from anxiety than a student who did not hold this belief. Many exams in nursing education are high stakes, so having controlled anxiety could have contributed to academic success.

Participants described God’s evaluation of them and shared that God’s evaluation mattered far more than anyone else’s. This finding emulates the work of Ellison (1983) who found those with spiritual well-being to describe God’s evaluation of them as being the most important in their life.

**Spiritual Practices**

Participating in religious practices was shared by seven participants. These practices were used to help describe the participants’ religious spiritual well-being. The religious practices also are related to the theme of personal connection and belief in God as they are also demonstrative of a positive relationship with God. The participants shared their use of religious practices both in describing their relationship with God and when describing how their spiritual well-being related to academic success. Thus, this theme relates to the theme religious practices as a coping mechanism associated with research question three.

One student described religious practices as a way to get through the day and onto the next and another described reciting a Bible verse to help relax. The religious practices the participants described varied but were expected findings and included those such as reading the Bible, meditating, praying, and attending church. The findings from this theme support Genia’s
deduction that worship attendance was associated with religious well-being in college students (2001). This finding strongly suggests that it may be helpful for nursing students to be offered opportunities to participate in religious practices as part of their college experience.

Research Question Two: How do Undergraduate Senior-level Nursing Students at a Private University in the Midwest Believe Spiritual Well-Being Affects Academic Persistence?

The findings for this research questions resulted in four themes and four sub-themes. The following are the identified themes and their sub-themes:

1. The Process of Acceptance
   a. Self-Reproach
   b. Factors Beyond Control
   c. Non-Defining
2. Ability to Find the Positive
3. Getting Support
4. Not Stopping
   a. Turning to God

The Process of Acceptance

When describing a response to when things did not go as well as expected, participants described feelings of self-reproach, a recognition that there were factors beyond their control causing the unexpected outcome, and an understanding that the outcome was not self-defining. Although two participants shared an initial questioning of God, the majority of participants shared feeling disappointed in themselves when learning that an academic situation had not turned out as expected.
It appeared that the participants knew themselves well and could account for whether they deserved the grade they had earned. Participants shared an ability to recognize that their lack of success was not always related to them. The personal causes for their lack of success were associated with an external locus of control and included illness, financial problems, and family needs.

Finally, participants shared that their lack of academic success in one given situation did not define them as a person or a nurse. Participants recognized that a poor test grade or performance on a psychomotor skills evaluation did not indicate that they were not a good person or that they would not become a good nurse. This self-recognition describes the participants’ self-efficacy, one of the factors that Jeffreys (2015) describes in relation to academic persistence and retention. These findings support the current literature, suggesting that nursing educators should identify and implement strategies that assist students in further developing their self-efficacy. Students who have difficulty balancing internal versus external control may benefit from programming related to fixed mindset versus growth mindset.

**Ability to Find the Positive**

Participants described their responses to an academic situation that did not go as expected. In doing so, participants described an ability to find the positive. Participants shared that focusing on the negative would not help accomplish their goals. Instead, they shared that they needed to focus on what worked and learn from past mistakes. This finding correlates with the work of Lewis (2018), who found that students who were persistent were able to find the positive amid setbacks. This finding was expected because the participants had been academically persistent; they had already faced obstacles and discovered ways to overcome them.
This theme promotes the concept of remediation. Nursing educators should be encouraged to help students identify areas of weakness and determine additional resources and strategies that would assist in helping the student achieve content mastery.

**Getting Support**

Students described the need for getting support from others to achieve academic persistence. This support came from peers, family, and their instructors. This finding was expected as it supports the findings of both Williams (2010) and Lewis (2018). In each of these previous studies, peers and instructors were shown to impact students positively. It most likely would be difficult for a student to progress through a nursing program without the support of nursing faculty; nursing faculty members provide students with academic and professional advice and assistance with remedial activities.

The finding suggests that nursing educators should consider helping nursing students to define their support system and explore additional opportunities related to it. Students may benefit from a peer-mentoring program or one-on-one meetings with their nursing instructors. In addition, this finding supports the notion that it is essential for the relationship between the faculty members and students to be positive.

