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Single-Parent Nursing Students in Associate Degree Nursing Programs:  
The Social Supports that Buffered Their College-related Stress and Fostered Their Academic  
Success

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## Abstract

Title of Dissertation	Single-Parent Nursing Students in Associate Degree Nursing Programs: The Social Supports that Buffered Their College-Related Stress and Fostered Their Academic Success
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The purpose of this exploratory case study was to describe single-parent associate degree nursing students' reports of the social supports that buffered their college-related stress and fostered their academic success. The study was designed to elicit participants' descriptions of the stressors experienced as a result of being a single-parent community college nursing student and the types and sources of support that were helpful in buffering their college-related stress and fostering their academic success.

The conceptual framework used in this case study was House's (1981) model of social support. According to House, social support is defined as "a flow of emotional concern, instrumental aid, information, and/or appraisal between people" (p. 26). The concept of social support addresses the question: "*Who gives what to whom regarding which problems?*" (p. 22). Crucially, support was found "to be effective only to the extent it is perceived" (p. 72).

A two-method approach was used to collect data to help answer the research questions. Study volunteers were asked to complete a paper-and-pencil survey and to participate in an in-person interview. Eleven single-parent associate degree nursing students, from four colleges that are part of a state-wide community college nursing program, participated in the study. Procedures associated with quantitative and qualitative research were used to analyze the data, which consisted of survey responses and verbatim transcripts of in-person interviews. This yielded 40 findings. Conclusions were drawn and recommendations for practice and future research were presented.

Survey and interview data indicated the most commonly reported source of stress for all participants was balancing coursework with personal responsibilities, confirming prior research findings that single-parent college students experience stressors related to balancing academic responsibilities with personal and job demands. Regarding types and sources of social support, all study participants reported that they had received emotional, instrumental, informational, and appraisal supports that buffered their college-related stress and fostered their academic success. The primary sources of emotional support were classmates, friends, family members, and professors. Instrumental support was provided mainly by their colleges but also by the state and family members. The primary sources of informational support were classmates, family

members, and professors. Of note, family members and professors were identified as a source of appraisal support by only five study participants.

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## Dedication

To my husband, Kenneth, for all your love, patience, understanding, and endless sacrifice. To my children, Kevin and Kendra, for helping when needed and always being willing to listen and providing words of encouragement. To my mother, Joan, for being a shoulder to lean on and always being willing to lend a hand, especially with the many meals she provided. Thank you to all of you for your many expressions of social support and never-ending commitment that enabled me to see this journey through to the end. And finally, to my dad, Al (who is looking down from above), for always believing in me.

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## **CHAPTER 1: INTRODUCTION TO THE STUDY**

### **Introduction**

The phenomenon under investigation in this exploratory case study was single-parent associate degree nursing students' reports of the social supports that buffered their college-related stress and fostered their academic success. The setting for this study was a statewide, community college associate degree nursing program in the northeastern United States. The state in which the study took place had supported 12 community colleges, of which six had associate degree nursing programs. The researcher is currently employed at one of the nursing programs; participants were not recruited from this school. Additionally, permission to recruit participants from one of the schools was denied. Thus, the researcher recruited participants from four of the six schools. Single-parent students over the age of 18 were recruited to participate. Study volunteers had completed the first year of the nursing program with an academic grade of 74 or higher. Two methods of data collection were employed: a researcher-developed paper-and-pencil survey and a semi-structured in-person interview.

Empirical evidence pointed to decreased retention rates for single-parent students as they often face significant stressors in their academic pursuits resulting from role strain connected to the need to balance multiple, competing demands, such as child care, finances, and work (Carney-Crampton & Tran, 2002; Gigliotti, 2004; McLaughlin & Randolph, 2012; Quimby & O'Brien, 2006). Individuals who experience chronic stressors (e.g., family responsibility or socioeconomic disparities) are likely to have stress reactions which can be unpleasant and produce unhealthy emotional or physiological symptoms (House, 1981; Lantz, House, Mero, & Williams, 2005). Perceived social support, which is defined in this study as "a flow of emotional

concern, instrumental aid, information, and/or appraisal between people” (House, 1981, p. 26), has been found to buffer the effects of stress and enhance health (House, 1981; House, Umberson, & Landis, 1988).

House’s (1981) conceptual model of social support was the lens through which single-parent nursing students’ reports of the sources and types of social support that buffered their college-related stress and fostered their academic success were examined. This model encompasses four types of social support: emotional, instrumental, appraisal, and informational. When examining social support and its protective effects, House (1981) explained, it is essential to know who is providing the support and “ how much of what kind of support an individual is receiving or a person is giving” (p. 26). Savitz-Romer, Jager-Hyman, and Coles (2009) posited that students were more likely to achieve academic success when social supports, as defined by House, and embedded, informal and formal structural supports, such as learning centers and learning communities, are combined. College students who perceive social support from family and friends have significantly better academic outcomes than do students who do not perceive such support (Nicpon et al., 2006/2007; Skahill, 2002/2003). Particular to nursing students, studies have shown that social support is positively linked to academic achievement (Coleman, 2008; Hopkins, 2005; Shelton, 2012; Williams, 2005).

Important to the study of social support is the way in which individuals describe the perceived support (e.g., important versus unimportant). Some individuals might not perceive the importance of certain types or sources of support because they simply have not experienced them or they are generally missing in their lives (Tardy, 1985).

This chapter contains a description of the study context, the statement of the problem, a description of the conceptual framework being used, the research questions, the definitions of terms, and significance of the study.

Chapter 2 includes a review of the literature divided into three sections. The first section includes an overview of empirical reports related to the relationship between social support and college students' academic success. The second section includes research studies representative of the literature on the relationship between social support and single parents who attend college. Finally, select research related to social support and stress is presented.

Chapter 3 includes the study design and the research methodology. The chapter contains the introduction to the chapter, restatement of the problem, research questions, definition of terms, design of the study, sampling strategies, and a description of the colleges from which the sample was drawn. Additionally, data collection activities are presented followed by data analysis procedures, validity of the research design, and protection of human subjects. The chapter concludes with the limitations of the study and a summary.

Chapter 4 contained findings from the study. Findings were presented for Research Questions 1, 2, 3, 4, 5, and 6. Each of the findings presented in Chapter 4 were derived from an analysis of data gathered through qualitative and quantitative data collection. These data were analyzed through the lens of the conceptual framework.

Lastly, Chapter 5 included a summary of the study, a detailed list of the findings from this study, and the conclusions drawn from those findings. Conclusions were presented, as are recommendations for practice and future research.



## Study Context

An unprecedented nursing shortage is emerging in the United States and across the world. Although shortages of registered nurses (RNs) have occurred occasionally in the United States since World War II, the predicted shortage is expected to be far greater than previously experienced (Sigma Theta Tau International, 2001). By the year 2020, projection models have indicated that over one million RNs will be needed to meet workforce demands in the healthcare sector (Juraschek, Zhang, Ranganathan, & Lin, 2012). Several factors contribute to what is essentially a supply and demand problem driven by growth and replacement needs. On the supply side, the most challenging issue is an aging workforce in both direct practice and academia. Combined with a subsequent increase in the numbers of nurses who will be drawing retirements over the next several years, hospitals and healthcare agencies will face financial challenges in hiring the required number of RNs. To further complicate the problem, a decrease in nurse educators will result in a decrease in the number of nursing students being prepared to fill the increasing number of available vacancies.

On the demand side of the shortage, the Bureau of Labor Statistics (BLS, 2014) has forecast a 19% increase in the employment growth rate for RNs over the next decade, which exceeds the average increase for all occupations. The increased need for nurses is due, at least in part, to aging baby-boomers and the additional healthcare services that they will likely need, as well as healthcare services required by the implementation of the Patient Protection and Affordable Care Act (Patient Protection and Affordable Care Act, 2010). This Act mandated comprehensive health insurance reforms that were intended to increase access to affordable health care for all citizens of the United States (Health and Human Services [HHS], 2014). The convergence of the decrease in the supply of nurses combined with the increased demand for

nursing services creates a perfect storm with the potential to jeopardize the quality and quantity of healthcare services in the United States.

Given the emerging nursing shortage, Hopkins (2005) noted that associate degree nursing programs “are in a unique position to graduate nursing students in a relatively short time frame to meet the growing demand for professional nurses, as compared to baccalaureate programs” (p. 254). In fact, 57% of new registered nurses are educated in associate degree programs (American Association of Community Colleges [AACCC], 2011). Notably, the vast majority of associate degree nursing programs are offered in community colleges.

### **Characteristics of Community College Students**

Community colleges ordinarily serve the nontraditional student; these students represent a significant and increasing proportion of college enrollments. The National Center for Education Statistics (NCES; Horn & Carroll, 1996) defined nontraditional students as students having one or more of the following characteristics: “delaying enrollment into postsecondary education, attending part time, being independent from parents, having dependents, working full time while enrolled, being a single-parent, or having a GED or high school equivalent certificate” (p. i). Germaine to this study, Horn and Nevill (2006) noted community college students are “likely to be older, female, Black or Hispanic, and from low-income families” (p. iv). Currently, the average age of students attending community college is 28 (AACCC, 2013). Recent statistics indicate that 57% of students attending community colleges are women, 52% are White, 40% are first-generation, and 16% are single parents (AACCC, 2013). Additionally, of the 59% of students who applied for financial aid in 2007-2008, 46% received some form of assistance, primarily through Pell grants (AACCC, 2013). As this monetary support is often insufficient to meet educational expenses, 59% of full-time students and 47% of part-time

students are employed part-time while attending classes (AACC, 2013). The need for nontraditional students to manage work responsibilities and family demands, while simultaneously attending school, has the potential to hinder their engagement in and efforts toward achieving success in the classroom.

In comparison to traditional students, nontraditional students are apt to confront more familial issues related to demands and obligations at home (Dill & Henley, 1998). Community college students, in particular, have identified major challenges and stressors to be: achieving academic success, balancing academic and personal life, and paying for college (Miller, Pope, & Steinmann, 2005). Specifically, research has shown that female students with higher perceived role demands, especially single mothers and mothers with young children, experienced role stress and role strain (Home, 1997). Of particular note, McLaughlin and Randolph (2011) reported that students with children, especially those from low-income families, were significantly more likely to leave college than were students who did not have children. Due to the multiple struggles experienced by nontraditional students in pursuing an education, these students are typically identified as being at increased risk for attrition (NCES, 2011).

### **Retention and Persistence**

According to the ACT Institutional Data File (2013), the first year to second year mean retention rate for community colleges, both public and private, was 55.2% compared to their baccalaureate peers who were retained at a rate of approximately 72%. Even more concerning for higher education administrators is the rate of degree completion. For public community colleges, 22.5% of students completed a degree in 3 years; public baccalaureate institutions reported that 36% of students completed a degree in 5 years. For selective admission programs, of which nursing programs are generally considered, the persistence rate for degree completion

rose significantly for public baccalaureate institutions, 59.8% compared to 38.5% for public community colleges. Factors contributing to the extended time required for degree completion included the need for students to balance the multiple demands of working at least part-time, caring for dependents, and managing family responsibilities while trying to attain a degree (Center for Community College Student Engagement [CCCSE], 2012).

### **Nursing Students**

Predictably, the statistics related to students enrolled in associate degree nursing programs are quite similar to those for nontraditional students enrolled in community colleges. Typically, nursing students fit the nontraditional student profile (Jeffreys, 2007). They are older, have dependent care responsibilities, have not attended school for the last several years, and are employed, either full or part-time, while enrolled in their degree program (Jeffreys, 2007). Specifically, the majority of associate degree nursing students are female with 50% of all students reported as being over the age of 30 (National League for Nursing [NLN], 2013).

Research has shown that the need to balance multiple roles can impede the academic success of nontraditional female students (Carney-Crampton & Tan, 2002; Quimby & O'Brien, 2006). Furthermore, nursing students who are mothers encounter conflict and ambiguity trying to meet the demands of both roles (Gigliotti, 2004). In addition to the stressors associated with balancing multiple responsibilities outside the classroom, nursing students, in particular, have been found to experience greater stress associated with their academic role than do students in other health-related disciplines (Beck, Hackett, Srivastava, McKim, & Rockwell, 1997). Beyond the commitment to attend classes, nursing students, as compared to students in non-nursing undergraduate programs, incur the additional burden of a clinical experience that typically requires an additional sixteen hours per week of academic workload.

## **Nursing Student Attrition and Retention**

Historically, high rates of attrition have posed challenges for nursing education programs (Wells, 2003). ATI (ATI Nursing Education, n.d.), a national leader in nursing education learning resources, reported a 28% attrition rate in nursing programs across the United States in 2011. Wells (2006/2007) reported that undergraduate baccalaureate nursing student attrition was due to “multiple stressors in the academic, social, and/or external environments” (p. 439). In research involving students who were successful, Shelton (2000) concluded that nursing students who persisted had higher total perceived faculty, psychological, and functional support than did students who withdrew, highlighting faculty support as one effective strategy for addressing retention. Further, social support has been positively linked to academic achievement for students enrolled in a nursing program (Coleman, 2008; Shelton, 2012; Williams, 2005).

## **Social Support as a Mechanism for Fostering Academic Success**

Students are more likely to achieve academic success when social supports, as defined by House (1981), and embedded informal and formal structural supports, such as learning centers and learning communities, are combined (Savitz-Romer et al., 2009). Collectively, research focused on social supports and college students suggested that social supports are positively correlated with academic achievement. Emotional support, primarily from family and faculty, is strongly linked with positive outcomes for college students (Hegge, Melcher, & Williams, 1999; O'Reilly-Knapp, 1994; Shelton, 2000; Williams, 2005). Social support, in the form of providing information and acknowledging students' efforts (i.e., affirmation and feedback), has been found to contribute to students' persistence (Shelton, 2000; Williams, 2005).

With regard to nontraditional students who have children, research focused on social supports has yielded similar findings for students in non-nursing undergraduate programs and

those enrolled in nursing programs. Perceived social support fosters persistence as students with children balance the multiple demands of being a student and a parent (Austin & McDermott, 2003/2004; Deutsch & Schmertz, 2011; Gigliotti, 2004; Home & Hinds, 2000; Quimby & O'Brien, 2006). Researchers have also reported that the social support provided by family, peers, and faculty contributes to academic success and enables students with children to persist (Austin & McDermott, 2003/2004; Deutsch & Schmertz, 2011; Gigliotti, 2004; Quimby & O'Brien, 2006).

In sum, community colleges, as a leading provider of nursing and allied health education in the United States, need to consider multiple ways to address retention to increase graduation rates and meet future workforce demands. Colleges need to employ multiple strategies that address a combination of both academic and non-academic factors in order to meet the individual needs of their distinct student populations (Lotkowski, Robbins, & Noeth, 2004). Of note, the provision of social support presents a promising avenue that warrants further exploration.

### **Statement of the Problem**

Over the next decade the nation is expected to experience a significant shortage in the supply of RNs necessary to meet the increased demands of healthcare services that will be required due to an aging population and newly imposed insurance mandates. Associate degree nursing programs educate a significant number of RNs who are prepared to enter various healthcare settings (AACC, 2011). Nevertheless, high attrition rates have continued to be a significant concern for administrators and faculty of nursing education programs (Wells, 2003). One contributing factor is an increased enrollment of nontraditional students who often confront considerable challenges in their personal lives while working toward a nursing degree.

