Running head: PERCEPTIONS OF NCLEX-RN® SUCCESS
National Council Licensure Examination for Registered Nurses (NCLEX-RN®) Success:
Perceptions of Accelerated Second-Degree Bachelor of Science in Nursing Students
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A dissertation submitted to the
Passan School of Nursing

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Dedication

My dad said he always wanted me to become a doctor. I took a little longer than most.

This dissertation is dedicated to my family; without them this accomplishment might never have been realized. To my dad and mom, David and Madeline Fritz, who always supported me in everything I wanted to do. To my brother, David Fritz, who was always there to listen and help whenever needed. To my husband, Edward Brzoza, for his love and assistance during the long hours of studying and writing. To my children, Hanna and Chase Brzoza, who learned to cook for themselves.

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Abstract

Most of the 50 states in the United States (U.S.) will experience a significant nursing shortage by the year 2030. Research finds that a bachelor of science in nursing (BSN) workforce is associated with better outcomes, fewer adverse events, and lower patient mortality than associate or diploma prepared nurses. BSN-prepared nurses are in great demand, and the accelerated second-degree bachelor of science in nursing (ABSN) programs may meet this need. This study investigates how to be successful in these ABSN programs. The purpose of this study was to describe the ABSN students' perceptions and experiences of what they believe to be factors of success in completing their ABSN program and in passing the National Council Licensure Examination for Registered Nurses (NCLEX-RN®) on the first attempt. A qualitative hermeneutic phenomenology approach and Knowles's (1980, 1984) adult learning theory guided this study. A purposive sample of ABSN students from three northeastern U.S. universities were interviewed. Data analysis was completed using the Diekelmann, Allen, and Tanner (1989) hermeneutic analysis method. The resulting themes included (a) responding to the call, (b) unleashing the power within, (c) support systems, and (d) one life-changing test. Results from this study may be used to assist nurse faculty in identifying key factors to support student retention and success in ABSN programs and on the NCLEX-RN®. Findings from this study may also help fill the growing U.S. need for BSN-prepared nurses.

Keywords: accelerated second-degree bachelor of science in nursing, bachelor of science in nursing, National Council Licensure Examination for Registered Nurses, academic achievement

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Chapter I. Statement of the Problem

Nurses perform a crucial role in providing safe and valuable healthcare in the United States (U.S.). The Institute of Medicine (IOM) published a revolutionary report recommending that the proportion of nurses in the U.S. who hold a bachelor of science in nursing (BSN) be increased to 80% by 2020 (Institute of Medicine of the National Academies [IOM], 2010). As of 2015, there were approximately three million registered nurses (RNs), only 42% of whom had obtained their bachelor's degree (National Academies of Sciences, Engineering, and Medicine [NASEM], 2016; National Council of State Boards of Nursing [NCSBN], 2018a). To meet the IOM goal, baccalaureate schools of nursing need to admit and graduate more students. In addition, these students must pass the National Council Licensure Examination for Registered Nurses (NCLEX-RN®).

There are several options for pursuing a BSN degree in the U.S. One option is the Accelerated Second-Degree Bachelor of Science in Nursing (ABSN) program. Available in 49 states, ABSN programs allow individuals to transform a previous non-nursing bachelor's degree into a bachelor's degree in nursing (American Association of Colleges of Nursing [AACN], 2019a, 2019b). These programs are intended to allow individuals to enter the nursing workforce more quickly than they would have with a traditional four-year BSN program (AACN, 2019b; Raines, 2010). As such, these programs assist in meeting the rapidly growing demand for baccalaureate-prepared RNs, especially in light of the IOM (2010) report and the predictions of a future nursing shortage (Buerhaus, Skinner, Auerbach, & Staiger, 2017; Carnevale, Smith, & Gulish, 2015; Juraschek, Zhang, Ranganathan, & Lin, 2012; Staiger, Auerbach, & Buerhaus, 2012; Zhang, Tai, Pforsich, & Lin, 2018).

The RN shortage timeline varies, but the references cited above anticipate the shortage will occur in the very near future. For the year 2020, Carnevale et al. (2015) predict an

approximate 1.2 million job openings for RNs. Using a different calculation, Juraschek et al. (2012) estimate approximately one million RNs will be needed by the year 2030. Staiger et al. (2012) predict "growth in the demand for RNs over the next few years will outstrip the projected growth in the workforce," leading to an RN shortage of hundreds of thousands (p. 1465). Zhang et al. (2018) identify a shortage of approximately 500,000 RNs by 2030, with 37 out of 50 states being critically impacted.

ABSN programs represent an expeditious way to meet the growing need for RNs. These programs allow students who have a previous non-nursing bachelor's degree from an accredited school to complete nursing courses and obtain a BSN within 11 to 18 months (AACN, 2015a, 2019b). Admission criteria for ABSN programs are consistent with, or slightly more demanding than, those for traditional four-year BSN programs (AACN, 2013; AACN, 2015a; American Association of Colleges of Nursing/Nursing Centralized Application Service [AACN/NCAS], 2018; Feldman & Jordet, 1989; Raines, 2010; Rodgers, Burson, & Kirschling, 2004; Shiber, 2003; Vinal & Whitman, 1994). ABSN applicants go through a rigorous screening process, with applications typically requiring an overall grade point average (GPA) of at least 2.75 (AACN, 2015a; AACN, 2019b; AACN/NCAS, 2018; Rodgers et al., 2004), a GPA for science prerequisites of 2.0 or higher (AACN/NCAS, 2018; Feldman & Jordet, 1989; Rodgers et al., 2004; Shiber, 2003), a written essay explaining why the applicant wants to be a nurse and how they will excel in the program (AACN/NCAS, 2018; Raines, 2010), academic and professional references (AACN/NCAS, 2018; Vinal & Whitman, 1994), and a resume (AACN/NCAS, 2018). Some schools also require an interview with program faculty (AACN, 2013; AACN/NCAS, 2018) and/or an entrance exam prior to acceptance (AACN/NCAS, 2018; Vinal & Whitman,

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1994). After clearing all of these preadmission criteria, the student then prepares for an intensive curriculum lasting 11 to 18 months (AACN, 2015a, 2019b).

This nontraditional way to become an RN appeals to some individuals who previously chose other undergraduate specialties but then decide to pursue their goal of becoming a nurse. The programs help fill the growing need for baccalaureate-prepared nurses at a faster pace than the traditional four-year programs. If ABSN programs are to meet this need, academic achievement and retention are paramount. The hopes and expectations of the faculty and the students themselves are that every student finishes the program in the allotted timeframe and then passes the national licensing exam on the first attempt (Blozen, 2010; Koestler, 2015). Such success is not always the case, as these programs, as well as traditional programs, have attrition. While there is abundant evidence that the traditional BSN program attrition rate ranges between 4% and 26% (Gipson-Jones, 2017; Hensley, 2013; Owen, 2015), there is little current evidence about attrition or success rates in ABSN programs. Feldman and Jordet (1989) report a 26% attrition rate in a class of 72 admitted students, with 53 graduating. Others find an average attrition rate between 10% and 23% for accelerated students who are fully admitted (Bentley, 2006; Rodgers et al., 2004; Rosenberg, Perraud, & Willis, 2007; Seldomridge & DiBartolo, 2007). Suplee and Glasgow (2008) state overall attrition rates are higher in accelerated programs than in traditional BSN programs. Understanding the reasons prequalified students leave an ABSN program and the reasons graduates do not pass the NCLEX-RN® exam is essential to improving retention, developing interventions for academic success, and supplying more qualified individuals to the nursing workforce.

This phenomenological study looks at the first-hand experience of students in an ABSN program. Phenomenological inquiry depicts the "lived experiences of individuals undergoing a

phenomenon as described by the participants" (Creswell & Creswell, 2018, p. 13). It offers a description of the world the participant lives in as the participant has lived it. This study focuses on the individual ABSN student's perceptions of factors contributing to their graduation from an ABSN program and their NCLEX-RN® success.

Problem Statement

Students accepted into an ABSN program are screened according to rigorous admission criteria. Despite this screening, Rouse and Rooda (2010) note attrition in ABSN programs may be up to six times higher than in traditional BSN programs, but there is limited research regarding attrition in these programs. With the rapidly approaching shortage of nurses, there is a need to admit students to ABSN programs who have the necessary skills and motivation to succeed.

Retention and success in ABSN programs are vital for several reasons. With future predictions describing a nursing shortage and the IOM (2010) recommendation that 80% of the RN workforce be prepared at the BSN level, colleges and universities are rising to the challenge of creating more nurses in a shorter period of time by offering ABSN programs. Even though these second-degree accelerated programs are growing rapidly, insufficient attention has been invested in understanding the attributes and perceptions of ABSN students. The literature includes little research on the distinguishing characteristics of ABSN students, much less on their perceptions of success, especially regarding passing the NCLEX-RN®. Furthermore, although the research amply reports on traditional nursing students' perceptions of NCLEX-RN® success, those perceptions may not be shared by students in ABSN programs (DiNatale Stoehr, 2014; Petges, 2016; Yeom, 2013). Rouse and Rooda (2010) and Schwartz and Gambescia (2017) concur there is sparse research on ABSN student retention, attrition, and success. In their

conclusions, Rouse and Rooda (2010) and Cantwell, Napierkowski, Gundersen, and Naqvi (2015) identify a need to further assess the retention of ABSN students and interventions to assist with that retention. They recognize this support of student retention and success as critical to ABSN programs and to addressing the nursing shortage (Cantwell et al., 2015; Rouse & Rooda, 2010).

Purpose of Study

The purpose of this hermeneutic phenomenological study is to describe and interpret the perceptions and experiences of ABSN students and to identify what they believe to be factors of success in completing the program and in passing the NCLEX-RN® on the first attempt. Results from this study may assist nursing faculty and nursing school administrators in identifying key elements to support retention and student success in ABSN programs and on the NCLEX-RN®.

Research Question

The central question for this study is the following: What is the lived experience of ABSN students who have graduated from an accelerated program and passed the NCLEX-RN® on the first attempt?

Philosophical Background

This study is grounded in a constructivist worldview. Crotty (1998) states that all knowledge is dependent on individual practices and experiences (Crotty, 1998). While attending an institution of higher education, students engage in a range of practices and experiences that shape their understanding and expectations of their situation. Constructivism reasons that students are active participants in creating knowledge based on their understandings and expectations (Crotty, 1998; Mensah, 2015).

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Crotty (1998) associates several assumptions with constructivism. Assumption one is that individuals build meaning as they participate in the world they are interpreting (Crotty, 1998). To reveal this meaning in a qualitative study, open-ended questions are asked to allow participants to communicate an understanding of the world in which they live. The second assumption is that an individual engages with the world and uses historical and social perspectives to make sense of it (Crotty, 1998). The world becomes clear as the individual interacts with it and uses previous knowledge to understand it. The third assumption is that meaning results from interaction (Crotty, 1998). To fully comprehend the participant's worldview explanation, the researcher personally gathers information from the participant. The researcher identifies meaning from the interactions with the participants. The researcher interprets the findings from the interviews by using knowledge and experience to mold the interpretation. The constructivist worldview is appropriate for this qualitative study, which generates meaning from ABSN students' views of their personal experiences in the accelerated program. Their observations and interpretations convey their perceptions of the path they followed in completing the ABSN program and succeeding on the NCLEX-RN®.

The constructivist worldview influences the qualitative approach to this study by leading the researcher to answer the research question from the students' points of view. The study purpose is to discover information from the participants regarding the ABSN experience.

Participants, who were actively involved in the program, explain the meaning they acquired from daily events and interactions. The research question focuses on the perceptions and experiences of ABSN students in relation to program retention and NCLEX-RN® success.

There are many ways to conduct qualitative research. Using a constructivist worldview as a foundation, a phenomenological method allows the researcher to embrace an experience

through the viewpoint of another. The use of phenomenological inquiry in this study permits participants to verbalize practices, experiences, and understandings that contribute to a construction of meaning of a specific phenomenon. This inductive approach exposes the essence of the experience and allows the researcher to explore depth and breadth of a specific phenomenon (Willgens et al., 2016). Adding a hermeneutic aspect to this method allows the researcher to incorporate previous experiences and knowledge in interpreting meanings and revelations from the participants (van Manen, 2017). The presentation of information collected is intended to provide the reader with a strong sense of experiencing the phenomenon.

Theoretical Framework

In this study, the theoretical framework of andragogy, the adult learning theory of Knowles (1984), is used to describe the ABSN students. Knowles (1984) defines andragogy as learning techniques adults use to acquire knowledge. Knowles (1984) investigated various types of students, identifying characteristics associated specifically with adult learners.

Knowles (1984) describes an adult in the psychological sense as a person who takes on the roles of an adult and is self-directed or responsible for their own life. He then lists key assumptions about how adult learners process information:

- they have a need to know;
- they have a readiness to learn;
- experience is the richest resource for their learning;
- they need to be self-directing;
- their orientation to learning is life-centered; and
- their most potent motivators are internal pressures, such as self-esteem and quality of life (Knowles, 1984, p. 31).

Knowles (1984) identifies self-directedness, utilization of experiences, motivation, and engagement in learning as changing and increasing as a person matures.

In the literature, some of Knowles's key assumptions are present in ABSN students. Most students in an ABSN program are older and are known to approach learning situations with maturity (Cangelosi & Whitt, 2005; Millett, Stickler, & Wang, 2015; Rodgers et al., 2004). The typical accelerated nursing student is motivated (Feldman & Jordet, 1989; Millett et al., 2015; Rodgers et al., 2004) and has higher scholastic expectations than a student in a traditional nursing program (AACN, 2015a; Feldman & Jordet, 1989). Accelerated second-degree bachelor of science in nursing students are self-directed individuals (Cangelosi & Whitt, 2005; Millett et al., 2015) who bring their life experiences with them to classes and clinical work (Cangelosi & Whitt, 2005; Millett et al., 2015). Thus, ABSN students fit the description of adult learners (Penprase & Koczara, 2009).

Knowles's (1984) theory helps to explain the adult learner and the way adults approach learning. The key concepts of the adult learning theory give the researcher an idea of the students' views of their world and the way they approach learning. The theory creates a framework that guides the study in answering the research question. It provides a base of knowledge to assist the researcher in interpreting students' perceptions and experiences, which illuminates the path to program retention and NCLEX-RN® success.

Assumptions and Limitations

One assumption in a qualitative study is the researcher's assumption of accuracy in the information provided in interviews (Atieno, 2009; Burns & Grove, 1997; Waltz, Strickland, & Lenz, 2017). A participant may believe the researcher wants a particular answer and may then, to please the researcher, formulate the answer to reflect that desire (Farnsworth, 2016). This is

known as participant bias and may be diminished by the researcher verifying, when possible, pieces of information and approaching questions in a nonjudgmental way (Farnsworth, 2016).

A different aspect of participant bias is a respondent's failing to answer questions honestly in an attempt to portray something different about a character trait. This bias is labeled *social desirability* (Waltz et al., 2017). Some participants may give exaggerated or dishonest answers in an effort to make themselves look good (Creswell & Creswell, 2018; Waltz et al., 2017). A researcher can minimize this type of bias by assuring the participant of confidentiality and by ensuring the participant fully understands the question (Creswell & Creswell, 2018, Waltz et al., 2017).

Another assumption is that the inclusion criteria will capture participants who have experienced the same phenomena. While it is almost impossible to find a group of participants who describe experiences in exactly the same way, the researcher examined the data for this study to find common patterns that connect participants' experiences and perceptions (Locke, Spirduso, & Silverman, 2014). Although the study is not generalizable beyond ABSN programs, results may be used as a beginning to identify other components of ABSN student success (Farrokhi & Mahmoudi-Hamidabad, 2012). Moreover, the recurring themes that emerge from the data may be transferrable to other settings, programs, people, and contexts, giving insight to students or schools for further research.

One limitation of this study is that the participants are from a small sample of ABSN nursing programs in the northeast U.S. The participants in the study are a purposive sample restricted to students who graduated from an ABSN program and who passed the NCLEX-RN® on the first attempt. Therefore, one type of demographic group is under- or over-represented based on the participant population.

Another limitation is related to the fact that the "researcher's presence may bias responses" (Creswell & Creswell, 2018, p. 188). In qualitative inquiry, the interviewer is essentially the instrument of data collection (Baillie, 2015; Brisola & Cury, 2016). A participant's response may be altered if the interviewer fails to follow consistent procedures when asking the questions in the interview process (Creswell & Creswell, 2018). Questions are asked with uniformity and objectivity to decrease, if not eliminate, this bias (Creswell & Creswell & Creswell at a Creswell, 2018). Another concern with the use of the researcher as the instrument of data collection is that the researcher may inject personal, historical, or social perspectives when interpreting the interview data (Waltz et al., 2017; Anderson, 2010). Interpreting data with objectivity minimizes this type of bias and focuses the study on the participants' points of view.

Significance of the Study

Although the number of students enrolled in ABSN programs has grown dramatically in the last 20 years (AACN, 2015a, 2019a), research on these programs is lacking. The discipline of nursing needs to understand the experiences of the ABSN student to fully support these students, as they are valuable assets in the effort to increase the number of BSN-prepared RNs in the U.S. Findings from this study regarding the students' perceptions and experiences may contribute to the general nursing knowledge about this specialized population. Given the lack of research about the success of ABSN students, this study may offer some insights into success that may help improve ASBN programs and may benefit nursing schools.

Knowledge gained from successful ABSN students may assist schools of nursing in areas ranging from the admission process, to recognition of students at risk, to educational considerations, to program policies and procedures. It is vital that nursing schools recognize and implement effective methods to retain as many ABSN students as possible. Attrition from

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unsuccessful ABSN students is damaging to society, as the loss of prospective nurses may exacerbate the future nursing shortage (Abele, Penprase, & Terres, 2013; Mulholland, Anionwu, Atkins, Tappern, & Franks, 2008). Attrition also has financial repercussions for both student and school, as the cost of nursing education must increase to cover the time and resources used to assist students who are not successful (Abele et al., 2013; Mulholland et al., 2008). With a better understanding of the factors of success, it may be possible to develop strategies to enhance persistence and decrease attrition. If factors the ABSN students describe are considered valuable to program and NCLEX-RN® success, schools of nursing may want to consider them from the very beginning as they recruit candidates for ABSN programs. In addition, these factors may contribute to first-time success on the NCLEX-RN®. Success on the national nursing licensing exam on the first attempt is a goal of every student, school, and educator (Blozen, 2010; Koestler, 2015).

If program components are mentioned as key factors for success, educators may contemplate altering their teaching styles to incorporate some of the students' specific needs and suggestions. Ideas for improvements in best practices and/or teaching and learning strategies may also be gleaned from this research. In nursing education, retaining students is important, but successfully educating a student is critical.

Findings from this study may be significant in many areas in nursing. The implications range from increasing the general well-being of society, by providing more individuals for the nursing workforce, to enhancing the individual student's success. More information about this specialized population of nursing students adds to the scarce nursing research related to the ABSN student. By looking more deeply into the perceptions of the ABSN student and attempting to understand students' thoughts about which factors lead to success in the program

and on the NCLEX-RN®, nursing schools can offer the most advantageous education to help nursing students meet their goals and benefit the future communities and patients they will serve.

Definition of Terms

Accelerated Bachelor of Science in Nursing Student—a student who holds a bachelor's degree in a non-nursing field and has been admitted to an ABSN program (AACN, 2015a).

Adult Learner—a mature, motivated individual who is self-directed, believes learning is lifelong, and uses prior experiences to help integrate new information into knowledge (Knowles, 1984).

Andragogy—andragogy, otherwise identified as adult learning theory, describes the process by which some adults learn (Knowles, 1984).

Attrition Rate—the number of students who leave or are unsuccessful in the program, for academic or other reasons (Jinks, Richardson, Jones, & Kirton, 2014).

National Council of Licensure Examination for Registered Nurses—a national licensing examination for registered nursing graduates who have graduated from an accredited nursing program. This examination is given to assist with regulatory standards for entry into nursing practice (NCSBN, 2018b).

Registered Nurse—an educated and trained graduate from a school of nursing who has passed a national licensure exam for registered nurses ("Registered Nurse," 2018, para.1).

Retention—continuous enrollment in a nursing program without withdrawal for any reason (Jeffreys, 2004).

Traditional Bachelor of Science in Nursing Student—a student who is enrolled in an accredited four-year baccalaureate nursing program (AACN, 2018).

Chapter Summary

In this chapter, the problem statement clearly describes the need for the study and the subject matter surrounding the study. What and who is being studied are noted in the sections on the study purpose and the research question. The philosophical background, along with an explanation of the researcher's worldview, is also provided. The theoretical framework of adult learning theory (Knowles, 1984) is presented as a guide in recognizing characteristics of nursing students in an ABSN program. Assumptions and limitations are addressed to identify potential weaknesses in the study. The significance of the study is identified in terms of application and relevance to the discipline of nursing, and definitions of the study's essential terms conclude the chapter.

Successful students in an ABSN program can provide a potential solution to the increasingly urgent need for new, qualified nurses in the workforce. To improve our understanding of the path to success in an ABSN program, this study seeks to recognize common patterns and themes acknowledged by the students themselves. The purpose of this hermeneutic phenomenological study is to describe and interpret the perceptions and experiences of ABSN students and what they believe to be factors of success in completing the program and in passing the NCLEX-RN® on the first attempt. This purpose is supported by the research question, which refers to identifying the lived experience of ABSN students who have graduated from an accelerated program and passed the NCLEX-RN® on the first attempt. As an additional way to support the study, the philosophical underpinning used is the constructivist worldview, in which participants shape the understandings and expectations of their situation from their own experiences. Using this philosophical underpinning as a foundation, the researcher has chosen a

qualitative design using a hermeneutic phenomenological approach to incorporate the voice of the student participants in answering the research question.