**Not Stopping**

The final theme for research question two related to mindset. Participants described a determined mindset, which promoted their academic persistence. In the literature, having a determined mindset was associated with academic persistence (Williams, 2010). The participants did not give up easily. They had the necessary mindset to remain persistent and committed to reaching their goals. In addition to their mindset, all nine participants shared that
they had turned to God in an effort to continue. This finding correlates to the literature by Lewis (2018), who found that students turned to faith in a higher power when experiencing a setback.

This theme is related to the personal connection and belief in God theme that the first research question revealed. Participants shared that they had a close enough relationship with God that they could turn to Him for support when they needed it most. This finding was expected, given that the location of the study was a private, faith-based university and given the personal values shared by the participants.

**Research Question Three: What are the Perceptions of Senior-level Nursing Students at a Private University in the Midwest Regarding their Own Experience of the Relationship Between Spiritual Well-Being and Academic Success?**

The findings for this research question resulted in the following two themes:

1. **God’s Presence**

2. **Religious Practices as a Coping Mechanism**

The discussion and analysis of this question includes how each theme is associated with the literature and briefly provides implications for practice.

**God’s Presence and Support**

All nine participants believed that their spiritual well-being played a role in their ability to be academically successful. Interestingly, participants primarily described religious well-being when sharing how spiritual well-being was associated with academic success. Participants described their ability to be academically successful in relation to their personal connection to God. They described God as watching over them, giving them purpose, and providing a sense of comfort and safety. Participants demonstrated self-efficacy by recognizing their limitations and asking for help when needed.
This theme relates to a theme from the first research question: a personal connection and belief in God. Participants describe this connection and belief as something that helped them achieve academic success. In addition, this theme also relates to the sub-theme associated with research question two: turning to God.

These findings are demonstrative of the participants religious well-being. These findings contribute new information to the body of knowledge associated with academic persistence and academic success. These findings suggest that there is a relationship between spiritual well-being and academic persistence and between spiritual well-being and academic success. Further research is needed to more fully explore the relationships between each concept.

In conducting further research, it would be beneficial to quantitatively measure spiritual well-being using Paloutzian and Ellison’s Spiritual Well-Being Scale. It is worth noting that nursing students utilized the scale at the beginning and end of their nursing program and produced statistically significant scores (Abassi, Farahani-Nia, Mehrdad, Givari, & Haghani, 2014). This indicates there may be opportunity for nurse educators to implement intervention and assist students to improve their scores. The findings of this study in combination with the study by Abassi et al. (2014) confirm that it may be beneficial for nursing educators to explore and implement strategies that promote spiritual well-being.

There was very little literature related to the promotion of spiritual well-being among college students. Paloutzian described spiritual well-being as a by-product from focusing on the meanings that transcend oneself (2002, p 18.). Nurse faculty can help students to explore the deeper meaning for becoming a professional nurse through reflective activities. In support of improving spiritual well-being for college students, Anye, Gallien, Bian, & Moulton (2013) shared that “program components that emphasize reflection on the meaning of life and a search
for purpose, as well as encourage altruism and greater connectedness to others, should be included in planned interventions for young adults” (p. 420).

**Religious Practices as a Coping Mechanism**

This theme directly relates to the theme religious practices that were discovered in research question one. It also relates to the sub-theme of turning to God in research question two. Whereas in the theme religious practices participants described religious practices when describing their relationship to God, here participants described religious practices being used as coping mechanisms. One participant described an ability to decompress from the stress of nursing school through attending church services while another described listening to Christian music and praying before tests in order to help relax.

Although these religious practices indicate positive religious well-being, they were not described in the literature in relation to academic success. Participants’ descriptions of religious practices as coping mechanisms further provide insight into how spiritual well-being affects academic persistence and academic success.

Nursing didactic exams and psychomotor skills evaluations are often times high stakes events for the students. This theme strongly suggests that it may be beneficial for nurse educators to encourage nursing students to identify and/or continue to use religious practices as coping mechanisms to help reduce stress and anxiety.

**Summary**

The researcher expected several findings associated with this study. The researcher expected participants to have goals and values associated with being a nurse. Participants all attend a private, faith-based university. The researcher, thus, was not surprised to discover that all the participants believed in God. The researcher was pleasantly surprised to learn that
although participants were nearing graduation, they were already making plans for their future education. Another unexpected finding was the number of students who shared use of religious practices as a coping mechanism. Seven of nine participants shared that religious practices helped them relieve stress and anxiety.