Major stressors faced by nontraditional students include trying to achieve academic success, balancing academic and personal life responsibilities, and paying for college (Dill & Henley, 1998; Miller et al., 2005). The stress inherent in coping with such chronic concerns is one reason many adult women do not complete their educational programs (Johnson, Schwartz & Bower, 2000). This is particularly true for student-mothers, especially those from low-income families (McLaughlin & Randolph, 2011).

Although there is no one best way of meeting the needs of all students, the research underlines the effectiveness of social supports in fostering persistence for college students who face personal and academic stressors (Goff, 2011; Home, 1997; Lewis, 1988; McLaughlin & Randolph, 2011; Peterson-Graziose, Bryer, & Nikolaidou, 2013; Pierceall & Keim, 2007; Reeve, Shumaker, Yearwood, Crowell, & Riley, 2013). This appears to be true for both community college students in general and for those enrolled in nursing programs specifically. Social supports, such as those identified by House (1981), can play a significant role in decreasing college students' stress and contribute positively to academic success. On the one hand, research focused on nursing students has shown that affording social support has been positively linked to academic success (Coleman, 2008; Shelton, 2012; Williams, 2005). On the other hand, research focused on nursing students' perceptions of social support and academic success has been primarily conducted in baccalaureate nursing education programs using quantitative methodologies (Hegge et al., 1999; O'Reilly-Knapp, 1994), with limited research focused on associate degree nursing students and the role of social support (Hopkins, 2005; Shelton, 2000).

A study that elicits the types and providers of the social supports that single-parent college students enrolled in associate degree nursing programs report buffered their college-related stress and fostered their academic success would address a gap in the literature.

Moreover, as associate degree nursing programs generate the largest numbers of new graduates nationally (AACC, 2011), and these programs continue to face sizeable attrition rates, it is imperative that administrators and faculty learn directly from students what helps them to be successful. Bringing voice and meaning to experiences from students' perspectives could provide valuable insight into specific resources that could benefit a population which is faced with significant stressors due to multiple-role demands encountered in the course of their educational pursuits. As nursing students who are single parents have distinct needs and are often faced with multiple stressors while attending college, acquiring additional data about effective social supports from the students' perspective could allow institutions to develop a more comprehensive approach to increase student success. Therefore, the purpose of this exploratory case study was to describe single-parent associate degree nursing students' reports of the social supports that buffered their college-related stress and fostered their academic success.

### **Conceptual Framework**

Over the last three decades there have been many attempts to define social support, but researchers have not yet arrived at a consensus on one clear, acceptable definition. The concept of social support had its beginnings in psychology and the health sciences, primarily in relation to health and well-being. Cassell, Caplan, and Cobb (as cited in Vaux, 1988) maintained that social relationships had positive effects on health due to their buffering properties in times of stress. Support systems, particularly emotional support, esteem support, and belonging support (Cobb, 1976), protect an individual's well-being when faced with everyday demands, situational crises, and life transitions (Caplan, 1974). These supports shielded individuals from the harmful effects of stressors and crises (Cobb, 1976). The research examining the buffering effects of



social support is rich in its depth and breadth and includes studies diverse in foci and populations, such as high-risk adolescents (Malecki & Demaray, 2006), victims of domestic violence (Merrell, 2001), individuals with health related issues (Hale, Hannum, & Espelage, 2005), persons experiencing occupational stress (LaRocco, House, & French, 1980), and college students (Rayle & Chung, 2008).

House's (1981) model of social support was the conceptual framework employed in this case study. According to House, social support is defined as "a flow of emotional concern, instrumental aid, information, and/or appraisal between people" (p. 26). The concept of social support addresses the question: "*Who gives what to whom regarding which problems?*" (p. 22). Through his research, House learned that social supports could mitigate or buffer the negative effects that stress, especially occupational stress, can have on health. Given this research, House's model can be applicable to the academic setting because of the similarity of workload stress experienced by students and the stress described by individuals in the work place. Crucially, support was found "to be effective only to the extent it is perceived" (p. 27). House also learned that individuals frequently reported family, friends, and co-workers as important sources of support, with emotional support most often described by individuals when referencing the type of support received. As noted earlier in this chapter, House's (1981) model encompasses four types of social support: (a) emotional, (b) instrumental, (c) appraisal, and (d) informational. Table 1 provides a brief description of each type of support, which is explained in more detail in the section that follows.

Table 1

*Types of Social Support (House, 1981)*

Type	Description
Emotional Support	Demonstrating care, concern, trust, empathy, or love; examples include listening and understanding.
Instrumental Support	Providing direct aid that helps a person; examples include in kind assistance, money, and time.
Informational Support	Providing information that people can use to help themselves; examples include advice, suggestions, and directives.
Appraisal Support	Providing information relevant to self-evaluation; examples include affirmation, feedback, and social comparison.

**Emotional Support**

Emotional support is characterized by acts or behaviors that demonstrate empathy, care, love, and trust (House, 1981). House (1981) identified emotional support as being reported by individuals most often when referencing the kinds of support received. This form of support is a component of and included in all other forms of support. Additionally, the provision of social support requires an interaction between two individuals and is based on reciprocity. Emotional support usually occurs within social networks that involve a continuing relationship with another individual or individuals such as family, friends, and co-workers. Receiving emotional support has been clearly linked to positive effects on health and has been found to be beneficial in reducing stress (House et al., 1988). For single-parent nursing students, emotional supports could include empathetic listening by faculty, peer support groups, and family members who demonstrate understanding of the student's situation.

**Instrumental Support**

House (1981) characterized instrumental support as behaviors that directly help the person in need. These behaviors could include providing aid in kind, money, time, and

modification of the environment. Examples of instrumental supports that single-parent nursing students might require include childcare, transportation assistance, financial aid, flexible class scheduling, and on-line classes. Although instrumental acts are regarded as specific interventions designed to help individuals, these acts can have unintended psychological effects. For example, House warned that while giving someone financial assistance can demonstrate caring and concern, it may in turn reinforce, for the receiving individual, a reliance on others to meet financial obligations.

### **Informational Support**

House (1981) described informational support as the providing of advice, suggestion, directives, and information that a person can use in coping with personal and environmental problems. Affording this form of support allows individuals to help themselves, by making available useful information that enables the person to manage stressors. According to House, informational support is difficult to define and differentiate from other types of support and can, in some cases, be viewed as emotional support. Examples of informational supports that single-parent nursing students could experience include academic advising, tutoring sessions, and providing scholarship opportunities.

### **Appraisal Support**

Like informational support, House (1981) maintained that appraisal support is difficult to differentiate from the other forms of support. Appraisal support is characterized by the communication of information related to self-evaluation, which has been labeled by social psychologists as social comparison. According to House, individuals evaluate themselves based on information provided by others, either directly or indirectly. For single-parent nursing

students, appraisal support can come from faculty feedback that allows students to validate their successful performance in relation to achieving course and clinical objectives.

In sum, House's (1981) framework provided the lens through which associate degree program single-parent nursing students' reports of the social supports that buffered their college-related stress and fostered their academic success were examined. Based on related research, it seemed reasonable to suggest that single-parent nursing students might perceive the types and sources of support described by House as playing some role in decreasing the chronic stressors experienced while attending college. Eliciting students' perspectives of the supports added their voices to the discussion of effective means for increasing student success.

### **Research Questions**

The intent of this exploratory study was to describe single-parent associate degree nursing students' reports of the social supports that buffered their college-related stress and fostered their academic success. The major research question guiding this study is: What are single-parent associate degree nursing students' reports of the types and sources of social support that buffered their college-related stress and fostered their academic success? The six sub-questions were as follows:

1. What were single-parent associate degree nursing students' reports of the types and frequency of college-related stress?
2. What were single-parent nursing associate degree students' reports of the types and sources of emotional supports that buffered their college-related stress and fostered their academic success?
3. What were single-parent associate degree nursing students' reports of the types and

sources of instrumental supports that buffered their college-related stress and fostered their academic success?

4. What were single-parent associate degree nursing students' reports of the types and sources of informational supports that buffered their college-related stress and fostered their academic success?
5. What were single-parent associate degree nursing students' reports of the types and sources of appraisal supports that buffered their college-related stress and fostered their academic success?
6. What are single-parent associate degree nursing students' reports of what drives their continued persistence towards academic success?

### **Definition of Terms**

For the purpose of this study, the following definitions of key terms apply.

*Academic success:* Completion of the first year of an associate degree nursing-program with an academic grade of 74 or higher.

*Appraisal support:* Providing information relevant to self-evaluation; examples include affirmation, feedback, and social comparison (House, 1981).

*Emotional support:* Demonstrating care, concern, trust, empathy, or love (House, 1981).

*Informational support:* Providing information that people can use to help themselves; examples include advice, suggestions, and directives (House, 1981).

*Instrumental support:* Providing direct aid that helps a person; examples include in kind assistance, money, and time (House, 1981).

*Single-parent nursing student:* A male or female, who is a single-parent of one or more children, enrolled as a full-time student in an associate degree nursing program in a state community college system.

*Social support:* “a flow of emotional concern, instrumental aid, information, and/or appraisal between people” (House, 1981, p. 26).

*Stressors:* Objective social conditions (e.g., heavy workloads, unemployment) perceived by an individual as stressful, resulting in physiological, cognitive/affective, or behavioral manifestations, which negatively affect health (House, 1981).

### **Significance of the Study**

The purpose of this study was to describe single-parent associate degree nursing students’ reports of the social supports that buffered their college-related stress and fostered their academic success. This study was significant for four reasons.

First, this investigation applied House’s (1981) model of social support to a new population within a new context. Second, the study had the potential to add to the knowledge base related to the social supports that buffered college-related stress and fostered single-parent associate degree nursing students’ academic success. Previous empirical research has shown a positive relationship between social supports and academic success for students enrolled in nursing programs (Coleman, 2008; Dapremont, 2011; Shelton, 2012; Williams, 2005). The research completed to date has focused primarily on baccalaureate nursing students (Hegge et al., 1999; O’Reilly-Knapp, 1994; Williams, 2005).

Over the last decade there has been a paucity of peer-reviewed reports that focused on the role social supports play in fostering academic success for associate degree nursing students in

general (Coleman, 2008; Shelton, 2000) and specifically for those who are mothers (Gigliotti, 2004). Moreover, there did not seem to be any published, empirical reports on associate degree nursing students who are single parents. Given this gap in the literature, and the challenges faced by single parents who attend college, focusing on single-parent associate degree nursing students would extend current understanding of the types and sources of supports these particular students perceived as contributing to their academic success.

Third, research focused on the social supports for baccalaureate and associate degree nursing students need to achieve academic success seemed to have been conducted primarily using quantitative methods (Hegge et al., 1999; O'Reilly-Knapp, 1994; Shelton, 2000). This study is significant because it employed in-person interviews, thus, the voice of single-parent nursing students were added to the discussion of the social supports that contributed to their academic achievement.

Finally, the findings from this study have the potential to inform practice. Students' perspectives on social supports needed for academic success could help administrators, faculty, academic success center staff, and counseling services design and implement institutional services and programming that fully supports students enrolled in an associate degree nursing program. Having this information may aid retention rates and ultimately graduation rates.

## **CHAPTER 2: REVIEW OF THE LITERATURE**

### **Introduction to the Chapter**

The aim of this exploratory case study was to describe single-parent associate degree nursing students' reports of the social supports that buffered their college-related stress and fostered their academic success. The purpose of this chapter is to review select literature related to single-parent college students, stress, and social support as it relates to the academic success of nursing students, specifically those enrolled in associate degree nursing programs.

To identify publications on social support and its relationship to academic success, single-parent college students, and stress, the following databases were searched: Academic Search Premier, CINAHL, ERIC, ProQuest Education Journals, ProQuest Nursing and Allied Health Source. Keywords and subject headings included: social support, nursing, single parent, college students, associate degree nursing programs, community college, persistence, and academic success. No search limits were set for year of publication. A review of reference lists and Internet searches provided additional relevant literature. Titles and abstracts were reviewed to exclude articles that were clearly irrelevant to the purpose of this study. The remaining articles were reviewed in full and considered for inclusion. The works reviewed herein are representative of the related works located.

As suggested by Creswell (2009), study-by-study reviews of the articles selected for inclusion in this chapter were organized under three related overarching themes: social support and academic success, social support and single-parent female college students, and social support and stress as it relates to being a student enrolled in a nursing program. The first section of this chapter presents a review of five studies focused on the relationship between social support and academic success for students enrolled in baccalaureate and associate degree nursing



programs (Hegge et al., 1999; Montes-Berges & Augusto, 2007; O'Reilly-Knapp, 1994; Shelton, 2000; Williams, 2005). In the second section, five studies that examined the importance of social support for nontraditional female students, who balance multiple roles and demands in pursuit of an education, are presented (Austin & McDermott, 2003/2004; Deutsch & Schmertz, 2011; Gigliotti, 2004; Home & Hinds, 2000; Quimby & O'Brien, 2006). The third section provides a review of five investigations examining multiple stressors faced by nontraditional female students in their attempts to juggle the demands of family, work, and school, highlighting the important role social supports play in buffering the effects of stress (Goff, 2011; Home, 1997; Peterson-Graziose et al., 2013; Pierceall & Keim, 2007; Reeve et al., 2013) .

### **Social Support and Academic Success**

Shumaker and Brownell (1984) defined social support “as an exchange of resources between at least two individuals perceived by the provider or the recipient to be intended to enhance the well-being of the recipient” (p. 13). Social support can further be described as the “flow of emotional concern, instrumental aid, information, and/or appraisal between people” (House, 1981, p. 26). Central to this relationship between individuals is “who gives what to whom regarding which problems” (House, 1981, p. 22). Research conducted by House (1981) indicated that individuals frequently reported that family, friends, and co-workers were important sources of support, with emotional support most often reported by individuals when describing the kinds of support received. Although the types and sources of support are fundamental to delineating social support, House (1981) maintained, “social support is likely to be effective only to the extent it is perceived” (p. 27). Unless a behavior is perceived to be supportive by an individual, it will not have any intended effect on that individual. Social supports, adapted from

those defined by House (1981), in the form of emotional, instrumental, informational, and appraisal supports, when linked with academic supports, were purported to promote academic success (Savitz-Romer et al., 2009). Related research suggested that the social support specifically derived from family and friends positively influenced academic achievement (Nicpon et al., 2006/2007; Skahill, 2002/2003).

The remainder of this section presents a summary of five peer-reviewed reports of research that identified social support, primarily from family and faculty, as being strongly correlated with positive outcomes for college students (Hegge et al., 1999; Montes-Berges & Augusto, 2007; O'Reilly-Knapp, 1994; Shelton, 2000; Williams, 2005). The studies reviewed are organized according to the populations examined. The first four studies included baccalaureate students enrolled in nursing programs. The fifth study focused on students enrolled in an associate degree nursing program, which seems to be an understudied population.