Chapter II. Review of the Literature

The purpose of this hermeneutic phenomenological study is to describe and interpret the perceptions and experiences of ABSN graduates and what they believe to be factors of success in completing the ABSN program and passing the NCLEX-RN® on their first attempt. This chapter contains peer-reviewed research, seminal work, and professional articles from the disciplines of nursing, education, and psychology. The literature review synthesizes the research that currently exists on the topics specific to this study. Topics include (a) the future RN shortage, (b) ABSN programs, (c) program attrition and retention, (d) ABSN students, (e) motivation, (f) academic achievement, and (g) the adult learning theory by Knowles (1980, 1984). Finally, a summary concludes this chapter.

Search of the Literature

A search of the literature was conducted using key terms of the study. The future RN shortage was investigated, beginning with an exploration of the background of the study. This was followed by an extensive review of the literature on ABSN students and programs. To further examine terms associated with the ABSN program and students, the topics of attrition, retention, motivation, academic achievement, and the adult learning theory by Knowles (1980, 1984) were also searched. The databases used were the Cumulative Index to Nursing and Allied Health Literature (CINAHL), the Educational Resources Information Center (ERIC), ProQuest, PubMed, and Psychology. In each database search, the publication date was initially established by a pre-set expanded time frame, then restricted to the most recent years to narrow the search. The search was limited to scholarly and peer-reviewed literature and to publications in English.

An initial search focused on the future RN shortage. Searching the CINAHL and PubMed databases using the term *RN shortage* returned 185 peer-reviewed English-language publications in a pre-set expanded time frame. To narrow the search, the time frame was

changed to 10 years, resulting in approximately 50 professional articles. A review of these articles disclosed 22 useful documents.

A second search explored the population of ABSN students and ABSN programs. It used the search phrase *Accelerated Second-degree Bachelor of Science in Nursing students OR Accelerated Second-degree Bachelor of Science in Nursing programs*. These search terms returned a limited number of peer-reviewed publications. To broaden the search, the search phrase was changed to *second-degree OR second degree AND nurse student OR nursing program*, resulting in approximately 50 peer-reviewed research manuscripts or professional articles. The reference lists in the manuscripts were searched to augment the information in the literature review. This search revealed 10 more useful documents.

The topics of attrition and retention for ABSN students were investigated in the CINAHL and ERIC databases using the search terms *attrition* and *retention* with the modifier *second-degree OR second degree AND nurse student OR nursing program*. Criteria for this search included peer-reviewed literature, a 20-year time frame, and a limiter of English. This search resulted in approximately 20 useful peer-reviewed research manuscripts or professional articles.

To explore the concept of academic success, the search terms academic achievement, OR academic performance, and OR academic success using the limiter second-degree OR second degree AND nurse student OR nursing program were investigated in CINAHL, ERIC, and ProQuest. The search criteria included peer-reviewed literature, a 20-year time frame, and an English-language limiter. This search disclosed approximately 30 useful peer-reviewed research manuscripts or professional articles.

The concept of motivation was examined in the literature using the CINAHL, ERIC, and Psychology databases. To focus the search for the current research study, the search phrase used

was *motivation for nursing students* coupled with a limiter of *baccalaureate*. Criteria for this search included peer-reviewed literature, the preset expanded search engine time frame, and a limiter of English. This search revealed five useful peer-reviewed research manuscripts or professional articles, as well as seminal research on motivation.

Lastly, the theoretical framework of the adult learning theory (Knowles, 1980, 1984) was searched in the literature. The assumptions of this theoretical framework was noted in the literature to be associated with the descriptive characteristics of the ABSN students. Initially the topic was searched for solely with the term *adult learning theory*; then the modifier *second-degree OR second degree AND nurse student OR nursing program* was added. Criteria for this search included peer-reviewed literature, the preset search engine time frame, and a limiter of English. The result was three peer-reviewed research manuscripts or professional articles and original seminal work on the adult learning theory (Knowles, 1980, 1984).

Registered Nurse (RN) Shortage

Although there are over three million active nurses in the U.S., a shortage of appropriately trained RNs is forecasted for the near future because as nurses leave the profession there is not a one-to-one replacement (Buerhaus et al., 2017; Carnevale et al., 2015; Henry J. Kaiser Family Foundation, 2018; NCSBN, 2018a, Zhang et al., 2018). As nurses find opportunities elsewhere or retire, new nurses are needed to fill the expected gap in the workforce (Carnevale et al., 2015, NCSBN, 2018a).

There are several ways healthcare is changing in the U.S., and qualified RNs are essential to assist with healthcare needs during this time. The clearest change is the aging of baby boomers and the expectation that their needs will greatly exceed the capacity of caregivers (physicians and nurses) (Buerhaus et al., 2017; Carnevale et al., 2015; Zhang et al., 2018). By

the year 2030, baby boomers will be "70 years old" and older, and the number of elderly individuals in the U.S. will be "55% greater than in 2015" (Kirch & Petelle, 2017, p. 1947). As the population ages, there is a need for more healthcare workers, as "people over the age of 65 encounter three times as many hospital stays annually" as the younger population (Davis, 2016, p. 1). In addition, although it is changing, the Patient Protection and Affordable Care Act (ACA), which maintains goals of increasing the efficiency of healthcare and access to healthcare insurance, has a direct impact on the number and type of patients for which nurses are caring (Berg & Dickow, 2014). This affects the needs for knowledge and experience on the part of nurses. Using nurses to provide care and also to manage health, as the ACA dictates, requires a greater number of highly educated nurses (Berg & Dickow, 2014). Furthermore, the need for nurses is also increased as more school-aged children are identified with early diagnoses of obesity, hypertension, and diabetes (Powell, Engelke, & Swanson, 2018). Immigrants fleeing from underdeveloped countries and coming to the U.S. also generate a need for more nurses (Kan, Choi, & Davis, 2016; Vargas Bustamante et al., 2012).

The number of nurses needed in the workforce continues to grow with healthcare reform, longer life expectancy, the increasing rate of chronic conditions, and the growing severity of infectious diseases (AACN, 2014; Bloom & Cadarette, 2019; Carnevale et al., 2015; Raghupathi & Raghupathi, 2018; Zhang et al., 2018). Zhang et al. (2018) state "37 out of 50 states will experience significant nursing shortages by 2030" (p. 231). Taking all this into consideration, the future of nursing care is dependent on having sufficient numbers of nurses who are appropriately trained.

Nursing education models have been debated for years. The IOM (2010) proposed that by 2020 the majority (80%) of RNs should be baccalaureate-prepared. As of 2015, 42% of RNs

had obtained their bachelor's degree (NASEM, 2016; NCSBN, 2018a). Organizational stakeholders such as the American Association of Colleges of Nursing [AACN], the American Association of Community Colleges [AACC], the Association of Community College Trustees [ACCT], the National League for Nursing [NLN], and the National Organization for Associate Degree Nursing [OADN] endorsed the IOM proposal and are making efforts to meet its goals (Robert Wood Johnson Foundation, 2013, p. 2). These organizations were and still are supporters of the BSN-prepared nurse. Other researchers have noted that education of future nurses is of the utmost importance and is far more effectively accomplished by baccalaureate RN educational preparation (AACN, 2015a; AACN, 2015b; Aiken, Clarke, Cheung, Sloane, & Silber, 2003; IOM, 2010; Kutney-Lee & Aiken, 2013; Yakusheva, Lindrooth, & Weiss, 2014).

Better outcomes, fewer adverse effects, and lower patient mortality rates were associated with BSN-prepared nurses compared to RNs with only diplomas or associate degrees (Aiken et al., 2003; Aiken et al., 2014; Aiken et al., 2017; Kutney-Lee & Aiken, 2013; Yakusheva et al., 2014). A study by Aiken et al. (2003) investigated whether RNs with a baccalaureate or higher education influenced the mortality or failure-to-rescue rates in hospitals. The findings from 168 hospitals in Pennsylvania demonstrated a considerably higher patient survival rate for patients cared for by RNs educated with a bachelor or higher degree (Aiken et al., 2003). These results confirmed the benefit of a "more highly educated nurse workforce" (Aiken et al., 2003, p. 1618). McHugh et al. (2013) reported qualified nurses in Magnet hospitals, which have a higher percentage of nurses with bachelor's degrees than hospitals without Magnet status, offer 14% lower odds of inpatient death and 12% lower odds for failure-to-rescue (American Nurses Credentialing Center, n.d.). Magnet Recognition means organizations encourage education and

development through every stage in a nurse's career (American Nurses Credentialing Center, n.d.). Aiken et al. (2014) also noted that increasing BSN staff decreases patient mortality.

As further support for the need for more baccalaureate-prepared nurses, the AACN (2015a) stated these nurses were better prepared to handle intricate situations and critical decisions for acute care patients than diploma or associate degree RNs. The AACN (2015a) determined the traditional bedside caregiver can no longer provide all aspects of care demanded by the present-day patient. They also indicated that the RN not only should be a provider and coordinator of care but should also possess the knowledge of a manager, prevention specialist, treatment professional, and educator, to facilitate the well-being of the patient. All of these qualities were noted in the educational curriculum of a BSN-prepared RN (AACN, 2015a).

As the population ages and healthcare continues to evolve, the healthcare system requires nurses to be more independent, to be able to practice with those in other disciplines, and to be competent in clinical decision-making. These qualities are possessed by baccalaureate-prepared nurses (AACN, 2015a). Baccalaureate nurses often view patients from a holistic perspective and have the skills to transition easily into a variety of caring roles (AACN, 2015a). The healthcare future of the U.S. depends on the supply of appropriately trained, qualified, and competent BSN nurses. A solution to address this need for BSN-qualified nurses in a brief period of time is to increase the number of graduates from ABSN programs.

Accelerated Second-degree Bachelor of Science in Nursing Programs. These ABSN programs were initially introduced to meet the rapidly growing demand of the nursing workforce (Raines, 2010). The ABSN program is the most expedient route to licensure as a bachelor's-prepared registered nurse (Penprase & Harris, 2013; Millett, 2016; Raines, 2010; Rico, Beal, & Davies, 2010). Accelerated second-degree bachelor of science in nursing programs present a

challenging nursing curriculum within a condensed time frame to students who have completed a previous bachelor's degree and fulfilled the program's other admission requirements (Posey & Pintz, 2017). These accelerated programs are quickly gaining momentum and size. In 2018, there were approximately 280 ABSN programs, and even more were in the planning stages (AACN, 2019b). In one year, from 2017 to 2018, student enrollment in ABSN programs grew from 19,541 to 23,354 (AACN, 2019b). From 2003 to 2013, the number of enrolled students in these types of programs grew by over 250% (AACN, 2015a).

Accelerated second-degree bachelor of science in nursing programs were initially designed to fulfill a growing need for nurses by using an untapped pool of potential students. Phrases such as "rapid transition" (Penprase & Harris, 2013), "rigorous and intense" (Penprase & Harris, 2013; Rico et al., 2010), "condensed time frame" (Millet, 2016), and "challenging curriculum" (Posey & Pintz, 2017) were all associated with descriptions of these programs. Millett et al. (2015) reported additional features of an ABSN program, including duration, curriculum design, and flexible scheduling. The duration of an ABSN program ranges from 12 months to 36 months, with the greatest number of programs being within the range of 13 to 18 months (Millett et al., 2015). The semester length of individual courses ranges from six weeks to 13 weeks, with the majority lasting six to eight weeks (Millett et al., 2015). Millett et al. (2015) reported a heavier course load in these ABSN programs. At least one-half of the ABSN programs in the Millett et al. (2015) study reported having a hybrid program using online and face-to-face course work. This hybrid combination allowed the ABSN faculty and students to have some degree of flexibility during the intense program.

Faculty positions in these programs included multiple roles such as classroom and online faculty, clinical instructors, advisors, and researchers (Donovan, 2015; Millett et al., 2015).

While ABSN programs are not new, some schools of nursing initially did not dedicate the number of faculty members they would have for a traditionally paced nursing program.

Although this was common, more than half of the ABSN faculty in the Millett et al. (2015) study stated they preferred the classroom dynamic in an accelerated program and felt energized by teaching the students. These faculty, if also teaching in a traditional program, sometimes changed teaching practices for the ABSN students (Millett et al., 2015). Variations of the teaching practices included more active learning strategies and hands-on activities in the classroom, simulations, and clinical settings, befitting the adult learner.

The ABSN students were also noted to have opinions about the ABSN program. In these programs students voiced some concern over educational preparation and learning (Hanson-Zalot, 2016). While the ABSN students acknowledged their part in the learning process, they stated the learning environment was greatly influenced by the faculty. Key influential faculty were noted as being role models, relatable, approachable, knowledgeable, and good communicators (Hanson-Zalot, 2016; Rico et al., 2010). Faculty with these qualities helped students stay on task and acted as powerful support systems in the learning process (Hanson-Zalot, 2016). A successful learning environment was one in which the faculty were prepared for the classroom and clinic (Hanson-Zalot, 2016). Negative learning experiences were related to a lack of preparation by faculty that led students to feel the time spent in the classroom was wasted (Hanson-Zalot, 2016). The ABSN students in the study by Hanson-Zalot (2016) acknowledged they expected faculty of the accelerated program to have strong planning and execution skills to fit their needs. One ABSN student stated that a good faculty member is able to stay on task even if the PowerPoint goes down and the lights go off (Hanson-Zalot, 2016). In the ABSN program, students wanted skillful faculty who went beyond the traditional classroom lecture.

Accelerated second-degree bachelor of science in nursing students identified the process of learning in the ABSN curriculum was also imparting education. Students were asked which practices influenced their perceptions of their preparedness for entry-level positions as a professional nurse. In addition to critical thinking, skills and behaviors recognized were organization, prioritization, time management, flexibility, multitasking, and discipline (Hanson-Zalot, 2016). Parallels were drawn between student practices in learning how to be a nurse and the attributes needed to perform the job of a nurse in the real world.

An ABSN program is a distinctive, content-condensed program of study that recognizes the values of the adult learner's knowledge, previous education, and experiences (Raines, 2010). These programs provide a specific curriculum for the adult learner. The ABSN programs, in an abbreviated time frame, offer mature students the knowledge and skills to fulfill the role of nurse. Graduates from these programs add to the number and quality of nurses who will assist in alleviating the future nursing shortage.

Attrition and Retention. Accelerated second-degree bachelor of science in nursing students must meet stringent admission requirements, including above average pre-admission GPAs, high grades in prerequisite courses, and a specific score on an entrance exam (AACN, 2013; AACN, 2015a; AACN/NCAS, 2018; Feldman & Jordet, 1989; Raines, 2010; Rodgers et al., 2004; Shiber, 2003; Vinal & Whitman, 1994). Even having met these rigid requirements, some ABSN students are not successful in these programs.

When admitting students, administrators of schools of nursing often assume that there is a high probability the nursing student will successfully complete the program. However, nursing schools have high attrition rates—averaging 30% globally (Bakker et al., 2018; Kukkonen, Suhonen, & Salminen, 2016; Mooring, 2016; Salamonson et al., 2014; Walker, 2016). The

ABSN programs are not exceptions, with attrition rates ranging between 10% and 30% (Bentley, 2006; Cantwell et al., 2015; Doggrell & Polkinghorne, 2015; Feldman & Jordet, 1989; Nugent & LaRocco, 2014; Rodgers et al., 2004; Rosenberg et al., 2007; Seldomridge & DiBartolo, 2007). Furthermore, English as an additional language (EAL) students often experience higher attrition than English as a first language students (Denham et al., 2018). Foley (2016) supported this research and reported that attrition rates for male, minority, and EAL students were twice as high as those for female, nonminority, and English as a first language students.

Although credentialing organizations for schools of nursing differ on the number they use in defining high attrition, standards exist to ensure acceptable program outcomes. These outcomes include program completion rate and licensure exam passing rate (Accreditation Commission for Education in Nursing [ACEN], 2017; Commission on Collegiate Nursing Education [CCNE], 2018). The ACEN (2017) allows individual schools of nursing to determine their own standards for program completion and licensure passing rates, and evaluations of these schools are based on their self-set program outcomes. The CCNE (2018) recommends a program completion rate of 70% or higher and a first-time licensure pass rate of 80% or higher for schools to maintain accreditation. Nursing schools with CCNE accreditation may find that accreditation jeopardized by an attrition rate close to 30%.

It was recognized in the literature that financial reasons may prevent a student from entering or continuing in an ABSN program (Millett, 2016; Rouse & Rooda, 2010). For the ABSN student, the outlay of tuition and additional fees to enter a nursing program amounts to an enormous financial burden (Donnell, 2015; Millett, 2016). Substantial financial resources are needed in a short period of time for enrollment in an ABSN program. Most programs suggest that students not be employed during the program, as work time often competes with the time

needed for academic success (Rico et al., 2010). This makes financing a nursing education even more burdensome.

Attrition creates a cost for a nursing school. The cost for the school, in addition to lost revenue, is a loss in resources. Nursing schools plan carefully to accommodate all students, and when even one student is lost, the budgeting of available resources needs to be revisited and reorganized (Kukkonen et al., 2016). The time and energy used to assist the unsuccessful student through the program are also lost (Donnell, 2015).

Attrition caused by academically unsuccessful students generates a variety of emotions. Uncertainty, shock, sadness, embarrassment, or a sense of personal failure is felt at one time or another by unsuccessful nursing students (Handwerker, 2018; O'Donnell, 2009). Some students who enter into an ABSN program thinking they can manage the expectations and stress one faces in a fast-paced learning environment lack the mature motivation and underestimate the academic rigor required in these types of programs (Fagan & Coffey, 2019; Handwerker, 2018; Wolf, Stidham, & Ross, 2015; Tantillo, Marconi, Rideout, Anson, & Reifenstein, 2017). When a student is not academically successful, faculty can question their own abilities and also feel a sense of guilt or loss (Black, Curzio, & Terry, 2014).

Students abandon nursing programs for a variety of reasons. Some cite personal reasons, while others are educationally unprepared (Kukkonen et al., 2016). Research notes that administrators and faculty must consider the student's individual, family, and academic responsibilities (Dacanay, Vaughn, Orr, Andre, & Mort, 2015). Furthermore, to achieve academic success, a student needs to make a conscious decision to continue the work in a nursing program despite demanding circumstances of family, social, or financial obligations (Park, Perry, & Edwards, 2011). This persistence is recognized as a significant factor of success

(Park et al., 2011). Mooring (2016) also added a good support system and a personal commitment to academic achievement to the list of factors vital to a nursing student's success.

To gain greater insight into retention and the path to success, Crabhill (2015) explored this topic with a focus on ABSN programs and students. That author found retention in ABSN programs may be facilitated by competitive admission requirements (GPA > 3.0) or by ABSN programs having curriculums with five or more semesters of nursing courses. Additional advising or tutoring or an introduction-to-nursing course made no statistically significant difference in retention numbers (Crabhill, 2015; Lott, 2016). Johnson Lewis (2010) documented four themes ABSN students revealed that kept them in their nursing program: a supportive environment, quality of instruction, the design of the curriculum, and their own learning ability. Brown (2016) also interviewed ABSN students and noted that motivation was a key factor in retention. Specifically, intrinsic motivation helped propel these students through the ABSN program and helped them to persevere through the challenging aspects of the program. Motivating factors included having a personal and professional commitment and the need to achieve financial independence (Brown, 2016).

Interestingly, extrinsic motivations, such as higher salary or better job security, prompted some individuals to enroll in the ABSN program, but intrinsic motivations, such as personal fulfillment and sense of achievement, were noted as the driving force to complete the program (Johnson Lewis, 2010; Manjounes, 2010; Raines, 2010). Additional influences on retention included support, resources (Brown, 2016; Lott, 2016), convenience, and flexibility (Manjounes, 2010). According to the ABSN students, their main strategies for remaining in their program were flexibility and personal work ethic; one stated simply "you have to put in the time and just

do the work" (Brown, 2016, p. 77). Identifying ways to create and retain successful students in ABSN programs will help to build the quality and number of future nurses.

Accelerated Second-degree Bachelor of Science in Nursing Students

The ABSN student is described as being highly motivated and academically excellent (Millett et al., 2015; Penprase & Harris, 2013). These students are mature individuals who are adult learners (Cangelosi & Whitt, 2005; Donovan, 2015; Englert, 2009; Ferrell, DeCrane, Edwards, Foli, & Tennant, 2016; Korvick, Wisener, Loftis, & Williamson, 2008; Millett et al., 2015; Payne, 2013; Payne, Glaspie, & Rosser, 2014; Penprase & Harris, 2013; Rico et al., 2010). They have high levels of enthusiasm, eagerness, and ambition (Cangelosi & Whitt, 2005; Donovan, 2015; Korvick et al., 2008; Millett et al., 2015; Penprase & Harris, 2013). Students in an ABSN program are self-directed (Cangelosi & Whitt, 2005; Donovan, 2015; El-Banna, Tebbenhoff, Whitlow, & Wyche, 2017; Rico et al., 2010) and have higher academic expectations for themselves than traditional BSN students (AACN, 2015a). They possess emotional intelligence (El-Banna et al., 2017) and are dedicated, competent, goal-oriented, and careerfocused (Hennessy, 2018). These students are able to regulate their own learning (Millett et al., 2015) and use previous life experiences to help them think critically (Cangelosi & Whitt, 2005). They are also able to organize and learn complex material quickly (Cangelosi & Whitt, 2005). As mature students, they demonstrate a higher level of intrinsic motivation for educational pursuits (Newton, Kelly, Kremser, Jolly, & Billet, 2009). They use this noncognitive characteristic of intrinsic motivation and their other abilities to help them through the ABSN program (Millett et al., 2015).