This study uniquely indicates that there is a relationship between spiritual well-being, academic persistence, and academic success as proposed in the researcher’s conceptual framework. Findings from this study are supported by the two constructs of spiritual well-being as described by Paloutzian and Ellison: religious well-being and existential well-being. Participants articulated a sense of their religious well-being by describing both having a belief in God and having a personal connection to God. Participants described existential well-being in sharing their purpose in life as being assigned to them by God and in sharing both goals and values associated with caregivers. This study contributes to the body of knowledge and, as previously mentioned, supports the findings of several studies related to academic persistence and academic success.

Participants described being able to turn to God during times of struggle. In turning to God, they participated in spiritual practices, which helped them feel close to and grow their relationship with God. Finally, these religious practices were used as a coping mechanism to help persist during times of anxiety, stress, and fear. Figure 5.1 depicts the relationships between spiritual well-being, academic persistence, and academic success.
Limitations

Limitations of this study were identified by the researcher. The first limitation resulted in a decrease in generalizability. This resulted from the study being conducted with participants from a single location. Although the study generated rich data, all the participants were students at a private, faith-based university with an all-female undergraduate population. Another limitation was the researcher’s lack of experience in conducting qualitative interviews. This resulted in the researcher not recognizing that, when answering questions associated with the third research question, participants did not share experiences related to existential well-being.
and only shared experiences related to religious well-being. Had the researcher had more experience, the researcher may have prompted participants to elaborate and share their thoughts on existential well-being as well as on academic success.

Participants in the study were those that responded first to the researcher’s email invitation to participate, so it is reasonable to consider that those responding first may be the participants most motivated and made responding a priority. Finally, the researcher identified that participants were given questions related to complex concepts. Although the researcher provided the participants in advance with a list of the planned interview questions, the complexity of the concepts and limited interaction with the researcher remained a limitation in this study.

**Suggestions for Future Research**

The findings from this study indicate the need for further research in a multitude of ways. This study was conducted at a private, faith-based university with an all-female undergraduate population. The study should be replicated at institutions that are neither religiously affiliated and that enroll undergraduate males. Further research studies should be conducted to explore strategies that promote spiritual well-being among nursing students. It is recommended that the Spiritual Well-Being Scale be used quantitatively and related to academic success among nursing students. This study focused on the students’ perspectives on academic persistence, but there was no research found that related to faculty perspectives on academic perspective, which leaves a great opportunity for future studies.

**Implications for Practice**

Implications for practice were shared in relation to the major themes found in exploring each research question. The implications for practice relate to the promotion of spiritual well-
being, academic persistence, and academic success. Illustrative suggestions (and by no means was this list exhaustive) for practice ranged from a variety of perspectives and included options such as providing nursing students with chances to participate in service learning, seeking out opportunities for academic remediation, providing one-on-one faculty-student meetings, pursuing a peer mentoring program, offering opportunities for student reflection, and exploring extra-curricular activities that help students explore spiritual practices.

Conclusion

This chapter described the findings for each research question. The research compared findings to the literature and described them in relation to other findings. A visual figure was provided to help the reader better understand how the findings related based on the descriptions provided by the participants in the study. Implications for practice as well as suggestions for further research were also shared.

Overall, the findings of this study suggest that spiritual well-being has a relationship with both academic persistence and academic success among undergraduate BSN students. Nursing faculty should explore strategies that may be used to promote the spiritual well-being of nursing students in an effort to encourage academic success and ultimately increase the number of nursing student graduates.
References


doi:10.1016/j.nedt.2014.11.004


Reinhart, R. J. (2020, January 10). Nurses continue to rate highest in honesty, ethics.


doi:10.1016/j.ijnurstu.2012.06.006

Appendix A

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Jul 16, 2019

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Appendix B
Appendix C

Participant Interest Questionnaire
Study: Nursing Students’ Perceptions of Spiritual Well-Being, Academic Persistence and Academic Success

IRB Approval ID: CSM 1920

Name:

E-mail Address:

Have you ever withdrawn from a nursing course at College of Saint Mary? (yes/no)

Have you ever failed or had to repeat a nursing course at College of Saint Mary? (yes/no)

Do you believe in a higher power or a God? (yes/no)

If selected to participate in the study, you will be asked to volunteer approximately two hours of your time. Do you agree to this? (yes/no)
### Appendix D