O'Reilly-Knapp (1994) used a mixed methods approach to investigate the types of social support that baccalaureate nursing students reported as having been desired and obtained from faculty members during their clinical experience. Participants included 242 baccalaureate nursing students enrolled in their junior or senior year from three colleges and universities in Pennsylvania. A researcher-designed survey, based on a revision of the Inventory of Socially Supportive Behaviors (as cited in O'Reilly-Knapp, 1994), was administered to all participants. In addition, one out of every 20 students who participated in the survey was interviewed.

Results showed that students wanted more social support than they received from faculty (O'Reilly-Knapp, 1994). Junior nursing students indicated a desire for more guidance and feedback from faculty than did senior students. Additionally, interview data supported the

quantitative findings. Students reported directive guidance as most helpful and most wanted during both junior and senior clinical experiences (O'Reilly-Knapp, 1994).

Similar to O'Reilly-Knapp (1994), Hegge et al. (1999) examined the relationship between baccalaureate nursing-students' academic performance and their reports of hardiness, help-seeking behavior, and social support. This descriptive correlational study used a survey based on the Norbeck Social Support Questionnaire and the Personal Views Survey (as cited in Hegge et al., 1999). Study participants included 222 baccalaureate nursing-students from four geographically dispersed sites of one nursing program in the Midwest.

Data analysis revealed that students most frequently reported family members, followed by spouse or partner, as sources of support. Additionally, the social support scores reported by students who were in their fifth semester of nursing school were significantly lower than those of eighth semester students. Hegge et al. (1999), comparable to O'Reilly-Knapp (1994), found that students who were in the earlier stage of their program required more social support. Stressors such as caring for dependent children, family or spousal expectations, and traveling distances to and from clinical experiences were noted to affect academic performance (Hegge et al., 1999). Furthermore, students who sought help tended to perform better academically, suggesting that social supports buffered stress for these students.

Interested in factors that enabled students to persist at the beginning of their baccalaureate nursing education, Williams (2005) interviewed 10 students who had completed their first or second-level nursing course in a Bachelor of Science nursing program at a college in the Midwest. Data analysis revealed four major themes that reflected common experiences that allowed students to remain successful during their first two years in the nursing program: (a) keeping up, (b) not giving up, (c) doing it, and (d) connecting. The first theme, keeping up,

related to the need for students to balance multiple academic responsibilities and the importance of using time management skills in order to not fall behind in their studies. The second theme, not giving up, encompassed students' descriptions of self-determination in achieving their dream to be a nurse and their persistence in the face of challenges. The third theme, doing it, signified students' maintenance of a positive mindset and an unyielding drive to achieve their goal of becoming a nurse. The fourth theme, connecting, emerged from students' reports of being able to count on others for help with assignments, having someone available to call, and perceiving support of faculty and peers.

Montes-Berges and Augusto (2007) used a survey methodology to explore perceived emotional intelligence, coping strategies, and social support in baccalaureate nursing-students. Specifically, the researchers assessed how coping strategies and use of social supports, both objective and subjective, influenced mental health. The participants were 119 nursing students in their first year of study at the Universidad de Jaén, Jaén, Spain. The findings showed that women searched for more social support than did men. Additionally, participants who had higher emotional clarity and emotional repair scores (components of perceived emotional intelligence) were able to invest the cognitive resources necessary to make use of more adaptive coping strategies during stressful situations. Montes-Berges and Augusto also found that emotional clarity was positively associated with objective and subjective social support and emotional repair was a factor in predicting mental health. Finally, the researchers concluded that the social support from family and friends was beneficial and necessary when faced with stressful events, specifically highlighting the need for students to identify strategies to increase social supports in order to decrease the stress associated with the demands of nursing school (Montes-Berges & Augusto, 2007).

Interested in the positive effects of both functional and psychological support on retention, Shelton (2000) investigated the relationship between perceived faculty support and student retention for associate degree nursing students. Participants included 438 students, selected from nine programs in Pennsylvania and New York, who were enrolled in their final semester nursing course or who had withdrawn from a program during the previous nine months. Study participants completed a researcher-developed survey comprised of items designed to measure students' perception of the functional and psychological support received from faculty. Comparisons were made between three groups of respondents: students who persisted throughout the program, students who had voluntarily withdrawn, and students who were forced to withdraw due to academic failure. The results suggested that students who persisted had significantly higher total perceived faculty, psychological, and functional support than did students who withdrew, either voluntarily or involuntarily. Between voluntary and involuntary withdrawals, there were no significant differences noted in either total perceived faculty support or psychological support. Interestingly, students who withdrew voluntarily had higher perceived functional support than did students who were forced to withdraw.

Shelton (2000) learned that functional supports, such as providing help and facilitating learning, and psychological supports, in the form of a caring atmosphere and mentoring relationships, were important factors in promoting student retention. Moreover, students who perceived a higher degree of faculty support, both functional and psychological, had a higher degree of retention.

## **Summary of Select Research on Social Support and Academic Success**

Collectively, the findings from the studies reviewed in this section underscore the importance of social supports for students enrolled in an undergraduate nursing program of study (Hegge et al., 1999; Montes-Berges & Augusto, 2007; O'Reilly-Knapp, 1994; Shelton, 2000; Williams, 2005). Despite addressing different undergraduate populations, Shelton (2000) and Williams (2005) articulated the significant role emotional support, especially from faculty, played in contributing to students' persistence in a nursing program. Although both authors emphasized the need for emotional and informational supports, there is additional evidence that support provided in the form of faculty acknowledgement of students' efforts contributed to students' persistence (Shelton, 2000; Williams, 2005). Acknowledgement of effort aligns with House's (1981) appraisal supports, which encompasses affirmation and feedback. Both O'Reilly-Knapp (1994) and Hegge et al. (1999) addressed the positive effects of appraisal support, in addition to emotional and instrumental support, in fostering student retention and decreasing the stressors associated with the demands of being a nursing student. Additionally, three of the five studies stressed the buffering effects of family support as students managed the stressors inherent in attending college (Hegge et al., 1999; Montes-Berges & Augusto, 2007; O'Reilly-Knapp, 1994).

With regard to limitations, none of the studies included in this review described the race or ethnicity of the participants. Additionally, three of the five studies used a quantitative, survey approach (Hegge et al., 1999; Montes-Berges & Augusto, 2007; Shelton, 2000). Although O'Reilly-Knapp (1994) employed a mixed methods approach, interview data to support the findings was very limited. A qualitative study examining students' perceptions of supports would surface their voices and insights to aid administrators and faculty in determining the types

and sources of support that contribute to academic success. Although four of the five studies examined students in a baccalaureate program (Hegge et al., 1999; Montes-Berges & Augusto, 2007; O'Reilly-Knapp, 1994; Williams, 2005), one specifically addressed students enrolled in an associate degree program (Shelton, 2000). Given the fact that a majority of nurses in the United States are educated in two-year degree programs, research that includes this population has the potential to provide program administrators and faculty with valuable information on types and sources of support students perceive to help them be academically successful and persist to graduation.

### **Social Support and Single-Parent Female College Students**

Forty years ago, Brandenburg (1974) pointed out that women who were parents encountered stressors such as a lack of access to financial aid, inadequate childcare, and inadequate academic skills, that hindered their pursuit of academic goals. Today, many nontraditional college students who are also single parents face similar challenges (Goldrick-Rab & Sorensen, 2010). Notably, much research has focused on female college students who have children, and the literature suggests they frequently struggle with balancing the need to fulfill academic responsibilities with the demands and obligations of caring for their families and their work responsibilities (Home, 1997; Johnson et al., 2000). Not surprisingly, retention rates for single-parent college students are low (Goldrick-Rab & Sorensen, 2010) and “student-mothers from low-income families are three times as likely to drop out of college as female students without children” (McLaughlin & Randolph, 2012, p. 68). For this population of students, empirical evidence points to the importance of social supports, especially from family, peers, and faculty, in buffering stressors inherent in being a college student with children, fostering

academic persistence, and achieving educational goals (Austin & McDermott, 2003/2004; Deutsch & Schmertz, 2011; Gigliotti, 2004; Home & Hinds, 2000; Quimby & O'Brien, 2006).

Reviewed next are five empirical investigations representative of the body of work that has focused on the population of nontraditional female college students (Austin & McDermott, 2003/2004; Deutsch & Schmertz, 2011; Gigliotti, 2004; Home & Hinds, 2000; Quimby & O'Brien, 2006). The samples in the first three studies were drawn from students enrolled in various undergraduate degree programs (Austin & McDermott, 2003/2004; Deutsch & Schmertz, 2011; Quimby & O'Brien, 2006). The final two studies specifically included nontraditional female students with children who were enrolled in a nursing program (Gigliotti, 2004; Home & Hinds, 2000), which appears to be a less well-researched population.

Austin and McDermott (2003/2004) examined barriers to college persistence for low-income single mothers and the strategies these women used in their efforts to overcome the obstacles they faced. Participants included 14 women who had received Transitional Assistance for Needy Families (TANF) and were enrolled or formerly enrolled at a public flagship university in the Northeast. In this exploratory study, the researchers conducted semi-structured interviews with each participant to obtain data regarding their experiences attending college and with receiving TANF. Participants indicated they needed additional sources of support while attending college and were overextended trying to meet work commitments imposed by TANF requirements. In addition, the findings highlighted the stress incurred by participants' children due to their mothers having to live on campus. Participants also reported that obtaining adequate child care resources and meeting financial obligations related to the cost of housing, living expenses, and tuition were substantial impediments to academic success.



In addition to the barriers, participants in the study by Austin and McDermott (2003/2004) identified several factors that allowed them to persist. They included: holding a strong belief in the value of obtaining a college education; establishing peer support networks; having a relationship with faculty advisors and administrators; having experience being a previous student at a community college; obtaining financial assistance with child care, housing, and tuition; using multiple strategies to comply with TANF requirements; and having support from family and community.

Similar to Austin and McDermott (2003/2004), Deutsch and Schmertz (2011) investigated the experiences of adult women returning to school and the barriers they faced. The results of the study provided evidence that support from family, peers, and faculty was important for students to balance the demands of school and family responsibilities. This qualitative study included three focus group interviews with 11 undergraduate women, aged 19 to over age 60, conducted at a college in the Northeast. A second session was held at New England College, in which the researcher conducted individual interviews, using focus group questions, with two undergraduate women -- one who was 20 and one who was in her fifties.

One of the major themes that emerged from the data analysis was that family could be viewed as both a support and a constraint to students in their academic pursuits (Deutsch & Schmertz, 2011). Additionally, five of the women reported their children were a significant factor in their decision to return to school. The women expressed the need to be good role models for their children; their children provided the impetus for these women to break out of their current economic situations in search of better jobs. A second theme that emerged from the data analysis was that these women managed multiple demands, including economic challenges, as they attempted to balance family and school responsibilities. In response, the women reported

that support from faculty, peers, and the institution aided their efforts to persist despite the challenges they faced.

Quimby and O'Brien (2006) explored the importance of secure attachment, parent and student self-efficacy, and perceived social supports' influence on the well-being of nontraditional female students with children. Using a quantitative approach, Quimby and O'Brien surveyed 209 nontraditional undergraduates, defined as being female, at least 25 years old, living off campus, attending college on a part-time or full-time basis, and being the primary caregiver for at least one child. The survey consisted of several items that measured attachment style, perceived social support, parent and student self-efficacy, and well-being.

The survey findings illustrated the connection between perceived social support and mental health. Quimby and O'Brien (2006) found students who were confident in managing school and parenting responsibilities and perceived high levels of social support tended to have strong levels of self-esteem, an indicator of positive well-being. In addition, students who perceived safe and supportive relationships experienced low levels of psychological distress and greater life satisfaction.

Two studies addressed, more specifically, the needs of nontraditional female students with children who were enrolled in a nursing program (Gigliotti, 2004; Home & Hinds, 2000). Home and Hinds (2000) examined life situations and institutional supports of female university students, who were primarily from a nursing program, with family and job responsibilities. In this mixed methods study, interviews were conducted with 30 women with dependent care responsibilities chosen from 17 nursing, social work, and adult education programs in Canadian universities. Following the completion of the interviews, a survey, created from existing and adapted scales and new scales based on the qualitative data, was administered to 453

participants, with 43% of respondents from nursing programs. Analysis of the results indicated that higher stress and role strain were associated with women who had lower incomes. Moreover, women with care-giving responsibilities, or who had children under the age of 13, were at higher risk for role strain, even if not faced with financial constraints. Notably, the findings showed that students experienced less stress when enrolled in distance education classes (Home & Hinds, 2000).

Finally, a study by Gigliotti (2004) addressed the types and sources of social support, specifically affect, affirmation, and aid, and their impact on maternal student role stress. Participants included 132 female students who were married, had at least one child, and were enrolled in associate degree nursing programs in New York and New Jersey. In this investigation, Gigliotti (2004) completed a secondary data analysis of the data from her previous primary study, in which she examined the relationship between total functional support and maternal-student role stress. The researcher coded the data from the original analysis to additionally yield type and source-specific support using an instrument based on the Perceived Multiple Role Stress Scale (as cited in Gigliotti, 2004) and the Norbeck Social Support Questionnaire (as cited in Gigliotti, 2004).

Results from this analysis showed that for younger women, defined as women younger than 37 years old, receiving affirmation and aid from their husbands and children and receiving affect, affirmation, and aid from mothers-in-law were associated with less maternal-student role stress, and aid from “others” was associated with greater maternal-student role stress (Gigliotti, 2004). In contrast, for older woman, defined as women older than 37 years, receiving affect, affirmation, and aid from all types of support, but, specifically, their husbands and children, were associated with less maternal-student role stress and receiving no source of support was

associated with greater maternal-student role stress. Based on the analysis, Gigliotti (2004) determined for women in both age groups the source and kind of support given was most important in decreasing their stress.

### **Summary of Select Research on Social Support and Single-Parent Female College Students**

A major trend across the findings in this group of studies is the importance of social support in fostering academic success for nontraditional students who have children as they balance the multiple demands of being a student and a parent (Austin & McDermott, 2003/2004; Deutsch & Schmertz, 2011; Gigliotti, 2004; Home & Hinds, 2000; Quimby & O'Brien, 2006). This was true for students in non-nursing undergraduate programs and for those enrolled in baccalaureate and associate degree nursing programs. In four of the five studies, social supports provided by family, peers, and faculty fostered academic success and enabled students with children to persist (Austin & McDermott, 2003/2004; Deutsch & Schmertz, 2011; Gigliotti, 2004; Quimby & O'Brien, 2006). In addition to social supports, Austin and McDermott (2003/2004) and Deutsch and Schmertz (2011) found the success of adult women with children was furthered by their beliefs that being good role models for their children and obtaining an education were ways to ensure a better life for their families. Similar to Austin and McDermott (2003/2004), Home and Hinds (2000) found that lower income students with children experienced the highest role strain and stress. This finding draws attention to the need for financial support and adequate child care resources (Austin & McDermott, 2003/2004) to assist students who are parents as they pursue their educational goals.

Of the studies reviewed, three of the five (Deutsch & Schmertz, 2011; Gigliotti, 2004; Quimby & O'Brien, 2006) involved primarily White participants and none addressed ethnicity,

therefore limiting the generalizability of the findings. Four of the five studies (Austin & McDermott, 2003/2004; Deutsch & Schmertz, 2011; Quimby & O'Brien, 2006), examined students primarily in non-nursing baccalaureate programs, however Home and Hinds (2000) included a small sample of baccalaureate nursing students and students in liberal arts and social work. Gigliotti (2004) conducted the only study that investigated nursing students enrolled in a community college. Research focused on this population could aid administrators and faculty in developing appropriate supports that might better meet community college nursing students' specific needs.