Despite all these extraordinary qualities, these students may encounter challenges when enrolled in an ABSN program. Barriers for ABSN students include family responsibilities,

financial constraints, and stress (Craft-Blacksheare, 2018; Lott, 2016; Millett et al., 2015; Tantillo et al., 2017; Wolf et al., 2015). These nonacademic obligations and emotions are prevalent among ABSN students (Lott, 2016).

The literature does identify specific differences between the ABSN student and the traditional nursing student, the most predominant being that the ABSN student has qualities of an adult learner as defined in Knowles's (1984) adult learning theory. It is important to note that these exceptional traits do not guarantee the student's academic success in the program, as these students are also vulnerable to program attrition. To learn more about the reasons ABSN students are successful, researchers should investigate the ABSN experience from the perspective of the students.

Motivation. Academically motivated students are more inclined to achieve better grades and demonstrate persistence in coursework and scholastic programs (Khalaila, 2015). Academic achievement is considered a benchmark of success in higher education. It is important to identify factors that help a student achieve this success. Generally, researchers have found high levels of intrinsic motivation in school-age and college-age students correlate with significant academic achievement (Areepattamannil, 2012; Knowles, Holton, & Swanson, 2015; Liu & Hou, 2018). Other researchers have noted that nursing students with intrinsic motivation demonstrate higher academic achievement than those with extrinsic motivation (Khalaila, 2015; Trevino & DeFreitas, 2014; Yu & Levesque-Bristol, 2018). Yu and Levesque-Bristol (2018) also noted nursing students were more self-determined than students enrolled in other college programs of study. Deci and Ryan (1985) described intrinsic motivation as behaviors engaged in for the pure joy and satisfaction gained from performance alone. As students determined the coursework for nursing was important to their prospective goals and overall growth, they had higher levels of

intrinsic motivation (Trevino & DeFreitas, 2014). Students who had higher levels of intrinsic motivation were found to have more adaptive cognitive strategies, greater academic resilience, more persistence, and a better attitude toward studying than extrinsically motivated college students (Trevino & DeFreitas, 2014).

Personal qualities needed for success in nursing school include adaptability, self-discipline, focus, and motivation (Hanson-Zalot, 2016; Trevino & DeFreitas, 2014; Watts, 2016; Yu & Levesque-Bristol, 2018). While extrinsic motivation may help a student be accepted into an ABSN program, intrinsic motivation has been shown to assist a student throughout the program (Raines, 2010). Adaptive strategies and academic resilience are valuable for helping students achieve program completion and academic success. Investigating the types of motivation seen in ABSN students and how these students distinguish motivation in relation to success may reveal a noncognitive pathway to success.

Academic Achievement. There is a need for nursing students to attain academic achievement in ABSN programs, based on the demand for more nurses in the workplace. Faculty in baccalaureate nursing programs prepare nurse graduates to engage in safe practice and competent patient care after they have successfully passed the licensure exam. After completing a BSN program, graduates must pass the NCLEX-RN® to enter employment as an RN. The NCLEX-RN® is used as a standard to ensure nurse graduates entering the workforce possess the essential knowledge and skills for nursing practice (NCSBN, 2018b). Graduates of ABSN programs demonstrated slightly better academic performance on the NCLEX-RN® than their counterparts from traditional BSN programs (Cangelosi & Whitt, 2005; Penprase & Harris, 2013).

Researchers looked for correlations between program outcomes and first-time NCLEX-RN® pass rates with demographic and academic variables (Bentley, 2004; Blozen, 2010; Crabhill, 2015; Foley, 2016; Kaddoura, Flint, Van Dyke, Yang, & Chiang, 2017; Kowitlawakul, Brenkus, & Dugan, 2013; Payne et al., 2014; Rowland, 2013). Demographics included age, gender, race/ethnicity, and EAL status. In addition to demographics, these studies included variables such as admission criteria (Kaddoura et al., 2017; Kowitlawakul et al., 2013), end-of-program grades, and standardized testing scores (Bentley, 2004; Kaddoura et al., 2017; Payne et al., 2014; Rowland, 2013). Admission criteria included preadmission undergraduate GPA, science prerequisite grades, Health Education Systems, Inc. (HESI) exam scores, and Assessment Technologies Institute (ATI) Test of Essential Academic Skills (TEAS) scores. End-of-program characteristics were ABSN program GPAs, HESI Exit exam scores, and ATI RN Comprehensive Predictor scores.

Average overall GPA was slightly higher for ABSN students than for traditional four-year BSN nursing students (Englert, 2009; Payne et al., 2014). Additionally, individual student course grades were also better in ABSN programs than traditional BSN programs (Cangelosi & Whitt, 2005; Korvick et al., 2008; Penprase & Harris, 2013). Foley (2016) and Kaddoura et al. (2017) documented that end-of-program GPA had a positive correlation with NCLEX-RN® outcome.

The NCLEX-RN® pass rate for ABSN program graduates was 97.3%, as compared to 95.7% for traditional program graduates (Payne et al., 2014). Average licensure examination scores were also consistently higher for ABSN program graduates than traditional BSN program graduates (Cangelosi & Whitt, 2005; Korvick et al., 2008; Penprase & Harris, 2013). Englert

(2009) found that ABSN students had a higher NCLEX-RN® pass rate (88%) on the first attempt than did traditional students (72.5%).

Wehner (2015) noted that older and more mature students in an ABSN program performed better on the NCLEX-RN® than traditional BSN students. Similarly, Payne et al. (2014) said that more mature students had more successful student outcomes than younger students.

Various researchers reported scores on standardized exams were linked with passing scores on the licensure exam (Wehner, 2015; Yeom, 2013). Specific exit exams, such as the HESI Exit exam (Bentley, 2004; Englert, 2009; Johnson, Sanderson, Wang, & Parker, 2017; Kaddoura et al., 2017) and the ATI Comprehensive Predictor (Foley, 2016), had statistically significant correlations with first-time NCLEX-RN® passing scores. However, failing standardized test scores did not necessarily imply the students would not pass the licensure exam on the first attempt (Yeom, 2013). Although Yeom (2013) did not offer a reason for this irregularity, study limitations of a small sample size, use of one nursing school, and failure to capture individual student differences were acknowledged.

Literature on ABSN students found their undergraduate GPAs were statistically significant predictors of success (Kowitlawakul et al., 2013; Rowland, 2013). Preadmission standardized test scores were also related to successful academic endeavors (Kowitlawakul et al., 2013).

Researchers identified nonacademic and academic predictors, and non-predictors, of NCLEX-RN® success. Bentley (2004) and Kowitlawakul et al. (2013) reported that ABSN students' prerequisite science GPAs were not statistically significant indicators for NCLEX-RN® scores. Age (Kaddoura et al., 2017; Kowitlawakul et al., 2013) and gender (Kaddoura et

al., 2017; Rowland, 2013) were also not associated with NCLEX-RN® scores. However, Rowland (2013) suggested males had higher admission GPAs and TEAS math and science scores than females, while females had higher end-of-course GPAs than males. Regarding age, Rowland (2013) additionally noted students aged 31 to 40 had higher admission GPAs, but older students had lower end-of-course GPAs than younger students.

Statistically significant negative predictors included EAL and minority status (Foley, 2016; Kaddoura et al., 2017; Rowland, 2013). Fewer EAL students passed the NCLEX-RN® on their first attempt than did non-EAL students (Foley, 2016; Kaddoura et al., 2017). Rowland (2013) reported that among ABSN students, Asian, Black, and Hispanic students had higher NCLEX-RN® failure rates than students in the White, two or more races, and unknown ethnic groups. In the Rowland (2013) study, students reported their own ethnicity.

In a qualitative study, Blozen (2010) reported themes that ABSN students perceived as being associated with their success. Students reported the answering of NCLEX-RN®-style questions was the factor that contributed most to success on the NCLEX-RN®. The combination of the following three items, teaching and testing styles of nurse faculty, faculty encouragement, and the clinical experiences they had, were noted as being valuable to successful NCLEX-RN® accomplishment. The ABSN students indicated that the support of family, faculty, and peers were also contributing factors in their academic achievement.

Payne et al. (2014) reported a number of factors based on a mixed sample of traditional and ABSN graduates. A comparison of the two groups, traditional versus accelerated, found no statistically significant differences. The ABSN graduates had slightly higher GPAs and HESI Exit scores, and a higher NCLEX-RN® passing rate, but the results were not statistically significant. Traditional and ABSN graduates appeared to be similar in their academic

achievement in this study. What caused this study to be an outlier among similar studies were limitations of a small sample size and an investigation of only one higher education institution. Moe et al. (2009) had comparable results, reporting no statistically significant differences between traditional and ABSN graduates in exit exam scores, end-of-program GPAs, or NCLEX-RN® passing rates. In this study, however, ABSN students were integrated into the traditional curriculum with the four-year BSN students. This should be considered when examining the study results, as no modifications to teaching methods were made to accommodate adult learners.

Success on the NCLEX-RN® exam is relevant to the nursing student and to nursing programs (Quinn, Smolinski, & Peters, 2018; Yeom, 2013). State boards of nursing and accrediting agencies view first-time NCLEX-RN® pass rates as significant indicators of the quality of a nursing program (Foreman, 2017; Quinn et al., 2018). First-time success on the NCLEX-RN® is a necessity for both the schools of nursing and the students. The rapidly increasing demand for nurses creates a need for students to be successful in ABSN programs and on the NCLEX-RN®, as successful ABSN students enter the workplace at a more rapid pace than traditional BSN students.

Adult Learning Theory

Knowles (1984) conceptualized the art and science of adult learning as different from that of children. Knowles (1980, 1984) proposed that the initial learning assumptions that educated children, known as pedagogy, proved challenging when applied to the adult learner. He suggested other assumptions specifically for the adult learner and identified these as andragogy (Knowles 1980, 1984). The core assumptions of andragogy differ from the pedagogical model.

Knowles's six assumptions for the adult learner are found to be associated with common characteristics of the ABSN student (Hanson-Zalot, 2016; Rico et al., 2010). The first four of these assumptions are included in the original writing of the adult learning theory (Knowles, 1984), with the latter two added after additional research. The key assumptions about how adult learners process information are these:

- their orientation to learning is life-centered;
- they need to be self-directing;
- experience is the richest resource for their learning;
- they have a readiness to learn;
- their most potent motivators are internal pressures, such as self-esteem and quality of life;
- the have a need to know (Knowles, 1984, p. 31).

The first assumption is that adults want to apply knowledge and skills to life or problem-centered situations (Knowles, 1980, 1984; Knowles et al., 2015). Adults learn when they discover that knowledge and skills are applicable and necessary to solving real-life situations. Hanson-Zalot (2016) asked ABSN program graduates to identify which teaching practices in their ABSN program prepared them for their role as a nurse. Their replies centered on strategies to promote clinical reasoning and critical thinking for resolving real-life situations.

The second assumption describes adult learners as being responsible for their own decisions (Knowles, 1980, 1984; Knowles et al., 2015). Knowles (1984) identified adults as having a deep need to direct their own lives and to be seen as capable of providing that direction. Hanson-Zalot (2016) noted ABSN students verbalized higher levels of satisfaction in the accelerated program when they were involved in planning their education. This student-centered focus allowed ABSN students to feel valued.

The third assumption refers to the use of previous life experiences to learn new information (Knowles, 1980, 1984; Knowles et al., 2015). Because of their ages and their completion of a bachelor's degree program, ABSN students had life experiences not yet undergone by traditional four-year BSN students. The ABSN students felt comfortable sharing information with others and wanted to be recognized for their knowledge and expertise (Hanson-Zalot, 2016; Rico et al., 2010). Assimilating new information with previous experiences helped cement knowledge for these adult learners (AACN, 2015b; Hanson-Zalot, 2016; Knowles, 1984). Prior learning, education, and skills were tools that helped the ABSN student to comprehend and remember the meaning of new pieces of information.

The fourth assumption is that adults are ready to learn when they need to manage real-life situations (Knowles, 1980, 1984; Knowles et al., 2015). Timing was a factor in readiness to learn. For the ABSN student, the moment sometimes presented itself after they had been working in a job they did not feel connected to or after graduating from college (Manjounes, 2010; Rico et al., 2010). They then felt a sense of readiness to accept the challenge of nursing school.

The fifth assumption is that adults are sensitive to external and internal motivations (Knowles, 1984; Knowles et al., 2015). The prevailing motivators are internal motivators, such as self-esteem, quality of life, and desire (Knowles, 1984; Knowles et al., 2015). Adults, especially those who were returning to school for a nursing degree after they had received a degree in another field, were motivated by the need to grow and develop (Manjounes, 2010; Rico et al., 2010; Utley-Smith, Phillips, & Turner, 2007).

The sixth and final assumption is that adults want to know why they need to learn something (Knowles, 1984; Knowles et al., 2015). After determining the need for education,

adult learners expend considerable energy contemplating the benefits of learning and the consequences of not learning what they need to know (Knowles et al., 2015). Accelerated second-degree bachelor of science in nursing students had carefully measured personal and professional gains, as they knew where they stood with both and decided they wanted to be somewhere else (Manjounes, 2010; Rico et al., 2010). Most ABSN students had carefully considered the time, energy, and expense of the program before applying (Manjounes, 2010; Rico et al., 2010). Enrolling in school for a second degree helped ABSN students achieve their goals of personal satisfaction and a new occupation.

Some ABSN programs used Knowles's (1984) andragogy theory to guide their curriculum development (Hanson-Zalot, 2016). Administration and faculty of these programs correlated the type of student in their ABSN program with the characteristics of an adult learner. Therefore, when teaching these students, faculty focused on the core assumptions about the adult learner. When courses were taught with a specific focus on adult learners, ABSN students not only appreciated the educational presentations, they learned more and were able to commit more information to memory (Hanson-Zalot, 2016). When adult learning theory was applied in an ABSN program, students experienced respect for and appreciation of their previous experiences and knowledge. Hanson-Zalot (2016) noted students were able to have a higher level of discussion with faculty who used andragogic methods. In addition, ABSN students remarked that andragogic practices more fully prepared them for their role as a nurse after graduation. In their role as a novice nurse, ABSN program graduates reported higher levels of comprehension, confidence, and critical thinking than their traditionally prepared BSN, associate degree, or diploma RN counterparts (Hanson-Zalot, 2016).

The adult learning theory provides a means to describe the ABSN student.

Characteristics of the ABSN student correlate with the key assumptions about the adult learner.

When ABSN programs and faculty consider this theory when educating these students, these mature learners may benefit. When considering student perceptions of success in this study, it is necessary to reflect on how student traits may reflect the representative assumptions of this theory.

Chapter Summary

The purpose of this hermeneutic phenomenological study is to describe and interpret the perceptions and experiences of ABSN students and what they believe to be factors of success in completing the program and in passing the NCLEX-RN® on the first attempt. The findings of this literature review establish the contextual basis for the study. The literature review synthesizes the research that currently exists on ABSN students and the variables and characteristics associated with these students. Topics include the future RN shortage, the ABSN program, attrition, retention, the concepts of motivation and academic achievement, and the adult learning theory (Knowles, 1984), which describes the students.

Several sources demonstrate the impending demand for a more substantial and competent nursing workforce. The literature concludes that successful ABSN students can assist in increasing the number of competent nurses in the workplace. The literature includes little information on how to produce and retain successful students in ABSN programs. While there is some research on student demographics and characteristics, such as GPA and standardized test scores to describe a successful student, there is scant information from the student's point of view explaining why they believe they were successful in an ABSN program. A gap in the literature exists on retention and success of these students from their own point of view.

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Understanding ABSN students and programs, factors that influence attrition and retention, student motivation, and academic achievement of students provides a foundation for investigating student perceptions of success. Using Knowles's (1984) adult learning theory to describe the ABSN student provides a base of information from which to evaluate students' perceptions and experiences. Specific, well-defined ways to retain ABSN students are scarce in the literature. The research does identify predictors of student success, but using these alone without considering the characteristics of the adult learner is imprudent. Knowing the advantages and disadvantages of ABSN programs and the strengths and weakness of students enrolled in these programs allows for a better plan of action to retain and graduate these students and help them pass the NCLEX-RN®.

This research study is intended to help close the gap in the literature regarding the perceptions and experiences of ABSN students and what they believe to be factors of success by examining the lived experience of ABSN graduates who have been successful in the program and have passed the NCLEX-RN® exam on their first attempt. By examining these graduates' perceptions of program elements and their motivation, relationships, and experiences as they relate to retention in the program and success on the NCLEX-RN®, the researcher seeks to identify common themes related to academic achievement in ABSN programs.

Chapter III. Methodology

This chapter describes the research design and how it is logically derived from the purpose of the study and the research question. Reasons to consider qualitative inquiry include the examination of a specialized population, difficult to measure variables, and a requirement for a complex understanding of a population or topic (Creswell & Poth, 2018). The decision to select a qualitative methodology was made based on the researcher's philosophical beliefs, the phenomenon of interest, and the level of detail needed in understanding the topic. The purpose of this hermeneutic phenomenological study is to describe and interpret the perceptions and experiences of ABSN students and what they believe to be factors of success in completing the program and in passing the NCLEX-RN® on the first attempt.

Details of the research design and ethical considerations for the protection of human subjects are discussed below. Steps to ensure the reliability of the study results are also addressed. Lastly, the potential for researcher bias and limitations of the study design are identified and acknowledged in an effort to provide greater rigor to the study.

Rationale for Research Approach

The choice of the research approach is based on the researcher's belief that individuals can assign meaning to phenomena based on their interactions with the world. In addition, the researcher believes there are multiple realities that can be assigned to a phenomenon, and the way a phenomenon is seen at a given time is tied to the perspective of the viewer. Furthermore, there is no one accurate view of the phenomenon, just an uncovering of hidden aspects. The researcher's philosophical assumptions coincide with the constructivist paradigm. The constructivist viewpoint posits humans construct knowledge and meaning as they participate in the world they are interpreting (Crotty, 1998). The constructivist worldview recognizes an

individual's social, cultural, and historical context shape the way the individual views an experience, thus allowing differing views (Crotty, 1998; Wright, O'Brien, Nimmon, Law, & Mylopoulos, 2016). The constructivist paradigm underpins this study and the qualitative methodology. Creswell and Poth (2018) state researchers who utilize qualitative methodology look at reality in a subjective manner, and each participant has the opportunity to express their perceptions of the phenomenon.

The researcher's aim for this study is to obtain an in-depth description and interpretation of the lived experience of an ABSN student's journey on the path to NCLEX-RN® success. The central question for this study is this: What is the lived experience of ABSN students who have graduated from an accelerated program and passed the on the first attempt?

Based on this question, the participants shared their knowledge and experiences to allow the researcher to identify meaning related to what makes students successful in an ABSN program. Qualitative design gave a voice to individuals and groups who are not be normally heard and allowed the researcher to focus on variables that are not easily measured (Creswell & Poth, 2018).

The qualitative approach in this study is hermeneutic phenomenology. Phenomenology describes the essence or meaning of individuals' lived experiences (Creswell & Poth, 2018). It is a tradition congruent with nursing because evaluating information about an individual's life or experience is a natural part of professional practice (Hays & Wood, 2011). Moreover, the tradition is also consistent with education, as it is inclusive of multiple perspectives and uses these to document an essence of a phenomenon similar to incorporating the learned experiences of students in a classroom to enhance knowledge (Hays & Wood, 2011). The approach allows the researcher to identify patterns and themes among shared perceptions and experiences.

Phenomenology can be descriptive or interpretive. Descriptive phenomenology leads a researcher to create a description purely from the participants' explanations (Matua & Van Der Wal, 2015). In this approach, the researcher brackets any preconceptions and ignores existing knowledge (Creswell & Poth, 2018; Matua & Van Der Wal, 2015). Interpretive or hermeneutic phenomenology, by contrast, allows the researcher to elucidate the participants' explanations and offer more information about hidden meanings in the phenomenon in addition to a description (Matua & Van Der Wal, 2015). Using this approach, the researcher engages in reflexivity about the phenomenon but does not bracket all previous knowledge. Reflexivity occurs when researchers convey information about their own background, work, education, or experiences and note how it modifies their interpretation of the study's information (Creswell & Poth, 2018).

The researcher's philosophical belief is one in which there are multiple realities, and previous knowledge and personal experiences of the researcher aid in uncovering any hidden meanings. In this study, reflexivity occurred when the researcher shared her background about work and education with participants prior to their interviews. The researcher used hermeneutic phenomenology to gain and share a deeper meaning of the experience.

Research Design

The research design for the study was hermeneutic phenomenology. Van Manen (1990) affirmed hermeneutic phenomenology with a constructivist paradigm underpinning is ideally suited for exploring organizations, relationships, processes, and environments because it values individuals' knowledge of the connection between self and world. This approach allowed the researcher to seek and obtain an understanding of how the participants intentionally and consciously considered an experience. This meaning is only truly understood through the eyes of those who actually experience the phenomenon (Heidegger, 1962).