**Interview Questions, Research Question & Supporting Literature**

<table>
<thead>
<tr>
<th><strong>Question</strong></th>
<th><strong>Supporting Literature</strong></th>
</tr>
</thead>
<tbody>
<tr>
<td>How would you describe your relationship with your God or higher power?  (RQ1)</td>
<td>Spiritual well-being is associated with a positive relationship with God (Ellison, 1983).</td>
</tr>
<tr>
<td>Can you share examples of how your relationship with your God or higher power is demonstrated in your everyday life? (RQ1)</td>
<td></td>
</tr>
<tr>
<td>How do you feel God or a higher power evaluates you? (RQ1)</td>
<td>Spiritual well-being is positively related to God’s evaluation of self being more important than the evaluation from others (Ellison, 1983).</td>
</tr>
<tr>
<td>How important is God’s or a higher power’s evaluation of you (and why)? (RQ1)</td>
<td></td>
</tr>
<tr>
<td>Can you describe how you feel on a typical day? (RQ1)</td>
<td>“People who appreciate spiritual well-being tend to feel alive, purposeful, and satisfied” (Abbassi, 2014, p.244).</td>
</tr>
<tr>
<td>In general, do you feel your life is purposeful? How so? (RQ1)</td>
<td></td>
</tr>
<tr>
<td>In general, do you feel satisfied with your life? Why? (RQ1)</td>
<td></td>
</tr>
<tr>
<td>Can you share some of your personal values? (RQ1)</td>
<td>“Personal values and individual goals are necessary for defining life purpose, since life purpose originates from one’s own experiences and observations” (Hodges, 2009, p.163).</td>
</tr>
<tr>
<td>Describe some of your individual goals. (RQ1)</td>
<td></td>
</tr>
<tr>
<td>How do those goals fit with your personal values? (RQ1)</td>
<td></td>
</tr>
<tr>
<td>In life, would you say you see the glass half full or half empty and why? (RQ1)</td>
<td>Hope and optimism are attributes associated with existential well-being or purpose in life (Hodges, 2009).</td>
</tr>
<tr>
<td>Thinking about a time in your life when you experienced something bad academically, how did you handle it? (RQ2)</td>
<td>Those with a positive spiritual well-being are more likely to handle crises with a sense of coping and endurance (Paloutzian, 2002). Students who kept going found the positive in setbacks and turned to faith in a higher power when questioning why they were experiencing a setback (Lewis, 2018). Setbacks were then used to face subsequent challenges (Lewis, 2018). A quantitative</td>
</tr>
<tr>
<td>How did you respond to the situation? (RQ2)</td>
<td></td>
</tr>
<tr>
<td>What were you feeling during that time? (RQ2)</td>
<td></td>
</tr>
<tr>
<td>Question</td>
<td>Answer</td>
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<tr>
<td>-------------------------------------------------------------------------</td>
<td>----------------------------------------------------------------------</td>
</tr>
<tr>
<td>What have you learned from situations in which things didn’t go as you planned? (RQ2)</td>
<td>study associated with adjustment and college students, found a positive relationship between life purpose and ability to adjust to college life (Trevisan, Bass, Powell, &amp; Eckerd, 2017).</td>
</tr>
<tr>
<td>How do you feel spiritual well-being has helped you be successful in nursing school? (RQ3)</td>
<td>Factors that associated with nursing student persistence included feeling believed in by others, a desire to set an example for children, and the desire to fill a lifelong dream (Lewis, 2018).</td>
</tr>
<tr>
<td>Thinking about why you have been successful in nursing school, what are the key factors that have contributed to your success? (RQ3) Would you consider spiritual well-being to be one of them? (why?)</td>
<td></td>
</tr>
</tbody>
</table>
Appendix E

Interview Protocol Project: Nursing Student Perceptions of Spiritual Well-Being, Academic Persistence and Academic Success

Time of interview:
Date:
Place: library study room #
Interviewer: Mindy K. Barna
Interviewee #:

Introduction:

The purpose of my study is to better understand how students feel spiritual well-being affects academic persistence and ultimately academic success. It is extremely important that you answer the interview questions openly and honestly. There are no right or wrong answers as this interview seeks to better understand your thoughts. The interview will consist of the questions you received in the e-mail I sent you approximately one week ago. Feel free to ask questions throughout the interview as needed.

- Ask the interview if she has any questions.
- Notify the participant and obtain written and verbal consent for audio recording.