### **The Buffering Effects of Social Support on College Students' Stress**

A pioneer in the biological effects of stress, Selye (1985) defined stress as "the nonspecific responses of the body to any demand, whether it is caused by, or results in, pleasant or unpleasant conditions" (p. 9). Although Selye documented the systemic biological effects experienced by an individual as a result of stress, his definition did not address psychological response. Lazarus and Folkman (1984) maintained that stress is not only related to environmental demands, but also involves the individual's appraisal of the situation. That is, a situation perceived as stressful will be stressful. Moreover, Lazarus and Folkman believed that an individual's sense of well-being would be threatened if they did not perceive they had sufficient coping resources (Lazarus & Folkman, 1984). In this vein, the theory of conservation of resources posited that stress occurs when one's resources, such as finances, personal relationships, self-esteem, and knowledge, are lacking or threatened (Hobfoll, 1989).

Related research demonstrated that social support played a significant role in mitigating the negative effects of stress on health (House, 1981). Social support has also been shown to

buffer the effects of job stress on the psychological well-being of individuals (LaRocco et al., 1980). According to Cohen and Willis (1985), social support can be viewed through two lenses. Through one lens, social support acts as a buffer to protect individuals from the pathological consequences of stress. This concept of buffering relates to a perception that adequate resources enable an individual to see a situation as less stressful, thereby decreasing the potential for harmful physiological consequences. Through the second lens, social supports are a benefit to an individual, regardless of whether the person is experiencing stress.

Miller et al. (2005) noted that because community college students are typically older than students attending four-year institutions they typically confront varied stressors as they attempt to balance the demands of their academic role with personal, family, work, and financial obligations. These students are apt to rely on family and community college support services as primary methods for coping with the challenges of attending college. Similarly, Wilks and Spivey (2010) learned that support from friends was a significant factor in moderating stress and fostering resilience for undergraduate social work students. The stressors faced by social work students can parallel those confronting nursing students, as both groups need to immerse themselves in the professional role during their academic program. Likewise, social work and nursing education programs require satisfactory achievement of a clinical component and a didactic course of study as part of the degree requirements. Social support, wherein individuals feel connected to others, or form social networks, has been shown to have a positive effect on physical health, especially for female college students (Hale et al., 2005).

To gain a sense of the importance of social support for college students, a chronological study-by-study review of five investigations focused on the stressors college students face and

the moderating effects of social support on stress is presented (Goff, 2011; Home, 1997; Peterson-Graziose et al., 2013; Pierceall & Keim, 2007; Reeve et al., 2013).

Home (1997), examining relationships between stress, role strain, perceived role demands, and perceived support in multiple-role female students, found that female students with higher perceived role demands had more role stress and role strain. Participants included 443 final year female students who were from 17 Canadian university programs including 6 schools of social work, 6 nursing schools, and 5 departments of adult education. Student characteristics included being at least 23 years old, working at least 9 hours per week, and having care-giving responsibilities. In this quantitative study, a researcher-designed survey comprised of several scales to measure stress, role strain, perception of demands, use of institutional social supports, and perception of social supports received was administered.

The survey findings indicated that female students, especially those who were mothers of children under the age of 13, perceived higher role demands and reported more role stress and role strain. Additionally, women with lower incomes reported more stress, and those with stronger support from family and friends had less. The researchers concluded that income was a significant life situation predictor in relation to stress and role strain. The results also showed that students who were enrolled in distance education experienced less role stress and role strain. With regard to social supports, the findings indicated that the majority of students reported significant support from family and friends, and less from the university and their place of employment (Home, 1997).

Pierceall and Keim (2007) examined the degree of stress perceived by community college students. In this quantitative study, the researchers surveyed 212 students enrolled in psychology classes at two community colleges in southern Illinois using the Perceived Stress Scale (as cited

in Piercall & Keim, 2007). The Perceived Stress Scale measures the degree to which respondents found their lives unpredictable, uncontrollable, and overloading.

Survey results indicated 75% of respondents reported a moderate amount of stress and 12% reported high stress. Talking with family and friends was the most common method used to cope with stress, followed by engaging in leisure activities and exercise. Pierceall and Keim, (2007) found a significant difference between females' and males' perception of stress; more specifically, women perceived more stress than did men. With regard to the student population, there was no statistical difference noted between traditional students' and nontraditional students' perceptions of stress levels.

In a study focused on baccalaureate nursing-students, Goff (2011) examined the mediating effect of learned resourcefulness on the relationship between stressors (personal and academic) and academic performance. Using a quantitative approach, Goff surveyed 53 predominantly female, White, junior baccalaureate nursing students who resided off-campus and attended a large urban university. The survey was developed based on the Student-Life Stress Inventory (as cited in Goff, 2011) and the Self-Control Schedule (as cited in Goff, 2011). An analysis of the data indicated high levels of both personal and academic stressors, with males perceiving less stress than females. Respondents most frequently reported stressors included those related to academic deadlines and an overload of things to do. Goff concluded that learned resourcefulness could provide nursing students with the means to cope with the stressors they face during the course of their academic program.

A mixed methods study conducted by Reeve et al. (2013) investigating perceived stress and the use of social support as a coping mechanism in baccalaureate nursing students demonstrated that students used social support from family, significant others, and peers when



facing stress. A researcher-designed survey, based on multiple scales that addressed perceived social support, coping, use of social support, and student stressors, was administered to 107 baccalaureate students in both a traditional and a second degree nursing program. Additionally three open-ended questions, based on Flanagan's Critical Incident Technique Tool (as cited in Reeve et al., 2013) were included in the survey.

Analysis of the data indicated that although traditional and second degree nursing students reacted similarly in response to stress, they used several different coping mechanisms. Both groups used social supports from friends and family when faced with stress; however, traditional students were noted to ignore stress at higher rates compared to second-degree students. Additionally, Reeve et al. (2013) learned that both groups rated the use of faculty as a support in response to stress extremely low; however, traditional students reported slightly higher dependence on faculty compared to second-degree students.

In this study (Reeve et al., 2013), students reported that experiences that made them feel rejected produced the most stress. These experiences included feeling rejected by faculty, clinical instructors, staff nurses, peers, and patients. Another factor reported as contributing to student stress was a feeling of inadequacy. When asked how they coped with stressful situations, the majority of respondents indicated multiple people constituted their support system, but the most reported support was from that of their peers, followed by family, friends outside of their major, and their clinical instructor. Additionally, most students reported the use of reflection on their experiences and engagement in physical activity to manage stressful situations, as well as making a conscious effort to persist in their nursing program (Reeve et al., 2013).

Peterson-Graziose et al. (2013), in a quantitative study, addressed the relationship between attrition rates in associate-degree nursing students and psychological variables of self-

esteem, self-efficacy, and life stressors. Participants included 34 predominantly White female students, with a mean age of 32, enrolled in their first semester of a nursing program. In this descriptive correlational study, the following instruments were administered: Rosenberg Self-esteem scale (as cited in Peterson-Graziose et al., 2013), General Self-efficacy scale (as cited in Peterson-Graziose et al., 2013), and Holmes and Rahe Social Readjustment Rating Scale (as cited in Peterson-Graziose et al., 2013). In addition, students' grade point averages at the end of the first semester were used to measure attrition.

The results of the data analysis revealed a 29% attrition rate among this group of respondents, with no statistically significant correlation with the age, gender, or ethnicity of the participants. Self-efficacy was positively related to self-esteem. The majority of students reported high levels of self-esteem, high levels of self-efficacy, and over one-third of the students reported moderate stress levels. Findings also showed that higher levels of self-esteem were most notably associated with a lower rate of student attrition for students in their first semester of the nursing program. As a result, the researchers concluded that programs designed to identify and support students who are academically vulnerable may aid in their persistence.

### **Summary of Select Research on the Buffering Effects of Social Support on College**

#### **Students' Stress**

The empirical investigations in this area of the literature review were focused on stressors incurred by college students and the social supports that buffer stress. Notably, the findings underscored the significant role social supports play in fostering academic success for students who face personal and academic stressors (Goff, 2011; Home, 1997; Peterson-Graziose et al., 2013; Pierceall & Keim, 2007; Reeve et al., 2013). This was true for both community college

students and those specific students enrolled in nursing programs. When compared with male students, female students in three studies (Goff, 2011; Home, 1997; Pierceall & Keim, 2007) had higher role demands, role strain, and faced more personal and academic stressors. This was especially true for female students with lower incomes and those with young children (Home, 1997). Social supports provided by family and friends increased resilience and decreased stress, allowing students to persist in their academic program (Goff, 2011; Home, 1997; Pierceall & Keim, 2007; Reeve et al., 2013). Additionally, Goff (2011) concluded that learned resourcefulness could provide nursing students with the means to cope with the stressors they face during the course of their studies.

This group of studies is not without limitations. Notably, two of the studies had samples comprised of predominantly White participants (Goff, 2011; Peterson-Graziose et al., 2013), and in three studies, the race or ethnicity of participants was not reported (Home, 1997; Pierceall & Keim, 2007; Reeve et al., 2013). Two of the five studies had participants with a mean age greater than 23 (Home, 1997; Peterson-Graziose et al., 2013) and two studies did not indicate the ages of participants (Goff, 2011; Reeve et al., 2013). One study examined both traditional and nontraditional students, but did not address specifically those students who were single parents (Pierceall & Keim, 2007).

In sum, the majority of the studies reviewed (Goff, 2011; Home, 1997; Reeve et al., 2013) were specific to students in baccalaureate nursing programs. Although the study by Pierceall and Keim (2007) addressed community college students, only one study (Peterson-Graziose et al., 2013) specifically addressed students enrolled in an associate degree nursing program. Additionally, the majority of studies (Goff, 2011; Home, 1997; Peterson-Graziose et al., 2013; Pierceall & Keim, 2007) employed a quantitative approach. To gain further insight

regarding the stressors encountered by nursing students, specifically those who are single parents enrolled in an associate degree nursing programs, additional research seemed warranted.

### **Chapter Summary and the Need for Additional Research**

The purpose of this chapter was to review the literature related to single parents, stress, and social support as it relates to academic success of nursing students, more specifically students enrolled in associate degree nursing programs. The findings consistently supported the premise that social supports play a significant role for college students in buffering their college-related stress and fostering their academic persistence and ultimately, academic success. This is especially true for nontraditional students who have children, as these students balance the multiple demands of both family and academic responsibilities.

The field of nursing faces a major nursing shortage. Crucially, to meet the demand, college administrators and faculty need to address issues of nursing students' retention and degree completion and the challenges faced by single-parent nursing students. Although the depth and breadth of literature examining social support in relation to college students is expansive, there is limited research in which nursing students comprised the population. Furthermore, the existing limited literature on social supports and nursing students has focused primarily on baccalaureate students and yielded mostly quantitative data. A qualitative study conducted in a community college setting could provide valuable information on the types and sources of support that single parents enrolled in nursing programs perceive as important to their academic success. This information could aid faculty and administration in their development of programs and the provision of resources to support this population of students through degree completion.

## **CHAPTER 3: RESEARCH DESIGN AND METHODOLOGY**

### **Introduction to the Chapter**

The purpose of this exploratory case study was to describe single-parent associate degree nursing students' reports of the social supports that buffered their college-related stress and fostered their academic success. House's (1981) model of social support was the lens through which data was analyzed. Two methods were used to collect data: a paper-and-pencil survey and an in-person interview. All students who volunteered completed the survey first and then participated in an in-person interview. In this qualitative study, participants were recruited from the population of Connecticut community college nursing program students who met the following demographic criteria: female single-parent, at least 18 years of age, and have completed the first year of the nursing program with an academic grade of 74 or higher.

The purpose of this chapter is to describe the research design and methodology. This chapter is organized into the following sections: restatement of the problem, research questions, definition of terms, design of the study, sampling strategies, description of the colleges from which the sample will be drawn, data collection procedures, data analysis procedures, validity of the research design, protections of human subjects, limitations of the study and summary.

### **Restatement of the Problem**

Over the next decade the nation is expected to experience a significant shortage in the supply of RNs necessary to meet the increased demands of healthcare services that will be required due to an aging population and newly imposed insurance mandates. Associate degree nursing programs educate a significant number of RNs who are prepared to enter numerous

healthcare settings (AACC, 2011). Nevertheless, high attrition rates have continued to be a significant issue for administrators and faculty of nursing education programs (Wells, 2003). One factor contributing to the high attrition rate is the increased enrollment of nontraditional students who often confront considerable challenges in their personal lives while working toward a nursing degree.

Major stressors faced by nontraditional students include trying to achieve academic success, balancing academic and personal life, paying for college (Miller et al., 2005), and managing familial responsibilities and obligations (Dill & Henley, 1998). The stress inherent in coping with such chronic stressors is one reason many adult women do not complete their educational programs (Johnson et al., 2000). This is particularly true for student-mothers, especially those from low-income families (McLaughlin & Randolph, 2011).

Although there is no one best way of meeting the needs of *all* students, research underlines the effectiveness of social supports in fostering persistence for college students who face personal and academic stressors (Goff, 2011; Home, 1997; Lewis, 1988; McLaughlin & Randolph, 2011; Peterson-Graziose et al., 2013; Pierceall & Keim, 2007; Reeve et al., 2013). This appears to be true for both community college students generally and for those enrolled in nursing programs specifically. Social supports, such as those identified by House (1981), can play a significant role in decreasing college students' stress and can contribute positively to academic success. On the one hand, research focused on nursing students has shown that affording social support has been positively linked to academic success (Coleman, 2008; Shelton, 2012; Williams, 2005). On the other hand, research focused on nursing students' perceptions of social support and academic success has been primarily conducted in baccalaureate nursing education programs using quantitative methodologies (Hegge et al., 1999;

O'Reilly-Knapp, 1994), with limited research focused on associate degree nursing students and the role of social support (Hopkins, 2005; Shelton, 2000).

A study that elicits the types and providers of the social supports that single-parent college students enrolled in associate degree nursing programs reported to have buffered their college-related stress and fostered their academic success would address a gap in the literature. Moreover, as associate degree nursing programs generate the largest numbers of new graduates nationally (AACC, 2011), and these programs continue to face sizeable attrition rates, it is imperative that administrators and faculty members learn directly from students what helps them to be successful. Bringing voice and meaning to experiences from students' perspectives could provide valuable insight into specific resources that could benefit a population which is faced with significant stressors due to the multiple-role demands encountered in the course of their educational pursuits. As single-parent nursing students have distinct needs and are faced with multiple stressors while attending college, acquiring data regarding effective social supports from the students' perspective could provide a more comprehensive approach to institutional efforts to increase student success. Therefore, the purpose of this exploratory case study was to describe single-parent associate degree nursing students' reports of the social supports that buffered their college-related stress and fostered their academic success.