The researcher worked with the participants to present the most comprehensive description and interpretation of the phenomenon. Jones, Torres, and Arminio (2014) concluded incorporating description and the researcher's interpretation of the phenomenon offers a fuller, richer experience for the reader. In this type of research process, van Manen (1990) directs researchers to consider essential themes to project a description and also to create an interpretation of the shared meaning of the lived experience. The researcher asked questions relating to the participant's perceptions of the phenomenon and about which academic and nonacademic experiences influenced the participant's perceptions of the phenomenon. From this, the researcher wrote about the participants' common, and sometimes uncommon, experiences that provided the underlying structure or essence of the phenomenon. The composite description was the basis for the researcher's interpretation as she attempted to comprehend how the participants made sense of the phenomenon and then used interpretation to reveal any hidden meanings in the phenomenon. Hermeneutic phenomenology allowed the researcher to use previous knowledge to understand the experiences of the participants and reveal concealed meanings of the participant's shared experiences (Heidegger, 1962).

The adult learning theory (Knowles, 1984) was the theoretical framework used in the study to describe the characteristics of the ABSN student. Several articles in nursing literature correlated the characteristics of ABSN students with assumptions about the adult learner (AACN, 2015a; Cangelosi & Whitt, 2005; Feldman & Jordet, 1989; Millett et al., 2015; Penprase & Koczara, 2009; Rodgers et al., 2004).

Site and Sample Selection

Phenomenological inquiry requires participants who have experienced the phenomenon.

A purposive sample was used to recruit participants who had graduated from ABSN programs in

Pennsylvania and New Jersey. The researcher contacted program directors from three schools and asked for help contacting ABSN graduates from the years 2017 to 2019 (see Appendix A). Snowball sampling was used to increase recruitment (Sadler, Lee, Lim, & Fullerton, 2010).

Inclusion criteria limited the sample to ABSN graduates from 2017 through 2019 who had passed the NCLEX-RN® on their first attempt. First-time passing scores on the NCLEX-RN® were verified against the National Council of State Boards of Nursing database. Exclusion criteria were non-ABSN graduates and ABSN students who were not successful in completing the program or in passing the NCLEX-RN® the first time. In phenomenological inquiry, it is recommended the sample size should be from six to 10 participants who have had a homogeneous experience (Moustakas, 1994). In this study, eight participants were interviewed.

Data Collection Procedures

After a research application approval from the Institutional Review Board (IRB) (see Appendix B), graduates were sent an introductory email (see Appendix C) by the respective program director or designee. The email included an outline of the study and directions to contact the researcher directly if interested in participating. Those who participated received a \$20 gift card. The researcher's phone number and email were provided. Individuals who accepted the invitation to participate were sent a follow-up email by the researcher that contained the consent form (see Appendix D) and directions about scheduling an interview. The researcher followed a script in conducting telephone calls (see Appendix E) with participants to explain the consent form, answer questions, disclose the researcher's knowledge of and roles in an ABSN program, and arrange a convenient time and secluded, quiet location for the interview. The central question for this study is this: What is the lived experience of ABSN students who have graduated from an accelerated program and passed the NCLEX-RN® on the first attempt?

The researcher used a semi-structured interview guide (see Appendix F) and asked openended questions. Streubert and Carpenter (2011) affirmed open-ended questions are the gold standard in data collection strategies to fully describe an experience. The researcher began the pre-interview process with a brief introduction, asked again whether the participant had questions about the consent, again disclosed the researcher's roles in an ABSN program, and assured the participant of information confidentiality and comfort during the interview process. After receiving confirmation, the individual was still interested in participating in the interview process, the researcher gave the participant the gift card and asked if it was acceptable to audio record the interview. The participant then signed the consent, chose a unique identifier for confidentiality, and the interview began.

For telephone interviews, the consent was sent electronically, and the gift card was mailed to the participant before the day of the interview. Verbalizations took place in a manner similar to that used in the in-person interviews. All interviews were audio recorded, and the researcher took field notes. Heidegger (1962) explained audio and field notes allow the researcher to use verbal and nonverbal language cues in analyzing the lived experience. The researcher documented observations and contextual details in field notes to connect nonverbal expressions to the spoken descriptions. This created two avenues of data collection.

Clarification was done as needed during the interview process. Participants were given a demographic questionnaire (see Appendix G) to complete at the conclusion of the interviews.

Completion of the questionnaire was voluntary. The participants who were interviewed by telephone were asked if they would consent to answering demographic questions. If they agreed, the survey questions and answer choices were read aloud, and participants selected a response.

The audio recording, identified only by the unique identifier, was sent to an outside transcription agency for verbatim transcription. After receiving the written transcription, the researcher verified the transcript word for word. Within 72 hours after the interview, an email was sent to the participant containing the interview transcript. The participant was asked to review the transcript. The researcher then followed up with a phone call (see Appendix H) to the participant for member checking. This phone conversation focused on the accuracy of the transcript and whether there was additional information the participant wanted to share. The follow-up phone call occurred within two weeks after the interview. The lengths of these calls ranged from 2 to 12 minutes, with the average call lasting approximately 5 minutes.

Prior to the participant interviews, a pilot interview was conducted with two graduates from an ABSN program to test the interview questions and the researcher's interviewing technique. Any resulting additions or deletions needed to the questions or the researcher's technique was noted and incorporated.

Data Management and Organization

Audio recordings and written notes were labeled using the participant's unique identifier and interview date. Confidentiality and privacy were assured. All data was saved on a password-encrypted flash drive. The flash drive and original hard copies of data were stored in a locked cabinet to which only the researcher had access.

After each interview, the audio recording was transcribed verbatim by a third party,

Transcription Puppy. The agency certified all employees were legally bonded from disclosure of
data in the recordings they transcribe. The researcher verified the third-party transcription word
for word while reviewing the audio recording. While reading the field notes and the verified
audio transcripts, the researcher reflected to identify categories, themes, and subthemes in how

participants had experienced the phenomenon. Holistic explication of the lived experience took place using the interviews, field notes, and member checking from the participants. Interview information and field notes were read several times for comprehension and clarity. The researcher read, reread, and memoed during the reading process to organize major ideas.

Data collection was concurrent with organizing, categorizing, and thematic analysis. The researcher color-coded information to identify significant aspects of each interview. A category guide was developed as a tool with a description of each category with definitions and boundaries indicating when to use each category and when not to. The category criteria helped the researcher stay focused on which information should be documented under which category. In this guide, labels were in vivo categories, in which category names were "words used by participants" or were invented names that the researcher believed best described the category (Creswell & Poth, 2018, p. 193).

Categories were established to classify the participants' explanations and comments. The researcher read the interviews at least three times. One reading was of the entire transcript, the second was for initial categorization, and the third and subsequent readings allowed the researcher to further reflect on the significance of the information and to adjust any correlations with categories. Readings and comparisons to previous data were conducted after each subsequent interview. This comparison broadened and strengthened the category topics by adding supportive or opposing information (Jones et al., 2014). The initial categories were revised or removed as new information, similarities, or differences were received and a more focused category was selected. Subsequently, themes and subthemes were identified to specify the relationships between the categories (Jones et al., 2014). Significant statements from the interviews were noted to validate each theme and subtheme.

Ethical Considerations

Ethical considerations for this study included approval by an IRB. Before participants volunteered for the study, reflexivity occurred as the researcher revealed her roles in an ABSN program and any preconceptions of the program. Additionally, an informed consent was discussed that explained the study and detailed risks and benefits. Participants were informed of their option to withdraw at any time before, during, or after the study. Informed consent was obtained both verbally and in writing prior to data collection.

To ensure confidentiality, unique identifiers replaced participants' names in recordings and written notes. The list connecting the unique identifiers with the participants was in the sole custody of the researcher, who kept the list in a locked cabinet. Interviewing sessions took place in private settings. Confidentiality and privacy were assured. All research data was stored on a password-encrypted flash drive, and emails were received through a password-protected email account. All hard copies of data (including handwritten notes) were kept in a locked cabinet at the researcher's residence. Research data was accessible only by the researcher. Data was kept confidential to the fullest extent possible, but data security cannot be guaranteed, as the potential exists for someone to obtain information from someone else's computer (Petrova, Dewing, & Camilleri, 2016; Waltz et al., 2017).

During the research process, the researcher practiced ethical behavior. Jones et al. (2014) argued researchers should go above doing no harm and do good instead. Using the guidelines of "fairness, openness, and truth" in research, the researcher took care not to marginalize, devalue, or disempower any participant (Jones et al., 2014, p. 175).

Studies involving human subjects may carry benefits and risks for the participants. For this study, there were no direct benefits, and potential risks to the participants were considered minimal, as the interviews focused on questions about an ABSN program, and participants had successfully completed both the program and the NCLEX-RN®. During the interviews, participants reported no episodes of discomfort, and participants answered all the questions.

Data Analysis

Data was transformed into meaning as the researcher went beyond the surface of participants' descriptions to identify the implicit essence of the phenomenon. The researcher conducted an analysis using Diekelmann, Allen, and Tanner's (1989) hermeneutic analysis process. The seven stages of this hermeneutic analysis process included verbatim transcription of audio recorded interviews, reading and rereading of transcribed interviews, identification of categories, notation of key quotes, recognition of categories' similarities and differences, detection and naming of themes, and interpretation. The analysis was used to streamline the data into manageable themes for a final narrative. Thematic analysis is applicable for identifying common meaning (Ho, Chiang, & Leung, 2017).

Analysis and interpretation changed as themes or ideas emerged. Data was used to describe and explain the phenomenon and what the phenomenon meant to the participants (Jones et al., 2014). Information that was discrepant with expectations and common themes was considered and integrated into the final report. As the items were placed into coded categories, the researcher memoed to capture thoughts during the process. Memoing is important to the decision-making process, as it allows researchers to refresh their memory as to why a certain direction was chosen for a description or interpretation (Creswell & Poth, 2018). To further support the analysis, specific statements from participants were associated with each theme.

In hermeneutic phenomenology, after hearing the revelations of the participants, a researcher is guided to new interpretations by integrating the participants' information and the

researcher's own previous knowledge. This researcher used her previous understanding from working with ABSN students to complement the interpretation of their descriptions of success. This approach is used to reveal a fuller, deeper meaning of the significance of a phenomenon (Heidegger, 1962).

Researcher Experience

The researcher's experience with ABSN students includes roles as an admission counselor, advisor, and educator. In her conversations with students, they list personal reasons, concerns about family, and time management as reasons for leaving the program. Some students note they were unsuccessful for academic reasons, such as a failing grade that prevented them from moving forward in the program. As an advisor and educator, the researcher sees students on a daily basis. The researcher speaks with everyone initially and advises as necessary when she sees a student at risk. Evidence from the researcher's program suggests that students who have the highest pre-admission GPAs, highest grades on prerequisite courses, or highest scores on the TEAS exams do not always remain in the ABSN program.

Anecdotally, what the researcher has seen in her many roles in an ABSN program has been that students who are completely committed to becoming a nurse are the ones who remain in the program. When these students receive a low grade on an exam or simulation exercise, they stay after class and speak to the educator or remain after a simulation to practice until they are successful. These students create their own study groups, and if the people they study with are not available one day, they join another. The researcher's conversations with these students have centered on the fact there is no other option for them but to succeed. They have invested a great deal of money and time to make a better life for themselves and their families. The researcher's roles led her to research this topic because she did not think academic reasons were

the only reasons students succeed in an ABSN program. The highest GPAs and TEAS scores did not always indicate which students would complete the program and pass the NCLEX-RN® exam.

Role of the Researcher

The researcher is a nurse who attended a BSN program of study. While the degree she obtained was not in an accelerated program, the baccalaureate curriculum is similar. Additionally, the researcher has been an educator of ABSN students at a northeastern U.S. university for a number of years. This allowed her firsthand knowledge of the day-to-day experiences of student s in the ABSN program. The researcher also is currently an advisor for a northeastern university's ABSN program. This position includes roles as an admission counselor and as an advisor of current students. While the researcher has not had experience as an ABSN student, she has noted the changing events and experiences in the program. Her general insight has been generated through observing and interacting with students in her two roles.

Researcher personal biases and assumptions can affect a study. Heidegger (as cited in Reiners, 2012, p. 2) believed it is unreasonable to think a researcher can negate all "experiences related to the phenomenon under study." He asserted personal awareness is key and useful in phenomenological research (Heidegger, 1962). Using reflexivity instead of bracketing, the researcher contains excessive preconceived notions about the phenomenon. Reflexivity permits the researcher to become aware of and transparent about any preunderstandings of the experience (Heidegger, 1962). Evaluating prior assumptions and revealing personal connections to the research topic helps minimize bias in the study.

This study was not about the researcher but about the experience of the participants. The researcher evaluated and disclosed any preconceptions and prior knowledge to the participant

before the individual signed the informed consent. As subjectivity is inevitable and is valuable in qualitative inquiry, completely eliminating bias may not be realistic.

Validity and Reliability

Validity and reliability were evident in this study. Gray, Grove, and Sutherland (2017) stated validity is truthfulness in a qualitative study, and reliability is a measure of the study's reproducibility. Validity was evident in the integral use of the data methods and the accurate reflection of the findings. Validity was noted in the data collection, as the researcher closely followed an interview guide to focus on neutrality and prevent bias, and the researcher also authenticated information received from participants. Reliability was noted in the precise transcriptions of the interviews and the appropriate use of categories. This reliability was also evident in data management, as the researcher verified the word-for-word transcripts of the interviews, then substantiated, clarified, and checked the appropriateness of themes using a methodology expert to verify accuracy.

Further validity and reliability can be seen by evaluating the study for trustworthiness. Creswell and Creswell (2018) and Lincoln and Guba (1985) agreed that in qualitative research, validity and reliability suggest trustworthiness. Lincoln and Guba (1985) submitted there were ways to create confidence in a study by establishing trustworthiness using *credibility*, *dependability*, *transferability*, and *confirmability*. Guba and Lincoln (1989) suggested *authenticity* as an additional criterion for evaluating qualitative inquiry.

Lincoln and Guba (1985) said *credibility* is seen when researchers have consistency between the participants' views and the researcher's description of the phenomenon. Prior to interviews, the researcher used reflexivity to do a thorough self-reflection on all aspects of the topic and participants in the study. A thorough self-reflection added credibility to the research

(Streubert & Carpenter, 2011). The researcher examined values and views that may have influenced the investigation in order to avoid any excessive influence on the study. While interviewing, the researcher audio recorded each interview and took field notes. Member checking in data collection and use of verbal and nonverbal collection methods reinforced credibility (Creswell & Poth, 2018). In addition, reviewing participant interview transcripts more than one time and asking participants to confirm that what was transcribed was actually what they had been describing supported credibility. Finally, to reinforce rigor, the researcher considered every aspect of the participants' data, including both supportive and oppositional findings.

Lincoln and Guba (1985) noted that a study another researcher can unmistakably follow so as to possibly arrive at the same conclusion demonstrates *dependability*. The researcher in the current study detailed the thought processes that affected study decisions and assembled a step-by-step guide to performing the study. Another researcher who wishes to reproduce the study can follow the path of the initial researcher and may arrive at similar inferences.

Transferability is a measure of a study's ability to have its information used in another context (Lincoln & Guba, 1985). Transferability is the quality that allows a reader to personalize a study and apply it to their own experience. This transfer of information makes the study more meaningful to the individual reader.

If the researcher noted that the study findings were clearly related to the data, the study demonstrates *confirmability* (Lincoln & Guba, 1985). This methodology chapter establishes confirmability by providing a clear path from the data to the outcomes. In addition, if credibility, dependability, and transferability are evident, it is easier to ascertain confirmability and verify rigor in the study (Lincoln & Guba, 1985).

Study *authenticity* indicates the participants' experiences were represented fairly (Guba & Lincoln, 1989). Each participant had a different way of interpreting the phenomenon. Individual interpretations were equally represented to reveal a deep understanding of the constructions identifying the phenomenon (Guba & Lincoln, 1989).

Gray et al. (2017) posited that to further support rigor, an audit trail is useful in qualitative research. The audit trail in the current study included tracking information that provided specific evidence for each part of the study, such as date and location of data collection, memos, and decisions about definitions and themes (Gray et al., 2017). The audit trail used this information to support authenticity and consistency.

Limitations are a part of every study. A specific limitation made by the researcher in this study was the choice of a qualitative methodology to answer the research question. With this decision, the researcher chose to use a small sample in northeastern U.S. universities and forego the resolution of generalization of the study. Furthermore, the inability to represent a demographic group accurately is a limitation of any qualitative study cause by the relatively small number of participants. Additionally, participants in this study had a time lapse of up to 36 months between completing the program and the scheduled interview. This delay may have affected the participant's memory, although evidence of this was not identified in the interviews. The researcher endeavored to obtain recent graduates to acquire the most accurate data for the study.

Another limitation was the presence of a researcher as the research instrument. The interviewer asked questions with uniformity and objectivity to decrease, if not eliminate, this bias (Creswell & Creswell, 2018). Another concern with using the researcher as the instrument of data collection is that the researcher can inject personal, historical, or social perspectives into

the descriptions given by participants (Waltz et al., 2017; Anderson, 2010). This researcher interpreted data objectively to minimize this type of bias and focus the study on the participants' points of view.

Chapter Summary

By providing a hermeneutic phenomenological study that looks at the first-hand experiences and perceptions of successful students from an ABSN program, the researcher endeavored to add to the body of knowledge about ABSN students. It is envisioned this study will be used to go beyond what we already know about this specialized population to open a new understanding of what it is to be successful in an ABSN program. The rationale for the choice of methodology was addressed in this chapter, which described how the research design aptly fits the purpose of the study and the research question. Systematic procedures were noted to detail the research approach and ethical considerations of the study. Methods of ensuring validity and reliability were addressed to establish the trustworthiness of the findings. Finally, limitations of the study design and potential areas of bias were recognized in an effort to reduce those limitations.

Chapter IV. Findings

The purpose of this hermeneutic phenomenological study was to describe and interpret the perceptions and experiences of ABSN students and what they believed to be factors of success in completing the program and in passing the NCLEX-RN® on the first attempt. The central question for this study was this: What is the lived experience of ABSN students who have graduated from an accelerated program and passed the NCLEX-RN® on the first attempt?

Data collected from eight interviews with graduates from ABSN programs who were within 36 months of having completed their program was analyzed for this study. The participants were graduates from three northeastern universities in the U.S. Five interviews were conducted face-to-face, while three were conducted telephonically. Data was collected until no new categories occurred during data analysis, indicating saturation of the data. An interview guide was used to assist the researcher to answer the central question of the study. The length of the interviews varied, ranging from 17 to 45 minutes, with the average interview lasting approximately 28 minutes. Field notes were taken, and all interviews, including those conducted by telephone, were audio recorded. At the end of each interview, participants completed a demographic data sheet. Participant demographics and descriptions are described in the following discussion.

Participant Demographics

Participants were graduates from three northeastern universities in the U.S. As shown in Table 1, demographic characteristics of the participants were analyzed. The distribution of ages revealed older students, correlating with evidence of career changers as noted in the interviews. While age itself cannot categorize a person as an adult learner, Knowles (1980) stated individuals should be educated as adults if they fulfill adult roles (e.g., worker, responsible citizen, parent, or significant other) and are responsible for their life choices. In the interviews,

each participant expressed involvement in an adult role and a responsibility for their own choices. The participants were employed as RNs at the time of the interview, and one was enrolled in a master's degree program.

According to the U.S. Department of Health and Human Services Health Resources and Services Administration (HRSA, 2019), male RNs represent 9.6% of the total RN population. In this study, one male participant was interviewed. The HRSA (2019) data on race and ethnicity indicated white, non-Hispanic RNs as the largest fraction (73.3%), followed by Hispanic (10.2%); Black, non-Hispanic (7.8%); Asian, non-Hispanic (5.2%); and multiple races (1.7%). In this study, white, non-Hispanic RNs represented the largest proportion (88%), followed by Hispanic (12%), and Black, non-Hispanic (12%). A question about the participant's primary language was included because EAL was found to be a statistically significant negative predictor for passing the NCLEX-RN® on the first attempt (Foley, 2016; Kaddoura et al., 2017; Rowland, 2013). In this study, the primary language of the participants was English.

Descriptions of the Participants

In random order, the individual participants are described below. Each participant chose their own pseudonym and in this study is identified only by this pseudonym.

Christine had wanted to become a nurse before beginning her first undergraduate degree. She stated, "When I went to my first-degree school, I actually wanted to be a nurse, but I was recruited for [sports]." She received a full four-year sports scholarship from a university but did not think she could fulfill her commitment to the sport and do well in a demanding nursing curriculum. This was noted as she mentioned "I didn't think I [could] handle both." She completed her first undergraduate degree in health science and then applied to and was accepted directly into the ABSN program. She took the summer off after graduating with her first degree

and then started the ABSN program in the fall. "I had the summer off and went straight back to school. I literally went right back into [nursing]." She had struggled somewhat at the start of her first undergraduate degree program but soon identified her best learning technique and used that technique to help her be successful in the ABSN program. Christine lived at home with her family and worked during the ABSN program.