Ensure audio recording is turned on.

Interview Questions:

1. How would you describe your relationship with your God or higher power?

2. Can you share examples of how your relationship with your God or higher power is demonstrated in your everyday life?

3. Can you explain how you feel you are evaluated by your God?

4. How highly do you evaluate God’s evaluation of you?

5. Can you describe how you feel on a typical day?

6. In general, do you feel your life is purposeful? How so?
7. In general, do you feel satisfied with your life? Why?

8. Can you share some of your personal values?

9. Describe some of your individual goals.

10. How do your goals fit with your personal values?

11. In life, would you say you see the glass half full or half empty and why?

12. Thinking about a time in your life when you experienced something bad academically, how did you handle it?

13. How did you respond to the situation? What were you feeling during that time?

14. What have you learned from situations in which things didn’t go as you planned?

15. How do you feel spiritual well-being has helped you be successful in nursing school?

16. Thinking about why you have been successful in nursing school, what are the key factors that have contributed to your success? Would you consider spiritual well-being to be one of them? (why or why not)

To best describe the group of participants for this study, I have a few demographic and background questions I’d like to ask before ending our meeting.

17. What is your age?
18. What is your ethnicity?

19. Are you married?

20. Do you have any previous college experience?

21. Are you a first generation college student?

22. Do you currently, or have you ever worked in the healthcare field? If so, please describe your role and the setting.

23. Do you have children?

24. Are you receiving a Pell Grant through Federal Financial Aid to assist you with paying for college tuition?

25. Do you believe in God or a higher power? If so, do you associate yourself with a particular religion?

Potential probes
• “Could you tell me more about…”
• “What else can you tell me about…”
• “When you say….. what does that mean?”
• “Can you give me an example…..”

Closing
Thank you for taking the time out of your busy schedule to participate in this study. If you have any questions please feel free to contact me. I will be sending you a summary of the findings of this study and will ask you to provide feedback should you have any. I want to assure you that your identity will remain anonymous. I will not use your name in the write up of this study and I will keep all that you shared with me in password protected electronic files.
Appendix F

December 13, 2019

Dear Mindy,

Congratulations! The Institutional Review Board at College of Saint Mary has granted approval of your study titled *Nursing Students’ Perceptions of Spiritual Well-Being, Academic Persistence, and Academic Success*.

Your CSM research approval number is **CSM 1920**. It is important that you include this research number on all correspondence regarding your study. Approval for your study is effective through December 31, 2020. If your research extends beyond that date, please submit a “Change of Protocol/Extension” form which can be found in Appendix B at the end of the College of Saint Mary Application Guidelines posted on the IRB Community site.

Please submit a closing the study form (Appendix C of the IRB Guidebook) when you have completed your study.

Good luck with your research! If you have any questions or I can assist in any way, please feel free to contact me.

Sincerely,

[Vicky Morgan]

Dr. Vicky Morgan  
Chair, Institutional Review Board  
Associate Dean of Faculty Development

7000 Mercy Road • Omaha, NE 68106-2606 • 402.399.2400 • FAX 402.399.2341 • www.csm.edu
Appendix G

Undergraduate Nursing Department Letter of Permission

January 6, 2020

Dear Mindy Barna,

Based on my review of your research project proposal, I give permission for you to conduct the study entitled “Nursing Students’ Perception of Spiritual Well-Being, Academic Persistence, and Academic Success” in the College of Saint Mary undergraduate nursing department. This permission is dependent upon approval of the study by the College of Saint Mary IRB.

As part of this proposal, I authorize you to invite the BSN students to participate in the study as subjects. The participation will be voluntary and at their own discretion. Subjects may revoke the right to withdraw from the study at any time. I also reserve the right at any time to suspend this study in my department if I deem it necessary.

I understand your project will be conducted during the Spring 2020 semester and that the data collected will remain entirely confidential and may not be provided to anyone outside of the research team without permission from the College of Saint Mary IRB.

Good luck on your research!

Sincerely,

Cheri Heumann, EdD, MSN, RN
Director of Undergraduate Nursing
Appendix H

Certificate of Completion

The National Institutes of Health (NIH) Office of Extramural Research certifies that Mindy Barna successfully completed the NIH Web-based training course "Protecting Human Research Participants."