### **Research Questions**

The major research question guiding this study was: What are single-parent associate degree nursing students' reports of the types and sources of social support that buffered their college-related stress and fostered their academic success? The six sub-questions were as follows:

1. What were single-parent associate degree nursing students' reports of the types and frequency of college-related stress?
2. What were single-parent associate degree nursing students' reports of the types and sources of emotional supports that buffered their college-related stress and fostered their academic success?
3. What were single-parent associate degree nursing students' reports of the types and sources of instrumental supports that buffered their college-related stress and fostered their academic success?
4. What were single-parent associate degree nursing students' reports of the types and sources of informational supports that buffered their college-related stress and fostered their academic success?
5. What were single-parent associate degree nursing students' reports of the types and sources of appraisal supports that buffered their college-related stress and fostered their academic success?
6. What are single-parent associate degree nursing students' reports of what drives their continued persistence towards academic success?

### **Definition of Terms**

For the purpose of this study, the following definitions of key terms apply.

*Academic success:* Completion of the first year of an associate degree nursing program with an academic grade of 74.

*Appraisal support:* Source of support that involves information relevant to self-evaluation i.e. providing affirmation, feedback, and social comparison (House, 1981).



*Emotional support:* Source of support that involves providing empathy, trust, concern, and listening (House, 1981).

*Informational support:* Source of support that involves providing information that a person can use in coping with personal and environmental problems such as, providing advice, suggestion, directives, and information (House, 1981).

*Instrumental support:* Source of support that involves behaviors that directly help the person in need such as, providing aid in kind, money, time, and modifying the environment (House, 1981).

*Single-parent nursing student:* A male or female, who is a single parent of one or more children, enrolled as a full-time student in an associate degree nursing program in a state community college system.

*Social support:* “a flow of emotional concern, instrumental aid, information, and/or appraisal between people” (House, 1981, p. 26).

*Stressors:* Objective social conditions (e.g., heavy workloads, unemployment) perceived by an individual as stressful, resulting in physiological, cognitive/affective, or behavioral manifestations, which negatively affect health (House, 1981).

### **Design of the Study**

A case study was the approach selected to answer the research questions for this exploratory investigation. Yin (2014) asserted that a case study research design is indicated when there is a desire to gain knowledge and understanding of a complex individual, group, or social phenomenon. Yin defined the scope of a case study as “an empirical inquiry that investigates a contemporary phenomenon (the “case”) in depth and within its real-world context,

especially when the boundaries between phenomenon and context may not be clearly evident” (p. 16).

The phenomenon under investigation in the present study was single-parent associate degree nursing students’ reports of the social supports that buffered their college-related stress and fostered their academic success. For single-parent college students, the demands of school and family create inter-role conflict, with their parental role being at times seemingly incompatible with their student roles (Goode, 1960; Greenhaus & Beutrell, 1985; Mikolaj & Boggs, 1991). School and family responsibilities can collide and the lines between the two can become blurred (Home & Hinds, 2000; Kelly & Voydanoff, 1985). As such, it becomes difficult to distinguish stress and strain stemming from school factors from the stress and strain due to family factors (Greenhaus & Beutrell, 1985; Home & Hinds, 2000; Johnson et.al, 2000). For students who work, the situation can be even more complex. Therefore, the boundaries between family, school, and work and the social support perceived might not be apparent.

Additionally, Yin (2014) explained that a case study is an appropriate research design to answer what, how, or why questions. The research questions presented in this study are “what” questions. Given the unclear boundary issues between school and personal life, the social supports perceived by single-parent nursing students and the form of the research questions posed, this research design meets Yin’s criteria for using a case study approach.

According to Yin (2014), an important component of case study research is the need to define the case under investigation. The “case,” or unit of analysis, can be an individual or an entity other than a single individual (Lichtman, 2013; Yin, 2014). Yin maintained that a unit of analysis or desired case should be representative of a real-life phenomenon and be related to the way research study questions are defined. The unit of analysis in this study is the phenomenon

of single-parent associate degree nursing students' reports of the social supports that buffered their college-related stress and fostered their academic success, which represents a real-life phenomenon.

Five rationales were identified by Yin (2014) to justify a single over a multiple case study. The first rationale for selecting a single-case is the determination that the case is a critical one that might contribute to confirmation of the theory under investigation. A second rationale is the use of a case that is extreme or unusual. On the contrary, the third rationale is a case that is typical and representative of everyday circumstances. A fourth rationale, a revelatory case, provides an opportunity for empirical investigation of a previously inaccessible phenomenon. The fifth rationale for a single case study is the investigation of a phenomenon over time, also called a longitudinal case.

This case study is revelatory because this phenomenon has not been previously investigated. An approach such as this can yield rich information and report the lived experiences of single-parent nursing students, revealing aspects that heretofore have not been presented. A review of the research examining factors that enhanced academic success of nursing students yielded rich data, collected primarily through quantitative studies examining baccalaureate students (Hegge, et al, 1999; Montes-Berges & Augusto, 2007; O'Reilly-Knapp, 1994). Limited research exists on community college nursing students and the role of social support (Hopkins, 2005; Shelton, 2000) in their success.

### **Sampling Strategies**

A purposeful and convenience sample was used to collect data for the study. According to Creswell (2009), qualitative research requires a purposeful selection of the study setting and

an outline identifying criteria and strategies for participant recruitment. Researchers engaged in qualitative studies select participants that relate specifically to the phenomenon and research questions under investigation (Bryman, 2008). A purposeful sample was used because the selected individuals had experience with the central phenomenon being studied (Bryman, 2008; Creswell, 2009). The focus of this investigation was single-parent associate degree nursing students' reports of the social supports that buffered their college-related stress and fostered their academic success. The sample for this study was drawn from the population of associate degree nursing students who were single parents, over the age of 18, and who had completed the first year of the nursing program with an academic grade of 74 or higher. Second year nursing students were being purposefully selected because they had experienced success in their first year in the nursing program and were more likely to talk about their experiences.

This was also a sample of convenience. A convenience sample is one in which the researcher has a readily accessible sample in place (Bryman, 2008). The sample was drawn from Connecticut's state community college system. There are twelve community colleges in the state of which six have an established nursing program. The researcher is currently employed at one of the nursing programs; participants were not recruited from this school. Additionally, permission to recruit participants from one of the schools was denied. Therefore, the researcher obtained permission from the presidents of four of the six community college nursing programs in the state to conduct the study at their institutions and to distribute materials and recruit student volunteers (Appendix A). The schools selected were: Gateway Community College, Northwestern Connecticut Community College, Norwalk Community College, and Three Rivers Community College. All of the colleges have a diverse student body; however, the mix by percentage of age, race, or ethnicity varies.

### Description of the Colleges from which the Sample will be drawn

Table 2 depicts the number of students enrolled at each of the six Connecticut community colleges that have a nursing program, the geographic location of the colleges, and the total student enrollment at the colleges. Connecticut community college nursing programs are located in urban and suburban areas of the state and are reflective of small, mid-sized, and large municipalities. The total enrollment for all nursing programs was 556 students (Connecticut State Colleges and Universities, 2014).

Table 2

*Comparison of Connecticut Community College Nursing Program Enrollment to General Student Enrollment at Select Colleges: Fall Semester 2013*

Community College	General Student Enrollment	Nursing Student Enrollment	CT City/Town	Geographic Locale
Capital	4,168	139	Hartford	Central Urban
Gateway*	8,186	95	New Haven	Southwestern Urban
Naugatuck	7,294	113	Waterbury	Western Suburban
Northwestern*	1,549	32	Winsted	Northwestern Suburban
Norwalk*	6,556	81	Norwalk	Southwestern Urban
Three Rivers*	4,749	96	Norwich	Southeastern Suburban

*Note:* Colleges with asterisk (\*) are ones from which students were recruited.

Table 3 depicts the racial/ethnic makeup of the Connecticut community college nursing student population for the Fall 2013 semester, which is the most recent semester for which these data are available. Most Connecticut community college nursing programs enroll a significantly greater population of students who self-identify as White than students who self-identify with any other racial/ethnic group. This is consistent with the racial/ethnic composition of the

community college system as a whole (Connecticut Board of Regents of Higher Education, 2014). Capital, on the other hand, has a greater population of students who self-identify as Black/African-American. Northwestern and Three Rivers, respectively, serve proportionately the largest numbers of students who self-identify as White. None of the colleges reported having students who self-identified as American Indian or Alaska Native.

Table 3

*Percentage of Connecticut Community College Nursing Students by Race/Ethnicity: Fall Semester 2013*

Community College	Asian	Black/ African American	Hispanic/ Latino	Native Hawaiian or other Pacific Islander	White	Two or more races	Unknown or chose not to respond
Capital	4.3	18.0	18.0	–	46.7	3.6	9.4
Gateway*	7.4	12.6	16.8	1.0	49.5	7.4	5.3
Naugatuck	0.9	8.8	19.5	–	63.7	6.2	0.9
Northwestern*	3.1	3.1	6.3	–	81.3	–	6.3
Norwalk*	3.7	11.1	28.4	–	49.4	1.2	6.2
Three Rivers*	4.2	5.2	5.2	–	78.1	5.2	2.0

*Note:* Colleges with asterisk (\*) are ones from which students were recruited. A dash (–) indicates that no students reported that race/ethnicity.

The average age of nursing students enrolled in the six community college nursing programs is 31 (L. Perfetto, personal communication, July 25, 2014). This is consistent with data reported by the NLN (2013) which indicated that 50% of students enrolled in associate degree nursing programs in the U.S. are over the age of 30. Connecticut's community colleges' general student population includes an almost equal percentage of students aged over and under 25 years. Capital, however, has a greater percentage of students aged 24 and under (Connecticut Board of Regents of Higher Education, 2014). Table 4 depicts the average age of students enrolled at each of the 6 community colleges that offer a nursing program.

Table 4

*Average Age of Students Attending Connecticut Community College Nursing Programs: Fall Semester 2013*

Community College	Nursing Student Average Age
Capital	31.87
Gateway*	32.26
Naugatuck	29.45
Northwestern*	35.22
Norwalk*	29.37
Three Rivers*	30.50

*Note:* Colleges with asterisk (\*) are ones from which students were recruited.

Table 5 depicts the percentages of Connecticut community college students disaggregated by gender for the general college student population and the nursing population at the six community colleges with nursing programs, for the Fall 2013 semester. Connecticut's community college nursing programs enroll a larger number of female students than male students when compared with the general college student population. Capital serves the highest percentage of female students, at 71%, whereas Naugatuck enrolls 58% female students.

Table 5

*Comparison of Percentage of Connecticut Community College Nursing Students by Gender to General College Student Population at Select Colleges: Fall Semester 2013*

Community College	College Students Male	College Students Female	Nursing Students Male	Nursing Students Female
Capital	29	71	19.4	80.6
Gateway*	40	60	23.2	76.8
Naugatuck	42	58	15.0	85.0
Northwestern*	35	65	15.6	84.4
Norwalk*	41	59	11.1	88.9
Three Rivers*	41	59	12.5	87.5

*Note:* Colleges with asterisk (\*) are ones from which students were recruited.

Over 50% of students enrolled in Connecticut's community colleges received some form of financial aid, including Pell Grants and student loans. Capital, at 70%, had the highest percentage of students receiving financial aid and Norwalk, with 44%, had the lowest percentage of students receiving financial aid. The majority of financial aid awarded to community college students is in the form of Pell Grants (Connecticut Board of Regents of Higher Education, 2014). Table 6 depicts the percentage of Connecticut community college students receiving financial aid, and specifically, Pell Grants and student loans at the six community colleges that offer a nursing program.

Table 6

*Percentage of Connecticut Community College Students Receiving Financial Aid, Pell Grants, and Student Loans at Select Colleges: 2013-2014 Academic Year*

Community College	Percentage Receiving		
	Financial Aid	Pell Grant	Student Loans
Capital	70	54	6
Gateway*	58	46	4
Naugatuck	48	39	6
Northwestern*	46	36	2
Norwalk*	44	34	–
Three Rivers*	58	43	7

*Note:* Colleges with asterisk (\*) are ones from which students were recruited.

### **Data Collection Activities**

This section contains a description of the methods that were used to collect data. It begins with a description of the instruments, followed by the procedures for recruiting participants, and concludes with a discussion of the data analysis.

### **Instruments**

Two methods were used to collect information from study participants during the same session: a paper-and-pencil survey and an in-person interview. The researcher developed the



instruments under the guidance of her research advisor because none were available that fit the purpose of the study. The survey was administered first, in person, immediately followed by the interview. The development and description of each instrument is presented next.

**Description of the survey.** The paper-and-pencil survey (Appendix B) contained three sections. Section I had seven items that gathered basic demographic information about the respondents. Section II was developed to elicit students' perceptions of the stress they might have experienced related to school and being a nursing student. The five items in this section are statements about school related stress. Respondents were asked to place a check in the box that best reflected the type of stress they experienced and a rating of how often they experienced that stress, *never, almost never, some of the time, most of the time, almost always, or always*. Section III was constructed based on House's (1981) model of social support to gain an understanding of single-parent nursing students' reports of the social supports that buffered their college-related stress and fostered their academic success. The items in this section reflected the four types of support (emotional, appraisal, informational, and instrumental), with examples of each, and ten sources of support (significant other, family member(s), friend(s), neighbor(s), work supervisor, co-worker(s), professor(s), classmate(s), clergy, and other(s)). Respondents were asked to place a check in the box for any person who provided them with help and the type of help they provided.

**Description of the interview guide.** The semi-structured interview guide (Appendix B) was designed based on Flanagan's (1954) Critical Incident Technique (CIT). The CIT is "essentially a procedure for gathering certain important facts concerning behavior in defined situations" (Flanagan, 1954, p. 335). Moreover, Flanagan explained:

The essence of the technique is that only simple types of judgments are required of the observer, reports from only qualified observers are included, and all observations are evaluated by the observer in terms of agreed upon statement of the purpose of the activity. (p. 335)

The topic for this semi-structured interview was single-parent nursing students' reports of the social supports that buffered their college-related stress and fostered their academic success. Using the CIT (Flanagan, 1954) format, the interview began with the researcher providing a description of the purpose of the study. Each qualified individual was asked to recall and describe a situation in which they received some type of help or support that helped them to succeed in the nursing program (a critical incident). The interviewee was then prompted to describe:

1. What led up to the situation;
2. Who provided the help;
3. What kind of help they received;
4. Why the help was effective.

Additionally, the interviewee was asked to elaborate on the following:

1. What the person did that was especially effective;
2. What was the outcome of the help they received;
3. What more effective help might have been offered.

In concluding the interview, the interviewee was allowed the opportunity to provide any additional information they felt contributed to their success that had not been addressed in their responses to the questions posed by the researcher. Given the nature of the phenomenon under study, this researcher suggests that CIT (Flanagan, 1954) was an appropriate approach to elicit

participants' reports of the types and sources of social supports. Table 7 illustrates the relationship between the types of social support (House, 1981) and the interview guide and survey items.