Skye started her first undergraduate degree in one college, stopped for a few years, and then applied to another college and completed her degree online. She described the path to her first undergraduate degree in this way: "[The] first half was on land, then I stopped school for a few years, and then I went back to [an online school]." She credited the online, "one-class-at-atime" courses with helping her be successful and acknowledged her mother for instilling in her a need to get a higher education. She revealed,

I think watching my mother go to school for advanced degrees pretty much most of the time while I was growing up [helped]. That made me believe, well, if she can do it and she had two kids, she was working full time, we lived in [one state], and she worked in [another state], that it [was] possible I [could] handle it.

During an illness, Skye recognized the role of nurses and from that point on wanted to become a nurse.

I was [a patient] in the hospital. The nurses were so helpful and kind. They made me feel good. I wanted to be that for other people. [I wanted to] make them feel good, smile, laugh, and believe in themselves.

She initially researched obtaining an associate degree RN from her local community college, since she already had a bachelor's degree in another major. While taking her prerequisites for the associate degree program, she was waitlisted for the community college RN program. In a

meeting with one of her course professors, she talked about her desire to be a nurse and the fact that she was on the waitlist for the RN program. She remembers mentioning "I have a bachelor's degree." The professor informed her about ABSN programs. She was unaware of these accelerated programs, as she commented, "I didn't know [they] existed at all." She decided to apply to an ABSN program and was accepted. During the program, Skye worked per diem and lived with family.

Marie's first degree was in psychology and human development. The job associated with that degree was not an attraction for her. She said, "The social work side of things was not really a draw for me ... a lot of things you see in that line of work can be pretty tough." She was working two jobs and could not see herself continuing at this pace for an extended period of time.

I was becoming very, very burnt out because I had a forty-hour caseload [in my full-time job] and then part-time, on my weekends off, [I was] a bartender-server. I was basically doing seven days a week, and I knew that I can only do it so much longer.

She considered a master's degree in her field but decided it would not make her happy, as she revealed, "I knew I did not want to get a master's in social work." She considered being a nurse but did not want to start course work all over again for a four-year degree. A coworker attended an ABSN program and shared information about it with her. She investigated some ABSN options and decided she would apply. She was willing to gamble almost everything for a chance to become a nurse. To lower her cost of living, she decided to move out of her apartment and move home during the ABSN program.

Jean became interested in nursing while working in another country. When she returned to the U.S., she worked in a health center and appreciated the care the nurse practitioners gave

the patients. "I saw the difference in care [from nurse practitioners]. [The] nurse practitioners had much higher satisfaction rates and higher productivity rates. I think the patients ... felt more listened to. That is why I became interested in nursing." In looking for a way to become a nurse practitioner, she found the ABSN program and decided it was a "first step" to eventually going back for her master's degree in nursing. She chose an ABSN program that was close to home to decrease her living expenses.

Robert's journey to the ABSN program was not entirely a direct line. At the age of 18, he lost a significant family member, which prompted him to take time off from school and work. He revealed, "I had a [significant family member] who passed away ... [when] I was 18. That was right around the time I was finishing high school. [It] made me take time off [of] work ... [and] school." After some time off, he went back to school and was working in "odd jobs" that eventually led to personal training. As a personal trainer, he was motivated to attend college later in life for physical therapy. During this first bachelor's degree program, while in one of his anatomy and physiology courses, he realized how interesting nursing could be as a career. He said, "It came time to apply to physical therapy schools [for a doctorate], [but after thinking] about everything, I got pulled in more towards nursing." Thinking about the earlier personal loss substantially influenced his decision to become a nurse. He verbalized,

[The family member] was sick for several years. Especially towards the end, there were nurses. Seeing [a nurse] helping someone in such critical condition ... made an impact. I just [felt] as though I [had] the appropriate compassion and drive for [nursing].

He spoke to others about the ABSN program. Their feedback, coupled with the memory of how important the nurses were in the care of his loved one, cemented his decision to apply to the

ABSN program. "I still have the picture of [my family member] in my backpack that I put there on day one of the nursing program." During the program, he lived with a roommate.

Mariah's first undergraduate degree was in biology. After graduation, she worked in the pharmaceutical industry. To her, the long hours and disappointing quality of the industry did not feel right. She articulated, "I was working really long hours, didn't have weekends off, and just figured it out. I wanted a different career path." She remembered a time when she had worked as a nurse's assistant and "absolutely loved it." It prompted her to look into a different career path. She knew someone who was successful in the ABSN program and decided to apply and become a nurse. She felt nursing was a very rewarding profession. "I just looked back on my life and thought [about] what brought me the most happiness. It was being a certified nursing assistant. That's when I decided ... I wanted to become a nurse." During the program, Mariah owned her own home.

Emma was in her internship for her physical therapy degree when she decided the care a nurse gave a patient was much more interesting than the care of the physical therapist. She mentioned,

In my internship for physical therapy, I was working under an exercise physiologist and registered nurse. The way he could care for a patient as a nurse was just so much more interesting to me than the physical therapist side of it.

She knew then she wanted to switch, but she had a scholarship for her first degree and she could not jeopardize it. She said, "I had a scholarship" and that she was almost done with her first degree. "[It] didn't financially make sense to change at that point." Similar to Christine, she completed her first undergraduate degree and then applied to and was accepted into an ABSN program. During the program, she lived with a roommate and worked part time.

Anne's parents were in the healthcare field. She articulated, "My mom was a nurse [and] my dad [is an] anesthesiologist. I come from a pretty medical family." After her first undergraduate degree, she was contemplating going back to school to become a physician's assistant or a nurse. She researched both professions and decided to become a nurse. "I ... weighed the pros and cons and looked at all the different programs." Like Marie, she did not want to start all over again from the beginning to get another degree.

I already had my first degree and obviously put a lot of time and money into that, so I didn't want it to be a ... wash. I liked the idea that an [ABSN program] took the basics of my first degree, and then combined it with the degree I wanted.

She decided the ABSN program was the program for her. During the program, she lived with a roommate and was unemployed.

Data Analysis and Findings

Digital audio recordings were transcribed verbatim by a transcription agency and afterwards verified word for word by the researcher. Transcripts were sent to participants for member checking to verify interview content. If edits were not needed, the participants were asked to confirm the accuracy of the transcript. One edit was made by a participant. The researcher read the interview information read several times for comprehension and clarity and used memoing to categorize ideas and note key quotes. Each interview statement had equivalent value, and the hermeneutic analysis process, as described by Diekelmann et al. (1989), was used to group the data into initial categories, resulting in themes. During analysis, the researcher contacted three participants to clarify certain interview information related to financial aspects of the program, use of a common resource, and family support.

The analysis examined participant interviews for meanings that occurred implicitly or explicitly, and these were then compared and contrasted to identify patterns, categories, and themes. The goal of this hermeneutic study was the "discovery and understanding of meaning embedded" in the information found in the interviews (Diekelmann et al., 1989, p. 13). During the analysis, common meanings and shared experiences of the ABSN graduates emerged.

Analysis followed the seven stages of the Diekelmann et al. (1989) hermeneutic analysis process, including verbatim transcription of audio recorded interviews, reading and rereading, identification of categories, notation of key quotes, recognition of the category similarities and differences, detection and naming of themes, and interpretation. Once member checking was complete, transcript data was color coded according to question for comparison to other data collected from other participants. This data was shared with a member of the dissertation committee who is an expert in qualitative methodology to discuss categories and emerging themes. The researcher then developed a spreadsheet to organize data by similar categories, discrepant data, and key quotes to support findings. Presentation of differences, as well as similarities, were critical to revealing a full picture of the participants' experiences (Diekelmann et al., 1989). Verbatim examples established textural descriptions of the lived experiences of the participants.

Four themes were derived from the data analysis: (1) Responding to the Call, (2) Unleashing the Power Within, (3) Support Systems, and (4) One Life-Changing Test. Within each theme, subthemes emerged. As shown in Table 2, each theme was authenticated with information and quotes from the participants. The researcher, as well as a member of the dissertation committee who is an expert in qualitative methodology, verified the correlation of the themes with the information.

Two graphic representations were used to visually organize the study themes. The first is a matrix of the main themes that emerged from the experiences and perceptions of the ABSN graduates that led to their success in the ABSN program and on the NCLEX-RN® exam (Figure 1). The surrounding cells are the major themes of this research study, which lead to the center cell of success in the ABSN program and on the NCLEX-RN® exam according to the participants.

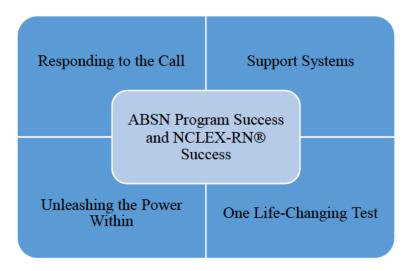


Figure 1. Matrix identifying the themes emerging from the experiences and perceptions of successful ABSN graduates leading to success in the ABSN program and on the NCLEX-RN®

The second is a concept map that demonstrates the relationship of the three subthemes, *Identifying the passion, Can I do this?* and *I need to make this happen now*, which are under the first main theme, Responding to the Call, to the theoretical framework assumptions of the adult learning theory (Knowles, 1980, 1984) (Figure 2). Each subtheme includes characteristics of two assumptions of the adult learning theory. The smaller blue circles represent the subthemes, and the bulleted items are the corresponding assumptions of the adult learning theory.

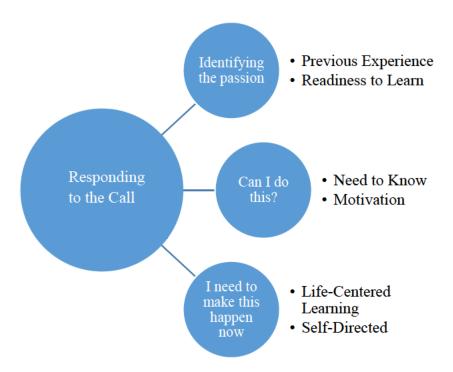


Figure 2. Concept map of the first theme, Responding to the Call, and the subthemes correlated to the adult learning theory assumptions

Responding to the Call. This first theme to emerge reflected the participants' beginnings in the ABSN program. The sense experienced by the participants coincided with Emerson's (2017) definition of a calling to nursing. Emerson (2017) identified that the calling consisted of three things: a passionate intrinsic motivation, an ambition to engage in nursing practice, and a desire to help others. The participants in the study spoke about the components of a calling to nursing, such as passion, a desire to be a nurse, and an aspiration to help others. Duffy and Dik (2013) linked a nursing calling to student success and a greater career commitment that may have an impact on the nursing workforce. Marie mentioned she had a strong desire to be a nurse, nursing was a "dream" for her, but she did not know of a way to achieve it. When she found the ABSN program, she knew the "dream is not dead." Christine indicated that she had wanted to be a nurse even before she first entered college. She knew she was meant to help people, and being a "server ... as long as [she] could remember" helped

solidify that "passion." Skye affirmed her feeling that "nursing is a passion." She added that to enter an ABSN program, "you need to really want it ... to [succeed]."

The theme of Responding to the Call was developed from an interpretation of the information shared by the participants. Key factors in the information were consistent with elements in the assumptions of Knowles's (1980, 1984) adult learning theory. Individuals who demonstrate characteristics representative of the theory elements are those who take on adult roles, perceive themselves as responsible for their life choices, and demonstrate a mature approach to accomplishing their goals, similar to the participants in this study. The participants recognized the need to do something different with their lives, and they took it upon themselves to make it happen. The steps to recognizing a need for change and making that change happen emerged as subthemes. The subthemes were (a) *Identifying the passion*, (b) *Can I do this?* and (c) *I need to make this happen now*.

Assumptions of previous experience and a readiness to learn from Knowles's (1984) adult learning theory correlated with the subtheme *Identifying the passion*. This theme arose from the participants' previous experiences. Only after undergoing those previous experiences were the participants ready to give up the life they had been living and learn something new to build a different life.

Other assumptions such as a need to know and motivation to learn paralleled with the subtheme *Can I do this?* (Knowles, 1984; Knowles et al., 2015). Adults need to know why they must learn something before they take on the task of learning it (Knowles et al., 2015). Being successful in discovering why there is a need to learn something requires strong internal motivation. External motivations such as a higher salary or a desire for a better job may initiate

a change, but internal motivations such as self-esteem and a better quality of life are more potent motivations for persistence in achieving a goal (Knowles et al., 2015).

Lastly, Knowles's (1984) assumptions of life-centered learning and self-directed behavior are related to the subtheme *I need to make this happen now*. Adults are life-centered when considering learning opportunities (Knowles et al., 2015). They are interested in learning new things when they perceive learning will help them in their real-life situations. Self-directed adults, when they reach the conclusion that additional learning will help in life situations, know they must depend on themselves to obtain new learning opportunities and make change possible. These assumptions were noted in previous literature connected to ABSN students and appeared once again in participants' responses.

Identifying the passion. This subtheme embodied the participants' passion to be a nurse after seeing nurses in action. Five participants specifically expressed passion about nursing in their decision to attend the ABSN program. Mariah said, "I always had a passion for nursing. I always saw it as rewarding. I've always wanted to help people." Christine indicated that she wanted to be a nurse even before she first entered college. She knew she was meant to help people, and being a "server ... as long as [she] could remember" helped solidify that "passion." Skye also affirmed her feelings that "nursing is a passion." She added, "You need to have a passion for nursing. You need to want it." Robert emphasized, "I just feel as though I have the appropriate compassion and drive for this field."

Every participant wanted to help people and knew they had the caring and compassionate characteristics to do so. Some participants were working in a job using their first degree and did not achieve the satisfaction one would expect from a chosen career. Emma remarked that when she was working in the career of her first undergraduate degree and saw a nurse in action, she

thought, "Maybe I want to switch [careers]." After seeing nurses perform their roles and identifying the impact of nurses, some participants decided their current employment paled in comparison to the profession of nursing. Robert and Christine noted that after seeing the thoughtful, compassionate, and confident care displayed by the nurses who were looking after a loved one, nursing became their career of choice. Robert said that after seeing a home health nurse "provide [a family member] amazing, amazing care," he felt as though he had the "appropriate compassion and drive for [nursing]." Robert mentioned he knew he could be helpful to others, but he needed to complete the ABSN program to do that. Christine said that after seeing nurses care for a family member who was in the hospital, she "loved the nurses that took care of [her family member]." After graduating with her first degree, she immediately entered the nursing program.

Mariah expressed that she had felt a sense of accomplishment when working in the healthcare field as a nursing assistant. She emphasized the point by stating that, at the end of the workday, "I actually felt like I did something." This sentiment was unlike the feeling she received from other jobs, which left her "frustrated." That was when she "decided" to be a nurse; that was her "aha moment." Each participant confirmed their life-goal was to help people, and they saw nursing as the best way to accomplish it. Christine revealed, "I feel like [in] nursing you're basically a server. That's what I feel like. I'm good at ... servicing others." Robert commented that reflecting on "the experience of [a family member's] sickness" and "what [he] could do to give back" was the reason he is a nurse today. Jean verbalized that she "never had been interested in health prior to volunteering abroad, and I just saw the impact of [nursing]. I saw the difference in care." She said she was "comfortable ... taking care of

people." Marie stated that she just liked "that helping ... and knowing that you are making a difference."

All the participants referred to nursing as a way to increase self-esteem by helping others and improving their own quality of life. Jean mentioned, "[Nursing] is really helping people." Mariah commented, "I've always wanted to help people." Marie agreed and said nursing is "actual helping and knowing that you are making a difference." Emma wanted to do "things [that] would ... help someone." Skye also acknowledged, "nurses [are] so helpful and kind." After considering their passion and what they wanted their life's impact to be, these participants were ready to consider this change.

Can I do this? This subtheme was manifested in participants' comments that it was not enough to want to help people; they also needed to know whether they had the time and energy to be dedicated to the ABSN program and be successful. Robert wanted to "give back" after seeing nurses care for a loved one, Mariah saw nursing as "rewarding," and Christine "always wanted to be a nurse." All participants, at one time or another prior to starting their program, wanted to be a nurse, but some had been uncertain about their decision. Robert originally enrolled in another program, and then, during a class that included nursing students, he decided nursing was a better path for his career. He spoke about his initial indecision: "In the beginning ... dealing with [a family member's] illness ... not really being the best student in high school ... it was a bad time." Mariah was not sure nursing was right for her. After much consideration, however, she decided working in the healthcare field brought her the most happiness. For Mariah, after much thought, "It just felt right." Christine initially thought the nursing program was too difficult to also have a competing agenda of focusing on exceling in sports. She said, "I didn't think I could handle both [sports and the nursing curriculum]." After graduation, she still

yearned to be a nurse and promptly returned to school in an ABSN program. Anne concurred when saying "it has to be this intangible drive that is important to you."

Time was another feature participants considered. All participants stated they did not want to invest another four years to get another degree. The ABSN program was just 12 to 15 months instead of another four years. Anne acknowledged that she had "put a lot of time and money" into the first degree and did not want it to be "a wash." She further stated she did not want to be "wasting time and taking the same courses" she took in the first degree program.

Anne asserted, "You already did the four-year student thing. You want to get out there ... working." Marie mentioned, "The idea of going back and doing four more years ... didn't jive." Robert indicated he "was already an older student going back ... [and he] wanted to finish school quickly." Similarly, Jean said she "was a little older than most people in the program." Knowing that the program was only a year made it more palatable for her. Skye also indicated that "12 months versus 30 months" was an important consideration. She "wanted [the] faster [program]." Time played a part in Mariah's decision as well. The fact that the program was "only 12 months of your life for endless opportunity" confirmed her decision to go back for her nursing degree.

Time also played a part for six of the participants in relation to their then-current careers. Frustration, burn out, discontent with multiple jobs, and unfulfilling careers were some situations described by these participants that helped them make the decision to investigate going back to school for nursing. Skye mentioned that she "wasn't enjoying [her] career anymore." Mariah revealed she "was getting really frustrated" with her job. Marie wanted to make a difference in someone's life "instead of just band aiding a situation." She shared that she had been "becoming very, very burnt out [in her first career]." Emma said she knew she wanted to learn more in the

health field, and she "didn't want to pursue anything further [in her first undergraduate degree]." The ABSN program offered each a way to earn another degree and a career change in 15 months or less.

I need to make this happen now. In this subtheme, after deciding nursing was a career change they wanted, the participants had to assess available resources to make the opportunity a reality. Each participant stated a desire to help people, but it took more than desire to get accepted into an ABSN program. All participants had to change their lives to accommodate the demands of the program. Six participants had the required prerequisite courses completed or almost completed. Prerequisite courses were the required courses the schools of nursing wanted the applicants to complete before being fully accepted into an ABSN program. Five participants had to leave jobs that offered them financial security. Marie declared, "I was willing to gamble almost everything to try to go for it." Two others had to vary their part-time employment to accommodate going back to school. Furthermore, six participants either chose to remain living in their family home or moved in with a loved one or friend during the program for extra support. Marie explained "I actually had an apartment for the longest time that was two blocks away from my school, but I decided to give that up, move home, and commute to lower my cost of living." The outliers were Mariah, who had a mortgage, and Skye, who lived with and supported a young child.

Finances played a big part in the decision to attend an ABSN program. Two individuals risked losing scholarships. Christine's first undergraduate degree had been supported by a sports scholarship. To maintain that scholarship, she had to continue in the sport throughout her first undergraduate program. She had wanted to be a nurse prior to the first degree, but she did not think it was possible to do well in sports and in the nursing curriculum. She said, "I actually

wanted to be a nurse, but I was recruited for sports. I didn't think I [could] handle both [sports and the nursing curriculum]." After graduation, she had the same motivation for nursing she had had previously. She decided to apply for an ABSN program with a renewed feeling that she could be successful without the commitment to sports.

Emma also received a scholarship for her first undergraduate degree program. In her senior year, she decided that her first major did not offer her the career she had imagined. While working in the healthcare field, she saw a nurse in action and knew she wanted to be a part of that profession. She mentioned that the way the nurse cared "for a patient … was much more interesting to me than the physical therapist side of it." She thought, "Maybe I want to switch [careers]." Similar to Christine, she did not want to lose her undergraduate scholarship; she completed her first degree and then applied for an ABSN program.

Participants also had to consider the financial impact of paying for the program. Need-based federal student aid programs, such as the Pell Grant and the Federal Supplemental Educational Opportunity Grant, do not offer financial support for individuals pursuing a second bachelor's degree in nursing (Federal Student Aid, n.d.). Therefore, these participants needed to find a way to independently pay for living expenses and the program. Additionally, most ABSN programs suggest that students not be employed for the duration of the program (Rico et al., 2010). Marie said, "[My father] was very nervous about me doing this because, you know, I wasn't going to be working for the time that I was doing this program so that I could dedicate my time one hundred percent to it."

Six participants had been working prior to applying to an ABSN program. They were earning money and therefore would lose potential income if they returned to school. Although every participant gave up something to enroll in the ABSN program, these participants had been

financially independent prior to beginning the program. Marie said, "I took out another hefty student loan which, you know, when you already have one degree that you're starting to pay off and then you take out another loan. We all know the cost of student loans these days. It's not pretty." She summed it up by saying, "I put everything on the line as far as my personal life, my financial situation, everything, to do this program." Anne considered herself very fortunate as she had savings and thus did not have to work during the program. Mariah lived independently and needed to take out extra loans for her mortgage. Seven participants had to secure loans during the program. At least two participants added additional loans to previous undergraduate loans.