Date of Completion: 09/05/2018

Certification Number: 2908953
Appendix I

COLLEGE OF SAINT MARY

Adult Consent Form

IRB#: CSM 1920    Approval Date: 12/13/2019    Expiration Date: 12/31/2020

Title of this Research Study: NURSING STUDENTS’ PERCEPTIONS OF SPIRITUAL WELL-BEING, ACADEMIC PERSISTENCE AND ACADEMIC SUCCESS

Invitation: You are invited to take part in this research study. The information in this form is meant to help you decide whether or not to take part. If you have any questions, please ask.

Why are you being asked to be in this research study? You are being asked to serve as a participant in this study because you are an undergraduate Bachelor of Science in Nursing student within two semesters of graduation. In addition, you have matriculated through your nursing program without having to withdraw or repeat nursing courses.

What is the reason for doing this research study? The purpose of this research study is to explore the perceptions and beliefs of undergraduate senior level nursing students about spiritual well-being in relation to academic persistence and ultimately academic success measured by timely graduation.

What will be done during this research study? The study will be conducted through a one-on-one interview with the researcher. To allow you time to reflect and organize your thoughts, you will be provided with the research definitions and the primary interview questions one week prior to your interview. The time commitment for this study is expected to be no more than 2 hours. You will be asked to spend about 30 minutes reviewing key definitions and interview questions one week before the study. 30-50 minutes will be spent completing a face-to-face interview and you will be asked to spend approximately 30 minutes reviewing a summary of the study findings. Additional follow-up meetings may requested by the researcher if needed.

What are the possible risks of being in this research study? There are no known risks to you from being in this research study.

What are the possible benefits to you? You are not expected to get any direct benefit from being in this research study.

What are the possible benefits to other people? This study may provide a better understanding of how students perceive spiritual well-being affects their ability to achieve academic success.

What are the alternatives to being in this research study? Instead of being in this research study you can choose not to participate.

What will being in this research study cost you? There is no cost to you to be in this research study.

Participant Initials_______
Will you be paid for being in this research study? You will be given a ten dollar gift card to the campus coffee shop as a token of appreciation for your time participating in the study. The researcher will provide you with the gift card upon the completion of your interview.

What should you do if you have a concern during this research study? Your well-being is the major focus of every member of the research team. If you have a concern as a direct result of being in this study, you should immediately contact one of the people listed at the end of this consent.

How will information about you protected? Reasonable steps will be taken to protect your privacy and the confidentiality of your study data. The only persons who will have access to your research records are the study personnel, the Institutional Review Board (IRB), and another other person or agency required by law. The information from this study may be published in scientific journals or presented at scientific meetings but your identity will be kept strictly confidential.

What are your rights as a research participant? You have rights as a research participant. These rights have been explained in this consent form and in The Rights of Research Participants that you have been given. If you have any questions concerning your rights, talk to the investigator or call the Institutional Review Board (IRB), telephone (402)-399-2400.

What will happen if you decide not to be in this research study or decide to stop participating once you start? You can decide not to be in this research study, or you can stop being in this research study (“withdraw”) at any time before, during, or after the research begins. Deciding not to be in this research study or deciding to withdraw will not affect your relationship with the investigator, or with the College of Saint Mary. You will not lose any benefits to which you are entitled. If the research team gets any new information during this research study that may affect whether you would want to continue being in the study, you will be informed promptly.

Participant Initials_______

Documentation of informed consent: You are freely making a decision whether to be in this research study. Signing this form means that (1) you have read and understood this consent form, (2) you have had the consent form explained to you, (3) you have had your questions answered and (4) you have decided to be in the research study (“withdraw”) at any time before, during, or after the research begins.

If you have any questions during the study, you should talk to one of the investigators listed below. You will be given a copy of this consent form to keep.

If you are 19 years of age or older and agree with the above, please sign below.

Signature of Participant: Date: Time:

My signature certifies that all the elements of informed consent described on this consent form have been explained fully to the participant. In my judgment, the participant possesses the legal capacity to give informed consent to participate in this research and is voluntarily and knowingly giving informed consent to participate.

Signature of Investigator: Date:
Authorized Study Personnel. Identify all personnel authorized to document consent as listed in the IRB Application.

Principal Investigator: Mindy Barna MSN, RN  Phone: 402-399-2377
Secondary Investigator: Dr. Jennifer Reed-Bouley  Phone: 402-399-2632