Table 7

*Relationship of the In-Person Interview Questions and Social Support Survey Items to the Types of Social Support (House, 1981)*

Type	Interview Items	Social Support Survey Items
Emotional Support	1, 2, 3, 4, 5, 6	1a, 1b, 1c, 1d, 1e, 1f, 1g, 1h, 1i, 1j
Informational Support	1, 2, 3, 4, 5, 6	2a, 2b, 2c, 2d, 2e, 2f, 2g, 2h, 2i, 2j
Appraisal Support	1, 2, 3, 4, 5, 6	3a, 3b, 3c, 3d, 3e, 3f, 3g, 3h, 3i, 3j
Instrumental Support	1, 2, 3, 4, 5, 6	4a, 4b, 4c, 4d, 4e, 4f, 4g, 4h, 4i, 4j

**Pilot of the instruments.** Under the direction of her advisor, the researcher conducted a small-scale pilot of the survey and interview guide to determine its feasibility and effectiveness for use in this study. The participants were three students who were recent graduates of a Connecticut community college's nursing program who met the demographic criteria for participation in the study. It took each participant approximately 10 minutes to complete the survey. No modifications were made based on outcome of the survey pilot administration.

The semi-structured pilot interviews were conducted immediately following completion of the survey. The interviews, lasting approximately 45 minutes each, were digitally recorded, and word-for-word transcripts of the recordings were made. During the individual interviews, the participants were asked to provide feedback regarding any difficulties they experienced when responding to the questions. Based on their comments, no changes were made to the instrument as designed.

**Validity and reliability of the instruments.** The paper-and-pencil survey and the interview guide were created exclusively for use in this study. As these instruments were used for the first time, no data on their reliability and validity exists.

### **Recruitment of Study Participants**

As previously described, purposeful sampling was the method used to recruit students. Upon approval of the study by the University of Hartford's Human Subjects Committee and permission from the Presidents of four of the six state's community colleges with nursing programs to conduct the study at their institutions, the researcher began recruitment.

First, the researcher contacted the Nursing Division Director at each of the four community colleges to arrange a time to visit the current senior-level nursing courses to distribute a recruitment packet to students in the class. The recruitment packet (Appendix C) consisted of: an informational flyer detailing the purpose of the study and how to contact the researcher, a contact form that students who are willing to participate in the study could give to the researcher at the end of the visit, and an informed consent form (Appendix D). Second, informational flyers (Appendix C) describing the purpose of the study and how to contact the researcher were posted in areas most frequented by nursing students at each college campus. Third, a series of emails (Appendix E) was sent by the participating colleges to all students enrolled in the senior-level nursing courses. The email included an invitation describing the purpose of the study and how to contact the researcher and the informed consent form (Appendix D) as an attachment. Two follow-up emails were sent one week apart. Finally, three notices (Appendix F) regarding the study were posted by the institution to participating colleges' Facebook or Twitter accounts.

The selection criteria for participants included: single-parent students (male or female), over the age of 18, who had completed the first year of the nursing program with an academic grade of 74 or higher. The researcher contacted, either by phone or email, those students who responded to the invitation to participate in the study. As part of this contact, the researcher verified the student's eligibility to participate in the study, provided any additional information requested, and set a mutually agreed upon date, time, and location to administer the survey and conduct the interview. A follow-up email was sent to confirm the meeting date, time, and location. Students were chosen to participate on a first come, first served basis, with a goal of recruiting 12 single-parent nursing students, with at least 2 participants from each of the four nursing programs. Table 8 summarizes the recruitment timeline and strategy.

Table 8

*Summary of Recruitment Timeline and Strategy*

Timeline	Contact	Strategy
Day 1 – Week One	1	Contacted Nursing Division Director to set time to visit senior level classes to announce study and explain purpose. Attended senior level classes. Distributed informational flyers around the campus. Sent follow-up email and Facebook/Twitter messages inviting participation in the study; a copy of the informed consent was attached.
Day 7 – Week Two	2	Sent second email and Facebook/Twitter message containing an invitation to participate in the study.
Day 14 – Week Three	3	Sent third and final email, Facebook/Twitter message inviting students to participate, and announcing the study closing date.

### **Survey and Interview Procedures**

Students who volunteered to participate in the study met the researcher at the mutually agreed upon date, time, and place. The location was a private space on the campus of the student

volunteer. The administration of the survey and completion of the semi-structured interview took approximately 55 minutes.

According to Lichtman (2013), the initial phase of the interview process should be devoted to developing rapport and gaining the participant's trust. This enhances the individual's ability to disclose their thoughts and feelings on the topic. Each individual session began with introductions and a review of the purpose of the study. The researcher confirmed confidentiality of the information shared and asked whether the interviewee had any questions prior to beginning the survey.

Following the introduction, each interviewee was given a copy of the survey to complete. The survey took approximately 10 minutes to complete. Upon completion of the survey, each interviewee was handed a copy of the interview questions. Each interview lasted approximately 45 minutes and was digitally recorded.

Lichtman (2013) explained that the semi-structured or guided interview "involves developing a general set of questions and format that you follow and use with all participants" (p. 191). The use of open-ended questions enables participants to answer the questions in their own terms and allows for the participant's level of knowledge and understanding of the issue to be extracted (Bryman, 2008). Furthermore, Lichtman suggested that a researcher who uses a questioning strategy involving elaboration and active listening techniques enables the participant "to say more, to clarify and elucidate his or her responses, and allows for additional input by the participant" (p. 200).

The researcher conducted the interview using the same format for each interviewee to ensure credibility of the data collection method. Using the interview guide (Appendix B), the researcher asked each participant to describe a situation in which they received some type of help

or support that contributed to their academic success in the nursing program. Next, the researcher asked the interviewee to recall who provided support and to describe the support received. Finally, the interviewee was asked to describe why the support was particularly helpful, the outcome of the support received, and what more effective support might have been offered. At the conclusion of the interview, the interviewee was asked to share any additional thoughts regarding what they felt contributed to their academic success.

Following the completion of the interview process, each interviewee was provided with a thank you note, which included the counseling office number at their respective college should they experience any stress as a result of participating. All study volunteers received a \$20.00 gift card for their participation. All interviews were individually transcribed verbatim from the digital recording in preparation for data analysis.

### **Data Analysis Procedures**

The next phase of the study included the analysis and interpretation of the data from the survey and the in-person interviews. Completed surveys, interview notes, and interview transcripts formed the data set. The types and sources of social support described by House (1981) served as the template for data analysis and coding. The survey was analyzed first, followed by an analysis of the interview data.

#### **Analysis of the Survey Data**

Yin (2014) suggested “data analysis consists of examining, categorizing, testing, or otherwise recombining evidence to produce empirically based findings” (p. 133). In this study, data analysis began with an assignment of a code (P1 – P11) to each participant to protect confidentiality, followed by a review of each survey to ensure completeness.

A descriptive analysis was performed using the responses from the Section I demographic items. Results of the demographic responses were reported and presented in tables. Section II of the survey was scored by tallying the frequency of responses for how often each type of stress was experienced. The results were reported in narrative form, accompanied by a table. Section III of the survey was scored by tallying the frequency of the four types of social support reported and the frequency of the ten sources of support. The results were reported in narrative form, accompanied by a table.

### **Analysis of the Interview Data**

Creswell's (2013) suggestions for working with qualitative data were used on the interview transcript data in this study. Creswell recommended (a) preparing and organizing the data for analysis, (b) reducing the data into themes through a process of coding and condensing the codes, and (c) representing and summarizing the data in figures, tables, or discussions. The researcher created a verbatim transcript from the digital recordings of each participant's interview in a computerized word-processing document. Following Creswell's recommendations, the transcripts had wide margins, allowing for room between the interviewer's and the interviewee's comments to highlight questions or comments raised by the interviewer. Each transcript was assigned the same code as the participant's survey to allow for ease of reporting data and to protect participant confidentiality. The digital recordings and written transcripts were catalogued, filed, and stored in the researcher's office for the duration of the study.

The researcher read and reread each transcript to gain an overall sense of what the interviewee conveyed, followed by a hand analysis to create initial themes and impressions. In the next step in the analysis, the researcher reviewed each individual transcript and identified



units of meaning (e.g., words, phrases) that were coded to reflect the dimensions of the conceptual framework (i.e., types of support), the persons who are identified as providing the support (i.e., sources of support), and the importance of the support as perceived by the interviewee. Additional codes were created as they emerged through the analysis of the data with redundant and overlapping codes being eliminated. Yin (2014) described this form of analysis as pattern matching, comparing findings to a previously determined theoretical framework. In this study, House's (1981) model of social support served as the template for pattern comparison of the data.

Next, data displays were created from the coded materials and similar responses were clustered across interviewees, corresponding to the dimensions of the conceptual framework: the type of support, and the sources of the support. The frequency of a word or a phrase was tallied across all interviewees to determine the strength of the idea. This process assisted the researcher in determining the importance of the type and source of support. Qualitative findings were generated when 5 or more of the interviewees identified particular types or sources of support as buffering college-related stress and fostering academic success. The researcher conferred with her research advisor during all phases of the data analysis and coding to ensure accuracy and enhance validity of the analysis (Creswell, 2009).

### **Integration of the Survey and Interview Data to Answer the Research Questions**

Table 9 illustrates the relationship between the research questions and the items included in the survey and interview guide.

Table 9

*Data-Source Chart: Relationship between Research Questions and Data Sources*

Research Questions	Survey	Interview
1. What are single-parent associate degree nursing students' reports of the types and frequency of college-related stress?	1-5	1-6
2. What are single-parent associate degree nursing students' reports of the types and sources of emotional supports that buffered their college-related stress and fostered their academic success?	1-10 a	1-6
3. What are single-parent associate degree nursing students' reports of the types and sources of instrumental supports that buffered their college-related stress and fostered their academic success?	1-10 b	1-6
4. What are single-parent associate degree nursing students' reports of the types and sources of informational supports that buffered their college-related stress and fostered their academic success?	1-10 c	1-6
5. What are single-parent associate degree nursing students' reports of the types and sources of appraisal supports that buffered their college-related stress and fostered their academic success?	1-10 d	1-6

### **Validity of the Research Design**

In order to establish the quality of case study research, Yin (2014) suggested application of four specific tests to ensure rigor: (a) construct validity, (b) internal validity, (c) external validity, and (d) reliability. Moreover, Yin presented several methods for applying each of these tests to case study research. Each of the four tests will be explained, followed by a description of their application in this study.

#### **Construct Validity**

In case study research, construct validity requires the identification of “correct operational measures for the concept being studied” (Yin, 2014, p. 46). Yin (2014) recommended employing a three-pronged approach when conducting case study research: (a) using multiple sources of evidence, (b) establishing a chain of evidence, and (c) having key informants review the draft case study report.

The first method, using various sources of evidence, or triangulation, strengthens case study data collection (Yin, 2014). As defined by Bryman (2008), triangulation is “the use of more than one method or source of data in the study of a social phenomenon so that findings can be cross-checked” (p. 700). In this study, the sources of evidence were a survey and an interview. Multiple participants were used to gather reports of the social supports that buffered their college-related stress and fostered academic success of the participants, single-parent nursing students in an associate degree nursing program. The documentation of corroborating findings and the development of themes, created from the triangulation of numerous sources of participant information, enhances the validity of case study research (Creswell, 2009). Specific information about data collection procedures are discussed in the Data Collection section of this chapter.

The second method used to strengthen construct validity is establishing a chain of evidence “to allow an external observer—in this situation the reader of the case study—to follow the derivation of any evidence from the initial research questions to ultimate case study conclusions” (Yin, 2014, p. 127). In this study, questions in Section III of the survey were based on the types and sources of social support (House, 1981). The interview guide was designed to elicit participants’ reports of the social supports that buffered their college-related stress and fostered their academic success. The completed surveys, digital recordings of in-person interviews, word-for-word transcripts, and any field notes constituted the case study database. House’s (1981) conceptual model served as the lens through which the data was analyzed. The analysis led to the generation of findings, conclusions, and recommendations.

The third procedure, having a draft of the case study report reviewed by peers and key informants and participants in the case enhances the overall quality of the study (Yin, 2014). A

review of the draft report can allow informants and participants the opportunity to recall new information that may have been omitted from the initial data collection, yielding additional evidence for the study (Yin, 2014, p. 199). For purposes of this study, the researcher provided participants with the opportunity to review transcripts of their interview. Additionally, Creswell (2013) suggested that validity is further strengthened by implementation of a peer review process. The researchers' advisor served as the peer reviewer for all aspects of this study.

### **Internal Validity**

The second test for ensuring rigor and credibility in case study research is internal validity (Yin, 2014). Yin (2014) suggested that internal validity is primarily a concern in explanatory case studies when a researcher attempts to show that one event leads to another event and this reasoning generally is inapplicable to descriptive or exploratory case studies such as this one. Nevertheless, according to Yin, internal validity could be extended to the broader issue of making inferences based on the evidence when conducting case study research. Concerns about the accuracy of inferences can be addressed and internal validity strengthened by using the technique of pattern-matching logic during data analysis (Yin, 2014). As noted earlier, House's (1981) model of social support was used to frame and characterize single-parent nursing students' reports of the social supports that buffered their college-related stress and fostered their academic success.

### **External Validity**

According to Yin (2014), external validity is the third test of rigor indicating "whether a study's findings are generalizable beyond the immediate study" (p. 48). This test can be a limitation when conducting case study research because the results from a single case study do not provide a basis for generalizing findings to other individuals, organizations, settings, or

times. Yin (2014) stressed case studies are predicated on analytic generalization, “which is based on either (a) corroborating, modifying, rejecting, or otherwise advancing theoretical concepts that the researcher referenced in designing the case study, or (b) new concepts that arose upon the completion of the case study” (p. 41). The findings from this study were generalized to House’s (1981) model of social support, which was described in Chapter 1, and to the related literature. The researcher endeavored to provide sufficient discussion so readers of the dissertation could determine whether the findings are relevant to their specific settings and situations.

### **Reliability**

Reliability, the final test of rigor, signifies that “the operations of a study—such as the data collection procedures—can be repeated, with the same results” (Yin, 2014, p. 46). Yin (2014) recommended two specific strategies to enhance reliability and minimize biases and errors in case study research: (a) use of a case study protocol and (b) development of a case study database. Moreover, providing detailed documentation of the exact procedures followed in this study would allow this study to be replicated by another researcher.

According to Yin (2014), the components of a case study protocol should include the following four elements: (a) an overview of the research project, including theoretical framework and related literature; (b) a detailed description of data collection procedures; (c) the case study questions; and (d) a guide for a case study report. This dissertation contains each of these elements. Chapter 1 provides a description of the conceptual framework (House, 1981). Chapter 2 contains a review of related literature. Chapter 3 includes the research questions, a description of the research design, a discussion of instruments used, data collection procedures, data analysis procedures, and how the data was reported. Chapter 4 reports the findings. A summary of the

findings and conclusions are reported in Chapter 5. This dissertation contains the replicable elements for case study research suggested by Yin (2014). Table 10 summarizes the study timelines, activities, and procedures.