Unleashing the Power Within. A second theme emerged from the participants' affirmations of a variety of emotions after they had been admitted to an ABSN program. Upon being accepted into their program, all participants communicated, they had felt an initial excitement, followed by hope, some despair, and then joy. Students often misjudge the academic rigor of nursing school (Fagan & Coffey, 2019). As the workload becomes more demanding, students need to concentrate on personal resilience, a sense of belonging to the program and to their support systems, and problem-solving skills to rise above any difficulties and succeed (Fagan & Coffey, 2019). While students feel an initial sense of elation on being accepted into a program, a heavy workload may steer individuals toward despair. The participants applied previous skills and worked through their emotions and adversities during the program to successfully complete their ABSN program. Their pathways to success during their program are noted in three subthemes: I think I can, Uncertainty, and finally, I knew I could do it.

I think I can. In this subtheme, some key factors noted by participants that gave them hope of success in the ABSN program were experiences from previous schooling and

employment. Seven participants specifically mentioned that maturity had played an extensive role in their success in an ABSN program and on the NCLEX-RN®. Emma explained, "I think one of the great things about the accelerated program is the fact that we all have that education behind us ... and that the maturity level is required for the discipline of nursing and for completing an accelerated program quickly." Anne noted she had had these thoughts before choosing the ABSN program: "You mature a little bit. You're not 18 years old [trying to] figure out what you want to do. You've been there and you've seen it. Your goals are what you want to be doing." Jean revealed, "I was a little older than most people in my program. I had eight years between my first degree and going back for my second. I had worked in a professional environment. I think that that helped [in the program]." Although one participant did not mention maturity exactly, she alluded to the helpfulness of having completed a previous degree as a tool in her success. Each participant mentioned experiences in their first undergraduate degree or work that had helped them learn by giving them the ability to correlate new information with previously learned information. Marie commented that, in her first degree program, when she was "interested in something ... [learning] almost [came] naturally [to her]. A lot of the [nursing] material [she] was really interested in." Anne stated that she "took the basics of her first degree and then [integrated them into] the [nursing] degree." Christine also affirmed that "things from [her] first degree helped [her] understand more." Emma talked about learning a "good work ethic" in her first degree helped her get through the nursing program. Jean remarked, "[Working] in a professional environment ... helped ... on understanding expectations" for her ABSN program.

The participants acknowledged specific qualities they possessed prior to their ABSN program that helped in their success. Emma stated she had had a tendency to procrastinate in her

previous schooling but soon developed a good work ethic to help her be successful. She said "I used to be a big procrastinator in my undergrad. ... There was no opportunity for that in the [nursing program]. ... It didn't allow any time for slacking. You had to develop a work ethic." She identified this as critical to her success. Skye also mentioned procrastination as a detriment to her success. She stated, "I'm a horrible procrastinator." She learned ways to promptly accomplish her school assignments in her first degree program and carried those techniques forward to help her be successful in the second. Skye also revealed that her first degree program had taught her how to understand topics and situations instead of just memorizing for tests. "[College] expected a certain level of deeper understanding as opposed to ... spitting back what you just read. ... [I] realized that I can't just memorize things. I needed to understand it." She recognized this as a very useful tool in her second degree program.

Christine indicated that the beginning of her first degree program had been a struggle, as she did not have effective approaches to studying. After learning study techniques in her first degree program, she "blossomed" and did much better in school. She indicated "learning how to study" as "the most important thing" that had helped her become successful.

Mariah credited sports as her helpmate in higher education. "Every sport I ever played in [was] a team sport ... and that is nursing. ... You have to be a team. You have to work together to get things done." By playing a team sport, she learned time management, structure, and goal setting.

Anne discussed the importance of advocating for oneself and speaking up when confused or unaware of what is being taught in class. "I went to a [big campus school as an undergraduate]. ... It taught you to be an advocate for yourself, because no one else is going to

be. ... It [taught] you to communicate with your professors and how to [ask for help]." She recognized good communication techniques as imperative to being successful.

Four participants identified organization, time management, and prioritization skills they had learned previously as immensely helpful in their second degree program. Robert revealed, "By the time I was able to go back to school ... I [felt] as though I had a little bit of an advantage as far as organization and how to prioritize." Anne agreed: "You have to prioritize ... [and] organize." Three participants had previously worked in healthcare. They mentioned this experience as helpful because it gave them an idea of what to expect in the nursing program. Emma stated that her previous work in healthcare prepared her for what she would see as a student nurse. She mentioned that she was already exposed to "the things we were going to see" and that previous experience allowed her to be sure she was "ready to go into nursing." Jean stated, "People who have been in the accelerated program gave a good idea of what to expect, [but] no one can ever one hundred percent explain it to you." She added that having an idea of what the program was going to be like did help.

Uncertainty. This subtheme became evident as each participant spoke of times of uncertainty when they were unsure they would make it through their ABSN program. Marie specified, "There were times that I definitely felt overwhelmed when trying to grasp some of the material. I almost was not successful." Anne identified times she would come home and say, "I am going to fail." Every participant distinctly expressed stress and doubt of success in the program. Robert stated, "It's going to seem like it is incredibly stressful. Just stick with it. It doesn't last forever." Mariah agreed as she indicated that in the second semester "it was very stressful" and she "really doubted [herself]."

Each participant noted uncertainty impacted success. According to the participants, doubt was sometimes caused by something that was happening in their ABSN program: tests, assignments, or workloads. Anne and Mariah mentioned a new testing procedure was stressful. Mariah said paper and pencil tests were changed "so all the tests [were] on a computer. You couldn't go back and answer questions. You had to answer them right then and there." However, Mariah revealed that she learned something from that time. She discovered she would need "earplugs for NCLEX testing." Robert affirmed the change in testing procedures created much insecurity and stress for him as well. He also asserted the "learning environment was a little too experimental for my year." The transition to "paper-free testing" and "new software ... added a measurable amount of stress," in addition to the stress created by the "subject matter in the tests." Additionally, Robert preferred less class time and "more of an independent learning program." He believed he wasted precious time when class time was used to present "[PowerPoint] slides," when he could read, "organize, and dissect everything" himself. Robert said there were times he needed to "fight through the discouragement." He needed to say to himself, "Let's calm down. Let's take a step back." He also mentioned, "The whole thing is discouraging, but you can be successful."

Emma's noted her uncertainty was in the "third summer semester. It was extremely heavy, just the workload itself. So just trying to get through all of the projects and the [tests made her unsure she was going to be successful in the program]." Jean confirmed, "Everything is hard ... but the end goal of everything ... [is] making an impact [and] ... helping people." Jean's insecurity sometimes stemmed from others in the class. She said hearing others say "Oh, I only studied for an hour, or you know it wasn't that bad" when she was thinking it was made her doubt her abilities. She said she was thinking "What am I doing wrong?"

General examples of times when doubt and stress were evident included after receiving a bad test score or after a terrible clinical day. After receiving a low test grade, Mariah "immediately" went into her program director's office and let her know she had "failed." Used to doing her best and being rewarded for it, this was something she had not expected. Mariah said it took time, but the "program made [her] grow a lot." She expressed, "There is going to be times that you are not going to always get the A, and you have to be okay with that." Jean acknowledged, "Sometimes clinical is really hard." She further explained, "Having people remind you [the nursing program] is supposed to be hard ... and you are still [going through] it" is helpful. Facing two tests in one day also created stress. Anne cited this as an example and added "[You need to be able to] triage your classes ... [and decide] maybe this test I can put not as much time into" and take a lower grade.

Some participants felt uncertainty and stress due to the accelerated pace of the ABSN, in which true learning (not memorization) needed to take place in rapid succession. Anne supported this by stating nursing takes time to learn. This coupled with the fact that the student's "brain is always on" and they are "tired" created an environment that could decrease a student's confidence. Emma agreed the rapid pace of the ABSN program, compared to that of a first undergraduate degree program, put pressure on students. She said, "You couldn't let yourself ever get behind ... otherwise you would be lost." Jean noted that if a student in the ABSN program did not understand a topic, skill, or assessment and did not ask about it, that person might not be successful in a test or even in the program. She articulated, "Get over whatever embarrassment you have and ask for help." Skye offered, "Don't wait ... to start studying. ...

As soon as you miss more than a day or two, then you're just way too far behind." Marie stated, "Waiting ... is ... the worst thing you can do to yourself. In an accelerated program, you wait

one day [and it] is like ... waiting a week [in another program]." The short program and accelerated learning pace had a considerable effect on students' uncertainty.

According to the participants, uncertainty was also noted when the problems of the outside world impacted study time or nursing coursework. Two participants mentioned the ABSN program did not always leave time for outside work, yet work was important to their financial health. Emma left her place of employment because she could not devote enough time to study and schoolwork. The decision about whether to contribute financially to her living expenses or devote more time to her studies made her apprehensive about continuing in the program. Her decision caused a "financial strain" but ultimately gave her the time to dedicate to her nursing studies.

Some participants experienced uncertainty in almost every semester. Robert stated, "It's almost like a boot camp-type situation. The whole thing is going to be discouraging." Others pinpointed a specific semester in which they were not sure they would be successful. Emma mentioned, "That third semester ... was the heaviest load." Skye, Mariah, Jean, and Marie said it was the second semester. At one time or another, each participant mentioned times of doubting they would complete the program. What made them successful is how they managed the insecurity and stress and deployed skills and tools to help them. Walker (2016) cited one key to student success is the use of stress management skills.

I knew I could do it. This subtheme recognizes that what brought these participants through the moments of uncertainty and stress were the episodes of promise and hope that if they tried their best, they would be successful and achieve their career goal of becoming a nurse. Participants used different tools to help manage their stress levels. Mariah said that to help herself through stressful situations she would talk to the people in her "study group" or to the

"program director." Additionally, she would remember that "it's 12 months of your life that you [have] to give up ... for a lot of endless opportunity." Anne mentioned talking about her stress level to her significant other or to the educators in her courses. Robert also used his significant other as a sounding board and reminded himself "of all of the things that [he previously] had to fight through ... [and] all of the things that [he] had accomplished." Jean's stress-fighting tool was removing herself from the stressful situation. When stress mounted, she took a break and "stepped away from [the situation]."

All the participants mentioned it was a journey to becoming successful, but they all also stated there was one moment of clarity when they knew they would be successful in the program and in taking the NCLEX-RN®. For Jean, it was the end of a clinical rotation of which she was not particularly fond. An instructor praised her for doing well by telling her "You don't have anything to worry about. If I was in the hospital and you walked in and you were my nurse, I'd be like, great. I'm in good hands." For Marie and Mariah, it was after they had scored extremely well on a comprehensive standardized test. Marie said that after the standardized test "everything was clicking." Emma and Anne also noted high test scores gave them the confidence that they would succeed. Christine and Robert reported clinical experiences in which they knew what to do in an emergency situation even though they had not been told what to do. The innate sense that they knew what to do and did it increased their confidence levels for the remainder of the program. Skye knew after the second semester that she would be successful. A clinical instructor offered her words of encouragement and said "Bs get degrees." From that moment, Skye knew she would make it through the program. While all participants did not relate the exact same moment they knew they would be successful, they all claimed to have had a moment when they knew the profession of nursing was well within their grasp. These moments

helped to boost their confidence and gave them the determination to continue and succeed in the program.

Support Systems. The third theme to emerge was support systems. Positive interactions with family, peers, and faculty help students navigate through uncertain times and realize their goals (Thomas & Revell, 2016). This positive social support is noted to create resilience in nursing students that helps them through the nursing program and assists them in their future profession (Thomas & Revell, 2016). While family is the most commonly occurring theme in the literature, a supportive peer group and faculty support are described as invaluable to nursing students (Thomas & Revell, 2016). Each participant defined a support system to assist them through the ABSN program. For these participants, the three subthemes of support came from *Study Groups, Family*, and *Faculty*.

Study Groups. Relationships with peers help students feel connected and encourage persistence and success through a challenging nursing program (Fagan & Coffey, 2019). Four participants made friends within the program and formed study groups to help them succeed. Emma mentioned the members of her study group were "on top of each other at every point to get through each class and test." She revealed,

[The big] thing that got me through is study groups. It was a different style of testing than most undergrad programs. It's more situational, and there are trick questions in nursing. It is important to really talk those things out in a group and talk out a topic versus just memorizing facts. So ... a good study group is important.

Mariah defined her study group as a "family." She said, "We stuck together and made it through." Christine indicated her study group helped her "remember more things." Jean said the people in her study group were her "three closest friends in the program." Each of these

participants said having someone close who knew what they were going through in the program helped.

The participants kept in touch with their study friends even after graduation. Robert and Skye formed different kinds of study groups. Robert and a significant other who was going through a similar healthcare program would often study together. He mentioned they helped each other learn, as she and he were in different programs but were often studying the same "subject material." Skye also mentioned studying with one other person, because anything more would have been a "distraction" for her. Two other participants tried study groups but ultimately found they were not as effective as independent studying.

Family. Another factor that sustains a student through the transitions during college years is a sense of belonging to a family (Fagan & Coffey, 2019). All participants received some type of support from family members and/or significant others, including financial help for living expenses. Specifically, two participants revealed that during times when they were not working, their significant others took over the responsibility of the household expenses. Others moved in with parents or a loved one to decrease the cost of the program and living expenses. Emma specified that her significant other "was supporting [them] financially and [mentally]." Marie said that her father "helped [her] out ... and was going to take care of [her]."

Most participants relied on emotional and sometimes logistical support from family.

Emotional help was noted when the participant had had a bad day and needed to talk or in the participant's knowing that if anything happened to them, their family would take care of them.

Jean's mother was proud of her and gave her constant "encouragement," and she would tell her friends that her daughter was becoming a nurse. Additionally, her mother would "cook dinner if she knew [Jean] had a gazillion things to do." Marie's father was a "huge supporter" who would

encourage Marie to continue in the program and then offer her money to pay for her schooling. She verbalized, "As he saw me being successful ... he was like 'keep pushing. You have this. You could do it. Don't give up.' Anything that I couldn't cover with loans, he helped me out with." Christine's mother would encourage her to do her schoolwork and offered to financially support her while she was in school. She explained that her mother would say, "You need to focus on school. It's okay, I'll support you." Anne acknowledged, "I had a supportive partner at home that helped take over some more of the household duties. I basically would not come out [of a room] except for dinner and then go back in and just study nonstop." Knowing that someone was on their side made a significant difference in the success of these participants.

Participants' family members also provided physical help in the simple act of making dinner for the student who had had a long day at school or in doing chores around the house to make the home environment as undemanding on the participant as possible. Skye indicated that knowing her parents were there to help with transportation relieved a huge burden and allowed her to commit more time to schoolwork. She said that having her father "drive [her son] around and ... [pop] in on [her son]" was a great support. Anne acknowledged that having her significant other "doing household chores, taking care of the cats, making dinner [so she] didn't have to take time to do that" was enormously helpful.

A lack of support from family and a significant other impacted Skye and Mariah.

Initially, Skye had difficulty when her significant other "needed attention." As the program was consuming most of her time, she had little time to offer her family. Skye articulated, "The program is your life, [and] there's no other life besides the program." Subsequently, this relationship dissolved and her schoolwork suffered. Mariah had a similar experience with a significant other. During a time when support was essential, her significant other was not

responsive to that need. Consequently, as with Skye, her relationship ended. Mariah mentioned that during that crucial time when she needed support, her "[significant other] did not step up to the plate." The relationship dissolved, and she "had to take out extra loans to pay for the bills and the mortgage."

Faculty. Nursing faculty support fosters persistence, resilience in the face of setbacks, and successful student outcomes (Walker, 2016). Helping students recognize how they learn, what challenges them, and how to apply coping techniques may cultivate their motivation to succeed (Maiese, 2017). All participants in this study mentioned the faculty were critical to their success.

Classroom and clinical faculty members and directors of the programs constituted an impromptu support system for these participants. Six participants said the program directors had a meaningful influence on them during the program. Robert shared a story of a time he was not feeling positive about his performance in the program. He spoke to the program director, and the director took the time to encourage and help Robert learn a way to study to improve his grades. He mentioned the program director was "awesome. She would help you out with the course material, how to study ... [and] when you just felt like crap about yourself and you were having a bad day because you had a bad test grade." Emma said her program director kept in regular contact to monitor the ABSN students. She stated, "She would always be checking in with you and seeing how the program was going, and what modifications they can make."

When possible, directors asked educators to make modifications to help the students.

Jean and Anne credited their ABSN program's success to their program director. Jean specifically said, "I think the reason that the program has been so successful has a lot to do with her. She is so patient ... encouraging, and she's really great." Anne said her program director

was "the pulse of the whole program. She [would say] you can do this, just believe in yourself." They described their director as patient, kind, and encouraging. Mariah and Skye added that their program director was a cheerleader and a good listener. Mariah acknowledged, "She really stuck up for us. She made sure that every single person never gave up and did whatever they had to do to get through." Mariah said, "She was our number one cheerleader." Skye mentioned that the program director "kept in contact" with her and "checked in on [her]." When Skye was unsure about her success in the program, she credited the program director for helping her through that time by "[helping] her set up how [she] needed to finish." She indicated, "She was the reason why, I think, that I made it."

Faculty in classes and clinics also encouraged the participants. Marie stated the "support of the faculty was a huge reason that [she] was able to be successful." She continued, saying that faculty members helped students identify areas in which they were struggling and helped them find ways to improve. Jean had faculty members who would encourage her, telling her the ABSN program was "achievable" and adding, "We are here to help you." Overall, each participant remarked on the helpfulness of ABSN faculty.

One Life-Changing Test. After completing an ABSN program, a graduate must pass a national licensure exam (NCLEX-RN®) to obtain an RN license. This is a high-stakes test, and most test-takers spend a substantial amount of time preparing for it. Success on this exam is the entryway for graduates to practice as registered nurses, thereby making it a life-changing test. Participants offered tips for success that worked for them and also identified hurdles when preparing for the exam. The subthemes discovered were *Passing* NCLEX-RN® and *Recognizing hurdles to* NCLEX-RN® *success*.

Passing NCLEX-RN®. All participants spoke about using a common resource that helped them succeed on the NCLEX-RN®. The resource offers individuals learning tools for high-stakes exams. The resource allows individuals to practice answering NCLEX-RN®-style questions repeatedly, with the added advantage of providing a rationale with the correct answer. Most participants raved about the resource. Emma commented that she could not say enough about the value of the resource. Christine added, "It's amazing," noting it was the only resource she used in preparing for the NCLEX-RN®. Robert also stated, "[The resource] is basically all I used." Most participants identified the particular benefit of this resource as its ability to closely simulate conditions of reading and answering questions during the NCLEX-RN® itself.

Other suggestions for achieving success on the NCLEX-RN® included attending prep programs, writing flash cards, and using a standardized review book. Suggested strategies for managing study preparation time varied from answering NCLEX-RN®-type questions at every available moment to studying for short periods of time with breaks between. Three participants advised taking the NCLEX-RN® as soon as possible. The other participants did not seem to have a preference. For Anne, successful preparation included taking her "notes and [breaking] them into more usable chunks [to study]," and "[looking] up things ... if [she] was unsure of [the topic]." Jean mentioned a "helpful" tool for preparing for the NCLEX-RN® exam is a "test-taking strategy [prep course]." This prep course helped her organize her study time, teaching her how to "[write] out a calendar of topics" for the days leading up to the exam. Using this process allowed her to feel confident in taking the NCLEX-RN® exam even before her graduation ceremony. Robert agreed about the benefit of using the strategies in a test-taking prep course. He said he learned "how to calm down, take a step back, and say I did my best, and approach the next problem" when he was having difficulty getting through questions. Mariah mentioned

using the standardized review book as an aid in her successful passing of the NCLEX-RN® exam. She stated it was highly effective, and she "[wished]" she had used the book "from day one" of the program.

Success on the NCLEX-RN® exam is a significant issue for nurse educators, school of nursing administrators, healthcare facilities, students, and society. Student failure on the exam may create a loss in revenue or accreditation for schools, emotional difficulty for the students, and a loss of potential nurses for alleviating the projected nursing shortage (ACEN, 2017; Abele et al., 2013; Buerhaus et al., 2017; CCNE, 2018; Handwerker, 2018; Kukkonen et al., 2016; Mulholland et al., 2008). Schools of nursing rely on their graduates passing the NCLEX-RN® exam the first time to support their accreditation (ACEN, 2017; CCNE, 2018). Individuals looking to enter a nursing school may use this pass rate and accreditation status to decide where they will attend, thus it is critical that nursing schools obtain a high first-time pass rate and maintain accreditation (Kukkonen et al., 2016).

Recognizing hurdles to NCLEX-RN® success. Participants' advice on paths to NCLEX-RN® success was balanced by their tips on recognizing the hurdles to that success. Incompetence, remorse, defeat, and a loss of self-esteem are common feelings among graduate nurses who are unsuccessful on the NCLEX-RN® exam (Claudette, 2014; Roa, Shipman, Hooten, & Carter, 2011). Failure creates feelings of guilt or anxiety over disappointing family, friends, future employers, and even the nursing school itself (Claudette, 2014; Roa et al., 2011).

Anxiety about the exam topped the list of hurdles to NCLEX-RN® success, according to four participants. Mariah declared that when taking an exam such as the NCLEX-RN®, "I panic at first. My anxiety gets the best of me." Mariah said to overcome this she prepares as best she can by "understanding the physiology," and then she can "figure [the answer] out" even if she

"does not know the answer." Anne supported this by stating that a person works hard to succeed in a program, and then "there is a lot of pressure to pass this test. ... You don't want to be that person ... to let everyone down." Anne's advice was to avoid study burnout and anxiousness by continuing to study even after completion of the program and "scheduling the exam as soon as possible." Jean's statements were similar to Anne's, as she remarked, "You don't want to disappoint your family who's helping you out. I had a job lined up pending me passing boards. Failure wasn't really an option." Her advice for clearing this hurdle of anxiety about passing the exam was to have family and friends ask daily about studying for the NCLEX-RN® exam. She said this "provides a level of accountability," and it helped with her "self-motivation" so she could do a thorough review of all the material before the exam.

The amount of time spent studying, whether too little or too much, was a disadvantage for several participants. There is research to support the recommendation that nursing graduates take the exam within four to six weeks after graduation (Czekanski, Mingo, & Piper, 2018), but several of the participants delayed taking the NCLEX-RN®. Those who studied "too much" verbalized doubt, such as Christine, who stated, "It came to a point where I didn't trust what I knew." Emma expressed that she took the exam later than she had wanted to. She preferred an earlier test date, as she wanted the information she had learned in school to be "more fresh in [her] mind" when she took the exam. Two other participants also articulated they had wanted to take the NCLEX-RN® exam earlier than they did. Paperwork from their school was delayed, and they needed to wait until they were cleared to take the exam. The delayed paperwork was not a hurdle within the participants' control. They used the extra time to continue studying.

All participants were successful, and they offered advice for passing the NCLEX-RN® exam and identified hurdles to success. All the participants agreed a common resource was

indispensable and that recognizing and preparing for the hurdles of anxiety and delay were invaluable.

Chapter Summary

Eight interviews were conducted with ABSN graduates from three regionally accredited schools in the northeastern U.S. Steps to evaluate quality were integrated to support the research methodology and findings report. These quality checks included audio recordings, verbatim transcriptions, participant verification of transcriptions, member checking, clarification and confirmation of unclear findings, and adherence to the analytic process of Diekelmann et al. (1989). Information from the interviews composed the structural and textural meanings of the ABSN graduates' perceptions and experiences. Categorization of the interviews led to four themes with multiple subthemes to answer the research question: What is the lived experience of ABSN students who have graduated from an accelerated program and passed the NCLEX-RN® on the first attempt? These themes were (1) Responding to the Call, (2) Unleashing the Power Within, (3) Support Systems, and (4) One Life-Changing Test.

Examination of demographic data revealed characteristics similar to the HRSA (2019) descriptions of nurses. Analysis of the participant information illustrated qualities noted in the assumptions of the adult learning theory by Knowles (1980). The researcher appreciated the time and willingness of the nurses to participate in the study and discuss their experiences and perceptions.

Chapter V. Conclusions

This purpose of this phenomenological study was to explore ABSN graduates' perceptions and experiences of what they believed to be factors of success in completing their program and on passing the NCLEX-RN® on the first attempt. Underpinning this study was the constructivist worldview and a phenomenological method that guided the researcher in the effort to understand the ABSN experience from the viewpoint of another. This worldview, coupled with the idea that phenomenological inquiry allows participants who have engaged in a situation to describe practices, encounters, and understandings that expose the essence of that experience, can help a researcher create a meaningful description of a specific phenomenon (Willgens et al., 2016). The researcher used a hermeneutic phenomenological approach to use her previous experiences and knowledge to elucidate meanings and revelations shared by the participants (van Manen, 2017). The theoretical framework that guided this study was the adult learning theory (Knowles, 1980, 1984). This theory had previously been identified in the literature as correlating with the characteristics of ABSN students. Data analysis was completed using the seven steps of the Diekelmann et al. (1989) hermeneutic analysis method to comprehensively represent success from the participants' point of view. The correlation and analysis of information were intended to provide the reader with a robust sense of experiencing the phenomenon of success in completing the ABSN program and passing the NCLEX-RN® on the first attempt through the eyes of the participants.

Discussion of Findings

The findings of this study revealed four themes: (1) Responding to the Call, (2)
Unleashing the Power Within, (3) Support Systems, and (4) One Life-Changing Test. In
addition, several subthemes were generated from each theme. The theme Responding to the Call
emerged as the participants recalled how they arrived at their initial decision to become a nurse

and what prompted them to choose an ABSN program to help them achieve their goal. The theme Unleashing the Power Within became apparent as the participants described their feelings about entering and going through an ABSN program. They communicated that they had a sense of initial optimism when entering their ABSN program and also disclosed that during the program their emotions ranged from feelings of potential failure to finally believing they would be successful. The theme Support Systems emerged as each participant commented on who they considered had been essential in providing assistance and encouragement throughout the program. Lastly, in the theme One Life-Changing Test, participants articulated tips for success that had worked for them and also identified hurdles they faced when preparing for the NCLEX-RN® exam. These themes revealed what the participants identified as successful paths through an ABSN program and the NCLEX-RN® exam.

Integration of the Findings with the Literature

In this section, the researcher discusses the integration of the study findings with the literature. Study findings include the participants' demographic breakdown and characteristics as compared to the general representation of ABSN students in the literature and specifically, the ABSN student's characteristics association with the assumptions about adult learners in the adult learning theory (Knowles, 1980, 1984). Essential elements of and challenges to success in the program and the NCLEX-RN®, as revealed in the emerging themes, are presented within the context of the participants' experiences. Lastly, limitations of the study, including geographic location, number of nursing programs used, and participants' ability to recall information, are explained. The integration of findings with the existing literature is used to support or oppose these new findings by describing their similarities to or differences from previous findings.

Theoretical Framework

It was evident the graduates' characteristics in this study were similar to the representations of ABSN students in the literature. The literature reported students in ABSN programs are older adult learners who are known to approach learning situations with maturity (Cangelosi & Whitt, 2005; Donovan, 2015; Englert, 2009; Ferrell et al., 2016; Korvick et al., 2008; Millett et al., 2015; Payne, 2013; Payne et al., 2014; Penprase & Harris, 2013; Rico et al., 2010). A mature student is a key component in the adult learning theory (Knowles, 1984). Knowles (1984) described an adult as a person who takes on the roles of an adult and is self-directed or responsible for their own life. The adult attributes of responsibility and the accountability for life choices were apparent in this study in the description of the participants.

Adult learners are described by Knowles (1980, 1984) using six assumptions. These assumptions have been found to be associated with the common characteristics of ABSN students in the literature and in this study's theme Responding to the Call (Hanson-Zalot, 2016; Rico et al., 2010).

The first assumption, the need to know, refers to adults' desire to know why they need to learn something (Knowles, 1984; Knowles et al., 2015). When considering the need for further education, adult learners expend considerable energy contemplating the benefits of learning and the consequences of not learning what they need to know (Knowles et al., 2015). Personal and professional gains are carefully measured by the adult learner. Similarly, the ABSN students know where they stand with both and decide they want to be somewhere else (Manjounes, 2010; Rico et al., 2010). Most ABSN students carefully consider the time, energy, and expense required for the program before applying (Manjounes, 2010; Rico et al., 2010). In this study, as in previous literature, individuals enrolled in school for a second degree in nursing to achieve their goals of personal satisfaction and a new occupation. After seeing nurses in action or

learning about nurses, each participant wanted to emulate the nurse role and help people.

Participants identified nursing as rewarding and considered the career to be so meaningful they were willing to give up their current lifestyle to enter the profession.

The second assumption, readiness to learn, supposes that adults are ready to learn when they need to manage real-life situations (Knowles, 1980, 1984; Knowles et al., 2015). Timing plays a factor in readiness to learn. In the literature, the moment to learn presented itself after individuals had been working in jobs they did not feel connected to, or after they had graduated from college and felt ready to accept the challenge of nursing school (Manjounes, 2010; Rico et al., 2010). In this study, a similarity to previous findings was noted in two participants who had completed their first undergraduate degree and directly entered an ABSN program. The other participants had been working in jobs with which they were not satisfied and decided to pursue a calling of nursing as a profession. As evident in the adult roles and choices of the participants in this study, each participant had a reason for choosing the time they did to enroll in an ABSN program. Discontent with a current role in society and a desire to prepare for a better future enticed participants to enroll in an ABSN program.

The third assumption, that experience is the richest resource for adults' learning, includes the use of previous life experiences in learning new information (Knowles, 1980, 1984; Knowles et al., 2015). Having a bachelor's degree and because of their age, ABSN students possess life experiences (Cangelosi & Whitt, 2005; Millett et al., 2015). An ABSN program is a distinctive, content-condensed program of study that recognizes the value of the adult learner's knowledge, previous education, and experiences (Raines, 2010). Prior research revealed that assimilating new information with previous experiences helps cement knowledge for adult learners (AACN, 2015b; Hanson-Zalot, 2016; Knowles, 1984). Prior learning, education, and skills are tools that

help ABSN students comprehend, critically think about, and remember the meaning of new pieces of information (Cangelosi & Whitt, 2005; Millett et al., 2015). In this study, participants said that previous learning from school and work opportunities helped them succeed in their ABSN program. Participants noted that correction of unproductive habits, such as procrastination and ineffective study techniques, or learned skills such as organization, time management, and prioritization contributed to their success in the ABSN program.

The fourth assumption, the need to be self-directing, describes adult learners as responsible for their own decisions (Knowles, 1980, 1984; Knowles et al., 2015). Knowles (1984) identified adults as having a deep need to direct their own lives and to be seen as being capable of providing that direction. In the literature, ABSN students are self-directed individuals who have the ability to regulate their own learning (Cangelosi & Whitt, 2005; Donovan, 2015; El-Banna et al., 2017; Millett et al., 2015; Rico et al., 2010). Participants in this study had to change their lives to accommodate the requirements of nursing education. This was no small task, as some left the places they had been living, quit jobs that had supported their lifestyles, and incurred additional debt. Knowing their decision might not have a favorable outcome, the participants were willing to make transformative changes for a chance at a better future.

The fifth assumption, orientation to learning is life-centered, assumes adults want to apply knowledge and skills to life or problem-centered situations (Knowles, 1980, 1984; Knowles et al., 2015). Adults learn when they discover that knowledge and skills are applicable and necessary to resolving real-life situations (Knowles et al., 2015). The literature revealed that ABSN students are dedicated, competent, goal-oriented, and career-focused (Hennessy, 2018). When study participants hit a roadblock in their chosen career, they considered their options. After deliberating about the advantages and disadvantages of the possibilities, they saw clear

advantages to enrolling in a fast-paced ABSN program. Participants wanted to learn what they needed to become a nurse and wanted not to waste time taking additional courses that were not relevant to their chosen careers. Personal success included choosing the most efficient method to accomplish a life goal.

The sixth assumption, the adult is driven by motivators, recognizes that adults are sensitive to external and internal motivations (Knowles, 1984; Knowles et al., 2015). The prevailing motivators for successful adult students are internal motivators, such as self-esteem, quality of life, and desire (Knowles, 1984; Knowles et al., 2015). Adults, especially those who are returning to school for a nursing degree after having received a degree in another field, are motivated by the need to grow and develop (Manjounes, 2010; Rico et al., 2010; Utley-Smith et al., 2007). In the literature, ABSN students are described as highly motivated and demonstrate a higher level of intrinsic motivation for educational pursuits (Millett et al., 2015; Newton et al., 2009; Penprase & Harris, 2013). For the ABSN student, personal and professional commitments are the forces driving them to complete their program (Brown, 2016; Johnson Lewis, 2010; Manjounes, 2010; Raines, 2010). Study participants disclosed they may have initially chosen to pursue a nursing degree because of dissatisfaction in a previous job, but each stated that what truly helped them succeed in the program was their motivation and drive to become a nurse and their desire to help others.

It is important to note that these assumptions defined by Knowles (1984) do not guarantee the student's academic success in the program or on the NCLEX-RN®. However, each assumption was observed in participants' statements as essential to their success. Blozen (2015) noted that to create a more suitable learning environment for students, ABSN programs should incorporate Knowles's (1984) adult learning theory.

Essential Elements of Success

Another finding was key elements of success noted by the participants. These elements included organization, prioritization, time management, and a support system. The advantages and drawbacks of these essential elements were noted in the literature and in this study.

In the literature, ABSN students were asked which practices influenced their perceptions of preparedness for entry-level positions as a professional nurse. In addition to critical thinking skills, behaviors recognized were organization, prioritization, and time management (Hanson-Zalot, 2016). In the theme Unleashing the Power Within, participants spoke about how these components were integral to their success. Participants described significant advantages drawn from these learned skills.

The theme Support Systems highlighted the importance to students of having someone to encourage and assist them when needed. Mooring (2016) stated that a good support system and a personal commitment to academic achievement are vital to a nursing student's success. In the interviews, participants noted that study groups, family, and faculty were substantial support systems during their ABSN program.

One focus of the literature was on faculty as a support system. Influential faculty were identified as being role models, relatable, approachable, knowledgeable, and good communicators (Hanson-Zalot, 2016; Rico et al., 2010). Faculty with these qualities helped students stay on task and acted as powerful support systems in the learning process (Hanson-Zalot, 2016). Six of the eight participants said their program director had a meaningful influence during their ABSN program and had a positive impact on their success. Additionally, each participant commented on the helpfulness of ABSN faculty in helping them through the program. The participants remarked on the accessibility, experience, and encouragement of the faculty.

Challenges to Success

Despite all of these advantages, there were also some challenges participants encountered in their ABSN program. The literature reports that barriers for ABSN students include family responsibilities, financial constraints, and uncertainty (Craft-Blacksheare, 2018; Lott, 2016; Millett et al., 2015; Tantillo et al., 2017; Wolf et al., 2015). These nonacademic obligations and emotions are prevalent among ABSN students (Lott, 2016).

Family responsibilities. Administrators and faculty must consider the effect of family responsibilities on nursing students (Dacanay et al., 2015), as these responsibilities may be barriers for ABSN students (Craft-Blacksheare, 2018; Lott, 2016; Millett et al., 2015; Tantillo et al., 2017; Wolf et al., 2015). Thomas and Revell (2016) found that a support system was critical to a student's success. In this study, the theme Support Systems described the importance of having supportive interactions with family and significant others and the negative effects of a breakdown in that support. Two participants experienced difficulties with support from significant others that created a drain on their schoolwork focus and an obstacle to program success.

Financial constraints. Financial constraints are one reason a student may not enter or continue in an ABSN program (Millett, 2016; Rouse & Rooda, 2010). For the ABSN student, the outlay of tuition and additional fees to enter a nursing program amounts to an enormous financial burden (Donnell, 2015; Millett, 2016), and substantial financial resources are needed in a short period of time for enrollment in an ABSN program. Most programs suggest that students not be employed during the program, as employment often competes with the time needed for academic success (Rico et al., 2010). This makes financing nursing education even more burdensome.

In the theme Responding to the Call, participants verbalized a loss of money in one way or another. When making the choice to attend nursing school, two participants would have lost undergraduate scholarships if they had decided to change their major in their first undergraduate degree program. The six other participants had been working prior to applying to an ABSN program. These participants were earning money and therefore would lose potential income if they returned to school. Six participants took out loans for the program, and at least two participants added additional loans to previous undergraduate loans. Finances were a concern for every participant in this study, even if that concern was only how to meet living expenses. Concerns about financial responsibilities were a distraction from coursework and could have derailed one of the study's participants from being successful.

Uncertainty. Some students enter an ABSN program believing they can handle the expectations and stress one faces in a fast-paced learning environment, but in reality they lack the mature motivation and underestimate the academic rigor required in such programs (Fagan & Coffey, 2019; Handwerker, 2018; Wolf et al., 2015; Tantillo et al., 2017). In the theme Unleashing the Power Within, every participant distinctly expressed experiencing some uncertainty and stress and noted the potential negative effects on their success. The difference with the participants in this study in comparison to the unsuccessful students who experienced uncertainty and stress was they each had an approach to overcoming the times of doubt. For some it was the assistance of their support group; for others it was a mental mantra of "you have been through something like this before, and you will get through it again." In the literature, the recommendation from successful ABSN graduates was that students continue, despite stressful circumstances that create insecurity. To achieve academic success, a student must make a conscious decision to continue the work in a nursing program despite difficult circumstances of

family, social, or financial obligations (Park et al., 2011). This persistence was recognized as a significant factor of success in the literature as well as in this study (Park et al., 2011).

NCLEX-RN®

Success in the ABSN program does not always correlate to success on the NCLEX-RN® (Kaddoura et al., 2017). Some researchers detected associations between ABSN student characteristics and the successful passing of the NCLEX-RN®. Payne et al. (2014) and Wehner (2015) noted older, more mature students performed better on the NCLEX-RN®. However, according to other researchers, age and gender were not associated with NCLEX-RN® exam scores (Kaddoura et al., 2017; Kowitlawakul et al., 2013; Rowland, 2013). The participants in this study were older than traditional BSN students, mature, and passed the NCLEX-RN® on their first attempt.

The difficulty of passing the NCLEX-RN® exam was acknowledged in the literature. Statistically significant negative predictors identified were EAL and minority status (Foley, 2016; Kaddoura et al., 2017; Rowland, 2013). A lower percentage of EAL students than non-EAL students passed the NCLEX-RN® on their first attempt (Foley, 2016; Kaddoura et al., 2017). In reporting on ABSN students, Rowland (2013) found Asian, Black, and Hispanic students had higher NCLEX-RN® failure rates than students in other race and ethnic groups. All participants in this study spoke English as their first language, and all minority participants were successful in their first attempt at the NCLEX-RN®.

A finding of interest for success on the NCLEX-RN® was Blozen's (2010, 2015) report that the answering of NCLEX-RN®-style questions was the factor most correlated with success on the exam. In the theme One Life-Changing Test, all eight participants spoke about using a common resource that allowed them to practice answering NCLEX-RN®-style questions in

studying for the exam. The act of repeatedly answering the resource questions simulated the experience of reading and answering questions during the actual NCLEX-RN®. Participants believed reading the rationales for the correct answers was a considerable contributor to their success on the NCLEX-RN®.

Previously reported scores on standardized exams have also been linked to passing scores on the licensure exam (Wehner, 2015; Yeom, 2013). The literature found scores on standardized exit exams had a statistically significant correlation with first-time NCLEX-RN® passing scores (Bentley, 2004; Englert, 2009; Foley, 2016; Johnson et al., 2017; Kaddoura et al., 2017). While this study did not concentrate on standardized exam grades, four participants mentioned a boost of confidence after doing well on a standardized exam.

Limitations

A limitation of this study was that the participants were from only three nursing programs in the northeastern U.S. While purposive sampling was used to obtain information-rich cases for in-depth study, the geographic location and the number of ABSN programs were limited.

Although researchers can reach saturation with a specific set of individuals in a particular geographic area at a certain time, a study of the same subject at another time within a different geographic location may provide new or divergent information (Streubert & Carpenter, 2011). The sampling limitation may mean the study did not provide a true reflection of the views of success in an ABSN program and on the NCLEX-RN® exam for individuals in a different geographic location. However, Creswell and Poth (2018) state qualitative research is not to be used to generalize but to explain the specifics of a population. Although the findings are not generalizable, they can serve as an investigation starting point for other researchers or educators in other nursing programs.

Another limitation was that the participants were asked to recall information from their time in their program enrolled in the ABSN program. The quality of data may be influenced by the precision of the participants' abilities to remember experiences (Grove, Gray, & Burns, 2015). Most participants were interviewed within 15 months of their graduation. One participant had a time lapse of 36 months between completing their program and the interview. Although this limitation is mentioned here, during the interviews the participants did not hesitate to offer an answer to a question, and at no time did the participants seem to be lacking information. The researcher used member checking to address this limitation and also asked on more than one occasion whether the participant had any more information to share.

Implications for the Discipline of Nursing

Study findings contribute to and lend support to existing literature on the ABSN student. In general, the study has implications for nursing practice, education, and research. Learning from the participants about their experiences in the ABSN program can impact decision-making by nurse educators, practitioners, and executives.

Recommendations for Nursing Education

This study may improve the awareness of those who are instructing student enrolled in ABSN programs. For schools of nursing, it may provide guidelines to aid admission decisions, help with early recognition of at-risk students, and impart information for educational considerations such as curriculum and teaching styles.

Study findings contribute to the evidence needed for improving recruitment and retention of students in ABSN programs. Considering which characteristics have been noted in successful graduates and how those graduates used their skills, previous experiences, and knowledge to navigate through a program and pass the NCLEX-RN® on the first attempt is crucial to

understanding which applicants can be successful. Study findings can help direct ABSN program administrators to ask specific questions of applicants to assess their chance of success before accepting them into the program. Administrators and educators can also use the information to recognize students already in the program who are having difficulty and can use information from successful graduates to assist struggling students.

Comprehending and appreciating the educational experiences of successful ABSN graduates from their viewpoints may help administrators and nurse educators craft new curriculum and teaching practices for this specialized population. This population has been noted to have the characteristics of adult learners. Curriculum and teaching practices should consider these characteristics and correlate prior student strengths with nursing instruction (Utley-Smith et al., 2007). Knowles (1980) describes an educational environment for adult learners as one in which the learner and the educator have a mutual respect for each other. The educational climate is collaborative rather than competitive, with individuals (educators as well as students) sharing what they know and can do, rather than the educator assuming complete authority in the learning process. The educator can assess the talents of each student and capitalize upon them to assist in the learning process (Boellaard, Brandt, & Zorn, 2015). The emphasis is on learning, and the educator is a facilitator of the learning process rather than the director of all teaching (Knowles, 1980). Boellaard et al. (2015) note that an educator should be "prepared for challenging questions" (p. 345). Adult students take a vested interest in their education and have prior educational knowledge that may lead to creative questions. An ABSN educator should know the material well to be able to answer these questions (Boellaard et al., 2015).