Table 10

*Case Study Protocol: Summary of Study Timelines, Activities, and Procedures*

Timeline	Activity	Description
September 2013-May 2014	Wrote chapters 1-3	Met with advisor regularly to develop proposal
June 2014	Prepared survey and interview protocols	Met with advisor weekly for feedback sessions
July 2014	Conducted survey and interview pilot	Completed pilot study
October 2014	Presented proposal to the Dissertation Examining Committee	Completed oral defense of the proposal
November 2014	Submitted proposal to University Human Subjects Committee	Met with advisor weekly to confer about document filing
January - March 2015	Attended senior level nursing classes to announce study, sent recruitment e-mails, administered survey and conducted interviews with participants	Met with advisor biweekly to confer
March - July 2015	Analyzed survey and interview data Developed Chapter 4	Met with advisor regularly to develop review and verify analyses, and determine validity of finding
July - August 2015	Developed dissertation Chapter 5	Met with advisor regularly to refine conclusions and recommendations

August 2015

Presented dissertation to  
Doctoral Examining  
CommitteeMet with advisor regularly to  
analyze and confirm  
dissertation defense plans

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A second strategy for increasing reliability of the case study design recommended by Yin (2014) is the development of a case study database. A case study database enables the researcher to organize and document data collected during the investigation, which could be made available for independent secondary analysis. According to Yin, the database can consist of digital audio recordings, field notes, case study documents, tabular materials (e.g., survey data), and narratives compiled or composed during the course of the study. This database can allow others to retrieve the collected data for an independent review at a later date. In this study, the researcher created a database containing: (a) qualitative and quantitative data from the self-report survey, (b) digital recordings and word-for-word transcripts of individual student interviews, and (c) field notes.

In sum, a case study design was selected to answer the research questions. Yin's (2014) procedures for ensuring quality of the case study design and credibility of the findings were followed as outlined above and as described in the next section.

### **Protection of Human Subjects**

The human subjects review process was completed as required by the University of Hartford Human Subjects Committee and the Human Subjects Committees of the four state community colleges selected for this study. Upon approval of the University of Hartford's Human Subjects Committee and with permission from the Presidents of the four state community colleges with nursing programs, the researcher contacted the Nursing Division Director at each of the four community colleges to arrange a time to visit the current senior level nursing courses to distribute a recruitment packet to students in the class. The classroom visit

script and the recruitment packet are in Appendix C. As outlined earlier, the recruitment packet consisted of the following: an informational flyer detailing the purpose of the study and how to contact the researcher, a contact form that students who are willing to participate could give to the researcher at the end of the visit, and the informed consent form (Appendix D). Second, informational flyers (Appendix C) describing the purpose of the study and how to contact the researcher were posted in areas most frequented by nursing students at each college campus. Third, a series of emails (Appendix E) was sent by the participating colleges to all students enrolled in the senior level nursing courses. The email included an invitation describing the purpose of the study and how to contact the researcher and the informed consent form (Appendix D) as an attachment. Two follow-up emails were sent one week apart. Finally, three notices (Appendix F) regarding the study were posted by the institution to participating colleges' Facebook or Twitter accounts.

The researcher contacted potential participants who responded to the invitation to confirm their interest and eligibility based on the selection criteria, advise them of the specifics regarding the interview process, provide information related to obtaining informed consent, and thank them for volunteering. Individuals were informed that participation in the study was voluntary, with the option to withdraw at any time. The survey was administered and the interview conducted at a mutually agreed upon time, date, and location, taking approximately 55 minutes to complete.

Creswell (2009) stressed the importance of protecting the identity of participants or respondents when gathering, analyzing, and reporting data. The confidentiality of the participants was maintained throughout the study. Materials (e.g., survey and transcripts from interviews) were not coded in any identifiable way. All study participants and schools were



assigned pseudonyms. Data collected was reported in aggregate. All study-related electronic data was secured in a password-protected file in the researcher's office. Paper data was locked in the researcher's personal file cabinet.

The data collected during the course of this investigation will be maintained for a period of five years from completion of the study allowing for data verification and confirmation of results and analysis (American Psychological Association, 2010). After five years, the researcher will destroy all data and analysis (digital and paper) created during this study.

### **Limitations of the Study**

Creswell (2008) defined limitations as “potential weaknesses or problems with the study that are identified by the researcher” (p. 207). The researcher identified six potential limitations of conducting this study. First, the sample was limited to 11 participants. The sample size reflected a small representation of single-parent, community college senior nursing students from a single state. Thus, only the experiences of single-parent nursing students in this community college nursing program are reflected in the results of this study. The findings may not be generalized to a greater population.

Second, since this study took place in one geographic area of the United States, geography also limited generalizability of results to students enrolled in associate degree nursing programs in other geographic regions.

Third, as the researcher is a nursing professor in the chosen state community college system, researcher bias may be a limitation of this study.

Fourth, due to the lack of an available instrument designed to investigate the phenomenon under investigation, the instruments for this exploratory case study were developed by the

researcher and her advisor. As the instruments are being used for the first time, validity has not been established, which could constitute a limitation of this study.

Fifth, the volunteer nature of the sample of participants is a limitation. It is possible that the students who agreed to participate did so out of a sense of perceived pressure in spite of the voluntary condition of the study. It is also possible that the volunteers may differ in important ways from students who choose not to volunteer.

Finally, the findings will be generalized only to the specific phenomenon under study, not to any population of students. Ultimately, the extent to which the findings of this study generalize to other settings will have to be determined by future research.

### **Chapter Summary**

This exploratory case study described single-parent associate degree nursing students' reports of the social supports that buffered their college-related stress and fostered their academic success. The exploratory case study design was chosen based on the phenomenon under study.

The data collected in this study was examined through the lens of House's (1981) model of social support. This chapter included a restatement the problem to be studied and a detailed description of the research design and methodology, data collection activities, population sampling strategies, data analysis, validity of the research design, ethical considerations associated with protection of human subjects, and study limitations. Chapter 4 will present the findings.

## CHAPTER 4: RESULTS

### Introduction

The purpose of this chapter is to report the results of this case study of single-parent students enrolled in associate degree nursing programs reports of the social supports (House, 1981) that buffered their college-related stress and fostered their academic success. The eleven participants represented four of the six Connecticut community college nursing programs. The chapter begins with a brief overview of the study methodology followed by descriptions of the study participants. The remainder of the chapter is organized around the types of social support and the research questions.

### Overview of Study Methodology

The phenomenon under investigation in this case study was single-parent students enrolled in associate degree nursing programs reports of the social supports that buffered their college-related stress and fostered their academic success. The participants ( $N = 11$ ) were students who self-identified as being a single-parent and who were attending one of four of the six Connecticut community college nursing programs at the time of this study. House's (1981) conceptual model of social support served as the lens through which the data was examined. According to House, social support is defined as "a flow of emotional concern, instrumental aid, information, and/or appraisal between people" (p. 26). The concept of social support addresses the question: "*Who gives what to whom regarding which problems?*" (p. 22). House's model defines four types of social support: (a) emotional, (b) instrumental, (c) appraisal, and (d) informational. Additionally, House learned that social supports could mitigate or buffer the negative effects that stress can have on health. A two-method approach for data collection, a

paper-and-pencil survey and an in-person interview, was used to collect data to answer the research questions.

The researcher recruited participants through a purposeful, convenience sampling method that began with a classroom visitation by the researcher to senior-level nursing classes at each of the four colleges, including the dissemination of a recruitment packet and posting of informational flyers on each college campus. Additionally, each college sent a series of email invitations to senior-level students enrolled in the nursing program. Follow-up phone calls and email correspondence were used to schedule the in-person sessions for the administration of the survey and interview. In total, eleven participants volunteered and completed the survey and interview. Demographic information about the participants is presented in a later section.

### **Survey**

Each of the participants ( $N = 11$ ) completed the survey. The survey (Appendix B), as explained in Chapter 3, included three sections. The first section, gathered basic demographic information about each participant. Responses were tallied across participants. Data for each demographic characteristic was presented in the form of a table.

The second section of the survey, which focused on stressors associated with being a college student, was comprised of five statements about school related stress. The participant was required to select a number on a six-point scale that best reflected how often they experienced the type of stress described by each statement. Participants' responses were analyzed using the procedures outlined in Chapter 3. Since this was a descriptive study, common descriptive statistics were calculated, including frequencies, means, standard deviations, and percentages. Displays of the data, in the form of tables, were created. Responses to items 1-5 were treated as frequency numerical data and were entered into an Excel spreadsheet

for analysis. Each row of the spreadsheet represented a participant and was coded with a number as described in Chapter 3. The columns represented the items and were numbered accordingly. Item responses were entered as numbers. Frequencies per question item were computed based on Likert score ratings.

The last section of the survey instrument was comprised of items that addressed four types and ten sources of social support. The items were arranged in a table based on House's (1981) conceptual model of social support (p. 23). The types of social support, emotional, appraisal, informational, and instrumental were listed horizontally at the top of the table. The sources of social support, presented vertically, included significant other, family member(s), friend(s), neighbor(s), work supervisor, co-worker(s), professor(s), classmate(s), clergy, and other. Participants were required to place an "X" in the box that best reflected the types and sources of social support that they have received. A tally of participants' responses was entered into an Excel spreadsheet. Each column of the spreadsheet represented the type of support and each row represented the source of support. The frequencies of selections of type and source of support by participant were entered as numbers from 1-11 in the spreadsheet. As described in Chapter 3, the results of the survey are presented in narrative and tabular forms to describe each section and as a whole.

### **Interview**

The second method of data collection was a semi-structured in-person interview. The focus of the interview was an exploration of single-parent nursing students' reports of the social supports that buffered their college-related stress and fostered their academic success. The questions in the semi-structured interview guide addressed House's four dimensions of social support. As described in Chapter 3, the format and questions for this semi-structured interview

protocol were designed based on Flanagan's (1954) Critical Incident Technique (CIT). According to Flanagan, the CIT method is "essentially a procedure for gathering certain important facts concerning behavior in defined situations" (p. 335).

Using the CIT (Flanagan, 1954) format, the interview began with the researcher providing a description of the purpose of the study. Each respondent was asked to recall and describe a situation in which they received some type of help or support that helped them to succeed in the nursing program (a critical incident). Then, the respondent was asked to describe: (a) what led up to the situation, (b) who provided the help, (c) what kind of help they received and (d) why the help was effective. Additionally, the respondent was asked to elaborate on what more effective help might have been offered. Given the nature of the phenomenon under study, Flanagan's (1954) CIT method for the interview protocol was an appropriate approach to elicit participants' reports of the social supports that buffered their college-related stress and fostered their academic success.

### **Sample Description**

The sample for this study was comprised of 11 associate degree nursing students who self-identified as being a single parent. All of the participants were female. The majority identified themselves as White ( $n = 8$ ) and between the ages of 23 and 34 years old ( $n = 6$ ). Ten of the participants disclosed that grants and scholarships were the primary source used to finance their education. Table 11 contains the demographic information about the study sample.

Table 11

*Participant (N = 11) Demographic Characteristics*

Characteristics	<i>n</i>
<b>College Attended</b>	
Gateway Community College	3
Northwestern Community College	2
Norwalk Community College	3
Three Rivers Community College	3
<b>Age</b>	
23 - 34 years	5
35 - 54 years	6
<b>Racial/Ethnic Identification</b>	
Hispanic	3
White	8
<b>Number of Children</b>	
1	3
2	2
3	4
4	2
<b>Number of Hours Worked per Week</b>	
None	2
8 - 16 hours/week	3
24 - 32 hours/ week	5
40 or more hours/week	1
<b>Sources of Income</b>	
Own Income/Savings	8
Parent Income/Savings	1
Other Family Member Income/Savings	1
Employer Contribution	1
Grants and Scholarships	10
Student Loans	1
Public Assistance	1

## Results

This section contains the results of the analyses of the survey and in-person interview data. The emphasis is on participants' reports of the type and sources of social support perceived to help to buffer their college-related stress and to foster their academic success. For each

research question, the results are organized by the types and frequency of college-related stress, type of social support (emotional, appraisal, informational, and instrumental), and what drives continued persistence towards academic success. Within each of these subsections, data from the surveys and the in-person interviews are presented in a table and described in a narrative. Major findings are reported whenever five or more of the participants reported that they experienced stress or perceived support. Finally, an integrated data summary is presented.

**Research Question 1: What are single-parent associate degree nursing students' reports of the types and frequency of college-related stress?**

Selye (1985) defined stress as “the nonspecific responses of the body to any demand, whether it is caused by, or results in, pleasant or unpleasant conditions” (p. 9). Moreover, stress not only encompasses environmental demands, but also involves the individual’s appraisal of the situation (Lazarus & Folkman, 1984). That is, a situation perceived as stressful will be stressful. As stated in Chapter 2, the literature noted that community college students typically confront varied stressors as they attempt to balance the demands of their academic role with personal, family, work, and financial obligations (Miller et al., 2005). Furthermore, female students with higher perceived role demands had more role stress and role strain (Home, 1997). This was especially true for female nursing students with lower incomes and those with young children (Gigliotti, 2004; Home, 1997; Home & Hinds, 2000).

**Survey results for Research Question 1.** Response means for the stress items ranged from a high of 5.00 ( $SD = 0.85$ ) for item 4, “*I experience stress from balancing coursework with*



*personal responsibilities*” to a low of 4.09 ( $SD = 0.90$ ) for item 1, “*I experience stress from being a college student.*” Table 12 displays the mean, standard deviation, frequency, and percentage for participants’ reports of the frequency with which they experienced stress related to each stressor.

Table 12

*Participants’ Responses to Survey Items*

I experience stress from...	<i>M</i>	<i>SD</i>	Never	Almost Never	Some of the Time	Most of the Time	Almost Always	Always
			<i>n</i> %	<i>n</i> %	<i>n</i> %	<i>n</i> %	<i>n</i> %	<i>n</i> %
1. being a college student	4.09	0.90	– –	– –	3 27.00	5 46.00	2 18.00	1 9.00
2. day-to-day performance of course tasks	4.27	0.86	– –	– –	2 18.00	5 46.00	3 27.00	1 9.00
3. balancing coursework with self-care	4.82	1.34	1 9.00	– –	– –	1 9.00	6 55.00	3 27.00
4. balancing coursework with personal responsibilities	5.00	0.85	– –	– –	1 9.00	1 9.00	6 55.00	3 27.00
5. daily hassles	4.91	0.91	– –	– –	1 9.00	2 18.00	5 46.00	3 27.00

*Note.* A dash indicates that the participants did not provide an example of that source.

**Survey findings for Research Question 1.** The analysis of the participants’ ( $N = 11$ ) responses to the survey items that assessed the degree to which participants experienced stress related to school and being a nursing student led to the following findings.

Finding S1.1: On the survey, all participants ( $N = 11$ ) reported that they experienced stress from being a college student *some of the time* or more often.

Finding S1.2: On the survey, all participants ( $N = 11$ ) reported that they experienced stress from day to day performance of course tasks *some of the time* or more often.

Finding S1.3: On the survey, ten participants ( $N = 11$ ) reported that they experienced stress from balancing coursework with self-care *some of the time* or more often.

Finding S1.4: On the survey, all participants ( $N = 11$ ) reported that they experienced stress from balancing coursework with personal responsibilities *some of the time* or more often.

Finding S1.5: On the survey, all participants ( $N = 11$ ) reported that they experienced stress from daily hassles *some of the time* or more often.

**Interview results for Research Question 1.** During the semi-structured, in-person interviews, all of the participants ( $N = 11$ ) described instances in which they experienced college-related stress. Table 13 displays participant-by-participant reports of college-related stressors experienced as described in the interview.