Findings from this study may contribute to innovative methods to help ABSN students achieve learning outcomes. Content and teaching strategies should be adapted to accommodate the learning style of the adult learner (Boellaard et al., 2015). Preparatory materials and assignments should be sent out in advance, and creative approaches to coursework should be integrated (Knowles, 1980). Traditional lecture classroom activities may not keep the interest of the adult learner, but case studies, small group activities, and experiential learning may be approaches to consider (Brandt, Boellaard, & Zorn, 2015). The researcher sees the study findings moving ABSN educator teaching methods toward more self-directed learning opportunities for the adult learner, as the characteristics of the study participants were similar to the assumptions noted for the adult learner in the adult learning theory (Knowles, 1984).

Graduates' perceptions of success on the NCLEX-RN® exam are relevant to nursing students and to nursing programs (Quinn et al., 2018; Yeom, 2013). Learning the techniques of successful graduates may help future students prepare adequately for the NCLEX-RN® exam. State boards of nursing and accrediting agencies view first-time pass rates as significant indicators of the quality of a nursing program (ACEN, 2017; CCNE, 2018; Foreman, 2017; Quinn et al., 2018). First-time success on the NCLEX-RN® is a necessity for both schools of nursing and students. Suggestions from graduates who were successful on the NCLEX-RN® the first time may help others prepare successfully for the exam.

Recommendations for Practice

Research has shown the U.S. is facing a nursing shortage, and successful graduates from ABSN programs can contribute to the nursing workforce (Buerhaus et al., 2017; Carnevale et al., 2015; Juraschek et al., 2012; Staiger et al., 2012; Zhang et al., 2018). The AACN (2015a) endorsed the need for more baccalaureate-prepared nurses, as they are shown to be better

prepared to make decisions and treat complex situations than associates-degree- or diploma-prepared RNs. As the ABSN program is the most expedient route to licensure as a baccalaureate-prepared registered nurse, success in these programs is key to meet the rapidly growing demand in the nursing workforce (Penprase & Harris, 2013, Millett, 2016; Raines, 2010; Rico et al., 2010).

A high completion rate for these types of programs is essential for students, schools of nursing, and the general public. Students depend on completing the program to ensure gainful employment as a registered nurse. Schools of nursing rely on the completion rate to assist in maintaining their accreditation status, as program completion rates are an evaluation tool used by accrediting agencies (ACEN, 2017; CCNE, 2018). The general public may also benefit from the increased numbers of students graduating and taking the NCLEX-RN®. Successful graduates would "increase the number of RNs entering the workforce" and positively impact the communities where they work (Peterson, 2009, p. 412).

Identifying ways to attract and retain successful students in ABSN programs may help increase the quality and number of future nurses. These programs, in an abbreviated time frame, offer students who have had previous educational experience the knowledge and skills to fulfill the role of nurse. The current demand for nurses creates a vast need for students to be successful in ABSN programs and on the NCLEX-RN®. Successful graduates from ABSN programs are a rich resource for the profession, help fulfill the call for nurses.

Recommendations for Future Research

Since their inception, ABSN programs have grown dramatically, now numbering over 280, with more in the planning stages (AACN, 2019b). In a 10-year time period, the number of students in these programs has expanded over 250% (AACN, 2015a). However, research into

the success of these students is minimal, and ABSN programs have attrition rates ranging from 10% to 30% (Bentley, 2006; Cantwell et al., 2015; Doggrell & Polkinghorne, 2015; Feldman & Jordet, 1989; Nugent & LaRocco, 2014; Rodgers et al., 2004; Rosenberg et al., 2007; Seldomridge & DiBartolo, 2007). Further research about this specialized population is needed.

It is recommended that this qualitative study be repeated using a larger number of participants in a different geographic location with more diversity. Instead of individual interviews, focus groups may be used to attract a larger group of participants. Focus groups are group interviews that normally bring together between six and 12 participants (Streubert & Carpenter, 2011). They are used to promote disclosure and discussion by capitalizing on the interactions among the group members (Chard & Tovin, 2018; Freeman, 2006). Focus groups are especially useful in qualitative data collection because they can be helpful in information recollection, yield information-rich data, and are a cost-effective approach to accessing a large number of participants (Streubert & Carpenter, 2011).

A quantitative study would also be valuable in comparing ABSN student demographics and admission criteria to NCLEX-RN® outcomes. Incorporating a wider set of demographic variables, such as economic status, prior undergraduate education, and support systems, in conjunction with a larger sample size and the inclusion of admission criteria, may reveal information beneficial to the schools of nursing to help them in choosing appropriate candidates for ABSN programs.

Finally, a mixed-methods approach to data collection using a combination of the two recommended studies above is also suggested for future research. This approach would be advantageous for triangulating the data and increasing the trustworthiness of the research findings. A study that interviews ABSN graduates about their program and their success, by

identifying successful admission criteria, would offer nursing administrators and educators valuable evidence as they decide on policies for admission and strategies for curriculum.

Chapter Summary

This research study explored ABSN graduates' perceptions and experiences of what they believed to be factors of success in completing their program and in passing the NCLEX-RN® on the first attempt. The study further sought to answer this central question: What is the lived experience of ABSN students who have graduated from an accelerated program and passed the NCLEX-RN® on the first attempt? From interviews with eight participants, four themes were derived: (1) Responding to the Call, (2) Unleashing the Power Within, (3) Support Systems, and (4) One Life-Changing Test. From each, subthemes were generated to support the premise of the overall theme. Additionally, Responding to the Call related to the theoretical framework of work by Knowles (1980, 1984). Statements from the participants corresponded to each theme and subtheme.

The nursing profession continues to rely on successful graduates to meet the growing needs of the nursing workforce. Nursing administrators and educators also depend on their students' success in their efforts to recruit more students, manage an effective nursing program, and obtain or maintain accreditation. Nursing students themselves are hopeful the education they receive will prepare them for success on the NCLEX-RN® on their first attempt and in obtaining future employment. Using this study as a foundation to help future students succeed in ABSN programs and on the NCLEX-RN® may assist the nursing workforce and schools of nursing, as well as individual nursing students.

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Appendix A

Letter to Program Directors

Dear Program Director,

My name is Vicki Brzoza, and I am currently a Doctor of Philosophy in Nursing candidate at Wilkes University. I am also an undergraduate program advisor for an Accelerated Second-Degree Bachelor of Science in Nursing (ABSN) program. I am requesting your assistance in my research study. I am investigating experiences of success in an ABSN program from the perceptions of graduates. In order to collect data, I am asking if you would please forward the attached email to graduates of your program, from the year of 2017 to 2019 who have successfully completed your ABSN program and passed the National Council Licensure Examination for Registered Nurses (NCLEX-RN®) the first time.

This email includes information about the purpose of the study, study procedures, and time involvement for the participants. This study consists of one interview, a follow-up phone call, and an optional completion of a demographic questionnaire. The study has been approved by the Institutional Review Board of Wilkes University.

Please consider encouraging those students who are graduates of your program to participate in this research study. My hope is that results from this study may assist nurse faculty and nursing school administration to identify key elements to support retention and student success in ABSN programs and on the NCLEX-RN®.

If you have any questions, please feel free to contact me, Vicki Brzoza at (215) XXX-XXXX or <u>vicki.brzoza@wilkes.edu</u>. You can also contact my dissertation committee chairperson, Dr. Robin Chard at (570) XXX-XXXX or <u>robin.chard@wilkes.edu</u>.

Thank you,

Vicki Brzoza, MSN, MBA, RN, CCRN

Doctoral Candidate Wilkes University Passan School of Nursing

Appendix B

Approval from the Institutional Review Board (IRB)

To: Vicki Brzoza

From: Wilkes University IRB

IRB Exempt Determination - 124: National Council Licensure Examination for

Subject: Registered Nurses (NCLEX-RN®) Success: Perceptions of Accelerated Second-

degree Bachelor of Science in Nursing Students

Date: 12/10/2019

The Wilkes University IRB has reviewed the application 124: "National Council Licensure Examination for Registered Nurses (NCLEX-RN®) Success: Perceptions of Accelerated Second-degree Bachelor of Science in Nursing Students" and determined that it is Exempt from IRB review according to 45 CFR 46.104(d)(2) on 12/10/2019.

Please note that any changes to your protocol may affect its exempt status. Contact the IRB at IRB@wilkes.edu to discuss any changes you may wish to make.

Thank you.

Wilkes University Institutional Review Board

Dr. Blake Lamberti Mackesy, IRB Chair Assistant Professor of Education (570) 408-4157

Appendix C

Email for the Program Directors to Send Out to the Graduates

Dear Accelerated Nursing Program Graduate:

My name is Vicki Brzoza, and I am a graduate student earning the Doctor of Philosophy in Nursing degree from Wilkes University. I am conducting a research study under the supervision of my dissertation chairperson, Robin Chard, Ph.D., RN.

I invite you to participate in a study entitled National Council Licensure Examination for Registered Nurses Success: Perceptions of Accelerated Second-degree Bachelor of Science in Nursing Students. The background of this study stems from the prediction of an impending nursing shortage. Schools of Nursing are working to fill the growing need for qualified Registered Nurses (RNs) by utilizing Accelerated Second-degree Bachelor of Science in Nursing (ABSN) programs. These programs are effective, but not all students are successful. The purpose of this study is to describe and interpret the perceptions and experiences of ABSN graduates, like yourself. I also want to learn what you believe to be factors of success in completing the program and on passing the National Council Licensure Examination for Registered Nurses (NCLEX-RN®) on the first attempt. You are receiving this email because the director of the ABSN program at your school gave permission to inform you of the study and ask for your participation. This study consists of one interview, a follow-up phone call, and optional completion of a demographic questionnaire. The face-to-face interview will take approximately 60 to 90 minutes and will be held at a mutually convenient location. The interview will be audio recorded and notes will be taken. A follow-up phone call will take place and be used to review the accuracy of the interview and provide any clarifications.

Before the interview begins, you will be asked to sign an informed consent to participate in the study. Your participation is voluntary and you have the right to withdraw your consent or discontinue participation at any time. This study has been approved by the Wilkes University Institutional Review Board (IRB). Care will be taken to assure that the information you provide will be kept strictly confidential and anonymous. At the beginning of the interview, you will be given a \$20 gift card.

If you have any questions or concerns about the study, please contact Vicki Brzoza (Principal Researcher) through email wicki.brzoza@wilkes.edu or phone (215) XXX-XXXX, or Dr. Robin Chard (Committee Chair) through email robin.chard@wilkes.edu or phone (570) XXX-XXXX. If you wish to participate in this study, **please reply to this email and provide me with your phone number**. I will contact you to schedule a day and time for the interview.

Thank you in advance for your time and consideration.

Sincerely,

Vicki Brzoza, MSN, MBA, RN, CCRN

Doctoral Candidate

Appendix D

Letter of Informed Consent

Title of Study: National Council Licensure Examination for Registered Nurses (NCLEX-RN®) Success: Perceptions of Accelerated Second-degree Bachelor of Science in Nursing

Students

Principal Investigator: Vicki Brzoza

Phone: (215) XXX-XXXX

Email: vicki.brzoza@wilkes.edu

Dear Graduates,

You are invited to participate in a research study conducted by Vicki Brzoza, as a graduate student to earn the Doctor of Philosophy in Nursing degree from Wilkes University. You should read the information below and ask questions about anything you do not understand before deciding to participate. If you agree to participate, you will be asked to sign this form, and you will be given a copy of the form.

<u>Background and Purpose of the Study</u>: The background of this study stems from the prediction of an impending nursing shortage. Schools of Nursing are working to fill the growing need for qualified Registered Nurses (RNs) by utilizing Accelerated Second-degree Bachelor of Science in Nursing (ABSN) programs. These programs are effective, but not all students are successful. The purpose of this study is to describe and interpret the perceptions and experiences of ABSN students and what they believe to be factors of success in completing the program and on passing the National Council Licensure Examination for Registered Nurses (NCLEX-RN®) on the first attempt.

Study Procedures and Time Involvement: If you agree to participate, you will be interviewed at a mutually agreeable location and time with only the investigator and you. The interview should last about 60 to 90 minutes and will consist of questions focusing on your own experiences of success in the nursing program and passing the NCLEX-RN® the first time. All interviews will include notes taken by the investigator. All face to face or phone interviews will be audio recorded, electronic interviews will be audio and/or video recorded. Following the interview, you will be asked to complete a demographic questionnaire. Completion of the questionnaire will be optional and should take about five minutes.

After the interview, the researcher will email you a copy of the written transcript of the interview for your review. Within four weeks of receiving the typed transcript, the researcher will contact you via email to schedule a follow-up phone call. This call is to confirm accuracy of the transcript and ask if there is any further information you wish to share.

Benefits and Risks:

Benefits: There are no direct benefits to you for taking part in this research study. There are no costs to you for participating in the study. You will receive a \$20 gift card. The results of this research may assist other students to be successful in an ABSN program.

Risks: One risk for participation is a loss of time. An additional risk is that you may be uncomfortable discussing negative experiences. Should this occur, the interview will be paused and time will be given for you to regain composure. If you feel unable to continue, you will be reminded there is no obligation to answer the questions or if necessary, continue in the interview. If needed, the interview will stop and you may return another day to finish.

<u>Confidentiality</u>: A new, password protected email account will be used to maintain privacy and confidentiality. Participant names will be replaced with unique personal identifiers on all research data, audio files, and interview transcripts. Data will be saved on a password encrypted flash drive and hard copies will be stored in a locked cabinet of which the researcher will have sole access.

Audio recordings from the interviews will be transcribed by a paid service that certifies all employees are legally bonded from disclosure of data in the recordings they transcribe.

If the results of this research are published or presented, all information will be de-identified.

<u>Participant's Rights</u>: Your participation is voluntary and you have the right to withdraw your consent or discontinue participation at any time without penalty or loss of benefits to which you are entitled. You can choose not to participate.

<u>Contact Information</u>: If you have any questions or concerns about this research study, contact the principal investigator, Vicki Brzoza at (215) XXX-XXXX or vicki.brzoza@wilkes.edu or Dr. Robin Chard (570) XXX-XXXX or robin.chard@wilkes.edu, who is the faculty member supervising this research.

If you have questions, concerns, or feel your rights have been violated as a research participant, you may contact the chairperson of the Wilkes University Institutional Review Board (IRB), Dr. XXXX at (570) XXX-XXXX or email.

Statement of Consent: I have read the above information and agree to participate.			
Signature	Date:		
Name (Print)			
Please circle one:			

Nama (Print)	
Signature	Date:
I do not agree to be video-recorded.	
I do not agree to be audio-recorded.	
I agree to be audio and video-recorded.	
I agree to be audio-recorded.	

Appendix E

Telephone Call to Explain the Consent Form

Hello,
How are you? I am Vicki Brzoza from Wilkes University and I calling to see if you received the informed consent I had emailed you?
(If yes)Do you have any questions about the information?
(If yes) What questions do you have ? [Researcher answers questions until all questions are answered]
(If no further questions) [The researcher will disclose the researcher's knowledge and roles in an ABSN program]. Do you have any questions about me or my roles in an ABSN program?
(If no questions about the researcher's roles)When is a convenient time to meet? [Acknowledge day and time]. Where is a convenient location to meet? [Acknowledge place to meet]. Thank you. I will meet you at [location] at [day and time]. I will send you an email prior to our meeting.
(End) Thank you so much for your time. I really appreciate you taking part in this research.
(If participant did not receive the informed consent)Please allow me to email it to you right now. [Email informed consent]. When do you think you may have a chance to read it? [Acknowledge day and time]. May I call you back at that time to ask if you have any questions?
(If yes)[Researcher acknowledges and repeats date and time to call back]. Have a good day. I will speak to you soon.
(If participant does not have time to read the informed consent)Are you still interested in participating in the research study?
(If yes)I can review the informed consent with you over the phone now.

questions about the information?

(If does not want to participate in study) Lunderstand Lwill withdraw your information.

(If participant agrees)...[Review the informed consent over the phone]. Do you have any

(**If does not want to participate in study**)...I understand. I will withdraw your information from the study. Thank you for your time.

Appendix F

Interview Guide

Lead in: I am going to ask about your experiences of success in your accelerated nursing program and success on the NCLEX-RN®.

Main Questions:

- 1. What was your "AHA" moment when you knew you wanted to become a nurse?
- 2. What was your motivation to return to school for a second degree in nursing?
- 3. What experiences while earning your first degree helped you succeed in earning that first degree?
- 4. How did those experiences help? [Ask for specific examples.]
- 5. Remembering your experiences as a nursing student, what motivated you to stay in the program?
- 6. What do you consider to be the reasons for your success? How and/or why?
- 7. Which experiences prior to beginning your nursing program helped you to be successful in the ABSN program?
- 8. What were obstacles, if any; to your success during the time you were in the ABSN program?
- 9. Was there anyone or anything in the program that were encouraging, to stay and finish? If so, who and what? [Please provide some examples.]
- 10. What impact, if any, did the learning environment have on you finishing the program?
- 11. What or who was your greatest support system while enrolled in the program? Why or how? [Ask for specific examples.]
- 12. Tell me about a time you will never forget that really stands out, the time when you knew you would be successful in the ABSN program.
- 13. What techniques were instrumental to you passing the NCLEX-RN® the first time?
- 14. Identify some hurdles, if any, you may have encountered when preparing for the NCLEX-RN®?

- 15. What would you tell someone who is struggling as a student in an accelerated nursing program?
- 16. Is there anything else you would like to tell me?

Central Question:

What is the lived experience of ABSN students who have graduated from an accelerated program and passed the NCLEX-RN® on the first attempt?

Prefer not to answer

Appendix G

Demographic Questionnaire (Optional)

	Identifier:
What is your age?	
Gender (please circle) Male Female Prefer Not to Answer	
Primary (First Learned) Language:	
Other language(s) spoken:	
Race (please circle):	
White	
African American/Black	
American Indian or Alaska Native	
Asian	
Native Hawaiian or Other Pacific Islander	
Two or more races	
Prefer not to answer	
Ethnicity (please circle):	
Hispanic	
Latino	
Spanish	
None of the above	

Appendix H

Follow-up Telephone Call to ABSN Participant

Hello,
How are you? I am Vicki Brzoza from Wilkes University and I am following up on the interview we had together on
Did you receive the email of your transcript from the interview?
(If no)Please allow me to email it to you right now. [Email transcript]. When do you think you may have a chance to read it? [Acknowledge day and time]. May I call you back at that time to ask if you have any changes or updates?
(If no)Are you still interested in participating in the research study?
(If no)I understand. I will withdraw your information from the study. Thank you for your time.
(If yes)[Researcher acknowledges and repeats date and time to call back]. Have a good day. I will speak to you soon.
(If yes)Did you have a chance to read it?
Did you have a chance to read it?
(If no) When do you think you may have a chance to read it? [Acknowledge day and time] May I call you back at that time to ask if you have any changes or updates? [Researcher acknowledges and repeats date and time to call back]. Have a good day. I will speak to you soon.
(If yes) Are there any corrections or revisions you would like to make to the transcript?
Are there any corrections or revisions you would like to make to the transcript?
(If no)Is there anything else you would like to add to your interview?
(If yes)Which corrections would you like to make? [Note corrections]
Is there anything else you would like to add to your interview?
(If no)Thank you so much for your time. I really appreciate you taking part in this research.
(If yes)Which additions would you like to make.

End... Thank you so much for your time. I really appreciate you taking part in this research.

Table 1

Demographic Characteristics of Participants

Variables	n	%	
Total Interviews	8	100	
Number of Participants in Study	8	100	
Age			
22-25	1	12	
26-29	3	38	
30-34	3	38	
35-39	0	0	
40-44	1	12	
Gender			
Male	1	12	
Female	7	88	
Primary First Language			
English	8	100	
Other Language Spoken			
None	7	88	
Spanish	1	12	
Race			
White	7	88	
African American/Black	1	12	
Ethnicity			
Hispanic	1	12	
Latino	0		
Spanish	0		
None of the Above	7	88	

Themes and Subthemes

Table 2

	Participants							
	Robert	Emma	Christine	Mariah	Anne	Skye	Marie	Jean
Themes and Subthemes								
Responding to the Call								
Identifying the passion	X	X	X	X	X	X	X	X
Can I do this?	X	X	X	X	X	X	X	X
I need to make this	X	X	X	X	X	X	X	X
happen now								
Unleashing the Power								
Within								
I think I can	X	X	X	X	X	X	X	X
Uncertainty	X	X	X	X	X	X	X	X
I knew I could do it	X	X	X	X	X	X	X	X
Support Systems								
Study Groups	X	X	X	X		X		X
Family	X	X	X	X	X	X	X	X
Faculty	X	X	X	X	X	X	X	X
One Life-changing Test								
Passing NCLEX	X	X	X	X	X	X	X	X
Overcoming hurdles to	X	X	X	X	X	X	X	X
success								