Table 13

*In-Person Interviews: Participant-by-Participant (N = 11) Reports of College Related Stress Indicators*

College Related Stress Indicators	P1	P2	P3	P4	P5	P6	P7	P8	P9	P10	P11
Being a college student	X	X	X	X	X	X	X	X	X	X	X
Day-to-day performance of tasks related to my courses	X	X	X	X	X	–	X	X	X	X	X
Trying to balance coursework with my self-care	X	X	X	X	–	X	X	X	X	X	–
Trying to balance coursework with personal responsibilities	X	X	X	X	X	X	X	X	X	X	X
Daily hassles	X	X	–	X	–	–	–	–	–	–	–

*Note:* A dash indicates that the participants did not provide an example of that source.

All of the participants ( $N = 11$ ) talked about how they experienced stress related to being a college student. During the interviews, each individual reported trying to balance coursework with personal responsibilities (e.g., job, childcare) as the most frequently experienced source of college-related stress. Concerning the demands of balancing coursework with personal responsibilities, the majority of participants ( $n = 9$ ) reported that they worked at least 8 hours per week while enrolled in the nursing program to meet their financial obligations. With the additional costs required for school, especially textbooks, participants reported that they experienced difficulty meeting household financial demands. As Participant-1 shared:

But it's hard, even paying bills. I still have a \$700.00 [electric] bill that I owe. I am behind. I try to keep up with that, and pay for school books and things like that. It gets

very stressful and you want to quit sometimes, but I don't want to. . . . Not being able to pay for books and to try to go weeks without books is pretty hard.

For participants with children under the age of three, the costs for daycare created an additional financial burden. Participant-5 reflected on the struggles she encountered until her child was eligible for preschool:

I needed financial aid. . . . Child care was a struggle . . . because I had to pay for . . . it wasn't preschool yet so, since it was daycare, I had to pay for half of the finances [*sic*]. They [state of Connecticut] paid for half the week. I had to come up with \$100.00 a week for child care. . . . I was actually in the welfare system, trying to get food stamps for my son and I. Coming up with \$100.00 a week for daycare was incredible. Then, finally, he was eligible for preschool, which they cover now.

Moreover, when participants experienced unexpected personal issues, creating even more financial burden, the level of stress increased dramatically. Participant-2 stated quite emotionally:

Working as a single mom, I have to work full-time in order to pay the mortgage and all the bills. I am on state assistance at the moment. I have 3 children . . . I have had to deal with the furnace going out when it was cold . . . car breaking down . . . stuff you just don't anticipate. . . . I have no time for problems to come up with working 32 hours, and putting in three days a week at school, plus hours and hours of homework. It makes it extremely difficult, especially with all the deadlines . . . and all the clinical paperwork that needs to be done. So for me, when those things come up, the stress level just goes through the roof.

In this case, Participant-2 was clear that unexpected personal financial issues created additional stress.

Having to work while going to school and balancing personal responsibilities, presented other challenges for the participants, especially with regard to the time they had available to devote to their studies. As Participant-6 shared, “I have to work, I have to pay rent, I have to go to school, so that I can eventually get a better job . . . Then I’m working so I can’t do my school work.”

Personal life responsibilities created obstacles for participants in not only limiting the actual number of hours available to study, but also impacting the overall quality of that study time. Participant-10 discussed personal issues that were going on in her life that affected her ability to fully concentrate on her studies:

Just even trying to study for this last exam, I’m surprised I ended up getting an 82 on it. . . . I’m like I really want to study, I’m reading, but I’m thinking about all the bills that’s owed. . . . Because I’m trying to hold it together, I’m really worried about how I’m going to even study for these exams.

Moreover, the varied scheduling demands inherent in nursing school, including clinical placements, which required participants to be at their site either very early in the morning or during the evening, created stress in managing caregiving responsibilities. This was especially true for those who had to travel significant distances to their clinical site. As Participant -7 detailed:

It’s a huge struggle. Especially with balancing work and school and having both of those times fluctuating. That’s a typical occurrence for me, having to find somebody, to make sure if I’m not there, for the before and after school, that somebody is there with my kids,

because they are too young to stay by themselves. I have to make sure that somebody gets them on and off the bus every day. So that's a real struggle for me. Very stressful.

Although juggling school, work, and caregiving responsibilities were identified as a significant source of stress for participants, older children presented unique concerns.

Participants reported the struggle between trying to be there for their children, when the children needed them, and trying to meet their own academic demands. Older children may not require care before and after school, however they can pose a challenge for mothers in addressing their emotional needs. Participant-7 stated:

Last semester at one point I was actually failing. . . . I was in jeopardy of getting kicked out of the program and . . . I literally was scared for my life at that point. There were situations going on with my teenage daughter at the time . . . and that was really hard to balance between spending and giving time to her that she needed. . . . It was hard balancing my time because I knew she needed my attention and time, as well as, my studies.

Participant-2 shared similar feelings about trying to meet the needs of her teenage children:

I am not always available for them when they need me, especially as teenagers. I am like, I really have to get this assignment done, I only have two hours to do five hours' worth of homework, you really can't talk to me right now. Sometimes I have to make time for them. . . . I am constantly draining myself of what I can give . . . and I still have to be their mom.

It was clear that all of the participants experienced stress from balancing coursework with personal responsibilities. Participant-6 emphatically conveyed, "Home and school and family!

It's a juggle. It is all a juggle.” Highlighting the stress inherent in this juggling act, Participant-3 shared:

The kids took up so much of my time. . . . so when I wished I had three days of 12 hours a day from start to finish studying, I had nowhere near that, so I did what I could. . . . Yes, I get very stressed out if I don't have the study time.

The second most reported stressor experienced by participants ( $n = 10$ ) was stress from the day-to-day performance of tasks related to their courses, primarily the number of hours needed to study. Beyond study time, an additional source of stress occurred in the clinical placement setting. Nursing students are required to work alongside primary staff nurses caring for their assigned patients. The way a staff nurse interacts with individual students can affect the way that clinical experience is perceived by the student. Participant-3 described her encounter with her assigned nurse:

There is one nurse in particular that really works hard to take us, as nursing students, under her wing. . . . Kind of helping me along . . . and offered suggestions on how to do it. She was so calm, so easy going. . . . And her just helping if I needed help. To have that help in a facility where you have clinical . . . That I think was huge. . . . She's amazing. . . . Very, very nurturing. . . . Everything about it boosts your confidence. . . . Just knowing that the nurse that I was working with had enough confidence in me, that I could do the job, and knowing that she was so calm about it, eased the stress of me. . . . It was just less stress than other situations.

Participant-3 also indicated the same held true for the approach taken by faculty in the clinical setting. When describing her clinical instructor she portrayed a faculty member who was:

nurturing. It is a very nurturing approach, because we are new, we don't always know what we are doing. . . . To have someone being the nurturing one is helpful. It creates less stress. It's kind of about stress. We are stressed out, we are in nursing school. But to have a situation where we are not stressed out all clinical long is good.

When Participant-3 was asked to elaborate on what it was about a nurse's style that made the clinical experience stressful for her, she described nurses who were impatient and did not take the time for students during their clinical experience. She detailed the following:

They're rushed and they don't explain it as much. They sometimes get frustrated and like, 'Oh, here I'll do it.' . . . Sometimes you just feel like you are getting in the way, your presence is not wanted.

In sum, all participants reported experiencing stress from being a college student. Trying to balance coursework with personal responsibilities was the most frequently experienced source of college-related stress. Stress from the day-to-day performance of tasks related to their courses was the second most highly rated stressor experience by participants.

**Interview findings for Research Question 1.** The analysis of the in-person interview data led to the following findings about participants' reports of the stress they experienced related to school and being a nursing student.

Finding 11.6: In the interviews, all participants ( $N = 11$ ) provided examples of typical stressors associated with being a college student.

Finding 11.7: In the interviews, all participants ( $N = 11$ ) indicated that they experienced stress in trying to balance coursework with personal responsibilities.



Finding I1.8: In the interviews, ten participants ( $N = 11$ ) indicated that they experienced stress in the day-to-day performance of tasks related to their courses.

Finding I1.9: In the interviews, nine participants ( $N = 11$ ) indicated that they experienced stress in trying to balance coursework with self-care.

**Summary of the data analyses for Research Question 1.** The analyses of the survey and interview data indicated that all of the study participants ( $N = 11$ ) experienced college-related stress. The data from the survey responses suggested that all participants ( $N = 11$ ) experienced stress from trying to balance coursework with personal responsibilities, balancing day-to-day performance of tasks related to courses, balancing coursework with self-care, and daily hassles some of the time or more often. During the interviews, participants generally reported experiencing stress from balancing coursework with personal responsibilities. Participants also described instances of stress related to day-to-day performance of tasks related to their courses.

**Research Question 2: What are single-parent associate degree nursing students' reports of the types and sources of emotional supports (House, 1981) that buffered their college-related stress and fostered their academic success?**

Emotional support (House, 1981) is characterized by acts or behaviors that demonstrate empathy, care, love, and trust. House (1981) identified emotional support as being reported by individuals most often when referencing the kinds of support received. Emotional support usually occurs within social networks that involve a continuing relationship with another individual or individuals such as family, friend(s), spouse, and co-worker(s).

**Survey results for Research Question 2.** The survey included ten sources of emotional support (significant other, family members, friends, neighbors, work supervisors, co-workers, professors, classmates, clergy, and other) that gathered participants' ( $N = 11$ ) reports of those sources that provided emotional support that buffered their college-related stress and fostered their academic success. Participants ( $N = 11$ ) most frequently identified classmates ( $n = 10$ ), followed by friends ( $n = 9$ ) and family members ( $n = 8$ ) as a source of emotional support. Table 14 summarizes the distribution of sources of emotional support reported by the participants on the survey.

Table 14

*Sources of Emotional Support Identified in the Survey*

P	SO	FM	FR	N	WS	CW	PR	CM	CL	O
1	X	–	X	–	–	–	X	X	–	–
2	–	X	X	–	–	–	–	–	X	X
3	X	X	X	–	–	–	X	X	–	–
4	–	X	X	X	–	X	X	X	–	–
5	–	X	X	–	–	–	–	X	–	–
6	–	X	–	–	–	–	–	X	X	–
7	X	X	X	–	–	–	X	X	–	–
8	–	–	–	–	–	X	X	X	–	–
9	–	X	X	–	–	–	–	X	–	–
10	–	X	X	–	X	X	X	X	–	X
11	–	–	X	–	X	–	–	X	–	–
Totals	3	8	9	1	2	3	6	10	2	2

*Note:* P = Participants; SO = Significant Other; FM = Family Members; FR = Friends; N = Neighbor; WS = Work Supervisor; CW = Co-workers; PR = Professors; CM = Classmates; CL = Clergy; O = Other. X = Identified Source of Emotional Support.

**Survey findings for Research Question 2.** The analysis of the participants' responses to the survey items that asked them to identify the sources of emotional support led to the following findings.

Finding S2.1: On the survey, all participants ( $N = 11$ ) reported that they received emotional support that buffered their college-related stress and fostered their academic success.

Finding S2.2: On the survey, ten participants ( $N = 11$ ) indicated that classmates were a source of emotional support.

Finding S2.3: On the survey, nine participants ( $N = 11$ ) indicated that friends were a source of emotional support.

Finding S2.4: On the survey, eight participants ( $N = 11$ ) indicated that family members were a source of emotional support.

Finding S2.5: On the survey, six participants ( $N = 11$ ) indicated that professors were a source of emotional support.

**Interview results for Research Question 2.** The semi-structured, in-person interviews focused on the participants' reports of the types and sources of emotional support that had been helpful in buffering their college-related stress and fostering their academic success. During the interviews, participants ( $N = 11$ ) each described instances in which they perceived that they had received emotional support that buffered their college-related stress and fostered their academic success. Table 15 summarizes the distribution of sources of emotional support reported by the participants in the in-person interviews.

Table 15

*Sources of Emotional Support Identified during the In-Person Interviews*

P	SO	FM	FR	N	WS	CW	PR	CM	CL	O
1	X	–	–	–	–	–	X	–	–	X
2	–	X	X	–	–	–	X	–	X	–
3	X	–	X	–	–	–	X	X	–	X
4	X	–	–	–	X	–	–	X	–	–
5	–	X	–	–	–	–	–	–	–	X
6	–	X	–	–	–	–	–	X	X	–
7	X	X	X	–	X	–	X	–	–	–
8	–	–	–	–	–	X	X	–	–	–
9	–	–	–	–	X	–	X	X	–	–
10	–	X	X	–	–	–	X	X	X	X
11	–	–	–	–	–	–	X	X	–	X
Totals	4	5	4	–	3	1	8	6	3	5

*Note:* P = Participants; SO = Significant Other; FM = Family Members; FR = Friends; N = Neighbor; WS = Work Supervisor; CW = Co-workers; PR = Professors; CM = Classmates; CL = Clergy; O = Other. X = Identified Source of Emotional Support.

Participants identified professors ( $n = 8$ ) as a significant source of emotional support.

The most frequently reported emotional support provided was in the form of listening and understanding. When discussing the support received from faculty members, Participant-6 shared:

There are few people that they will sit and listen to your personal stories and stuff like that. It helps to have it out there. You express where you are coming from. . . . I am a single mother, I struggle, and it's hard. . . . They do, they will give you that listening ear.

Similarly, Participant- 4 reflected on her interaction with faculty when she was feeling very overwhelmed during her first semester in the program. She said, "I turned to [a professor] and I

think I had one of my first meltdowns, and there have been many since, and just went to her and talked to her for a little bit. She offered an ear.”

Moreover, participants said that faculty members were a source of support by demonstrating caring and understanding when participants’ had unexpected family crises that prevented them from fulfilling their academic responsibilities. Participant-4 mentioned one faculty member’s response to her being late for her clinical experience. She perceived the response as being supportive, noting, that it “had to do with my daughter being ill, so they are understanding.” Similarly, when confronted with a death in the family that required travel out of state and faced with an exam on the day she was returning, Participant-9 perceived the response of one faculty member as being supportive. She said, “They were actually very, very good about it. They were helpful in not making me take it the day I got back, which I was going to.”

In addition to academic professors, faculty members in the clinical setting were also identified as sources of support. Participant-11 was facing significant personal and financial challenges and illustrated the unsolicited support she received from her clinical instructor:

At that time I was really sad and she knew that something was wrong. I was doing good [sic] on my tests, I was getting 90’s. She knew that there was potential for me . . . but that there was something else going on. . . . I needed someone to talk to because that was really hard in my life . . . I kind of felt I could talk to her. . . . So, she asked me what was going on and I told her.

Having faculty members who took the time to listen, who cared and understood that the students were grappling with issues beyond the classroom conveyed a feeling of emotional support for these participants in their time of need.

In addition to faculty members, participants ( $n = 6$ ) reported that classmates were a significant source of emotional support. Participants described receiving support from their peers as a result of shared understanding of what they were experiencing in the nursing program. For example, Participant-10 described the peer support in general terms by saying, “my nursing student friends, they get it.” Participant-11 provided a more specific example of peer support when she discussed a classmate who was facing similar cultural issues. She noted, “I met with a classmate; she’s been like great in my life. She’s Spanish too, and she has a daughter, and we have a lot of things in common.”

Respondents also described the importance of emotional support coming from peers in times of personal crisis. Participant-9 discussed the support received from her classmates, while in the process of a divorce, that was particularly effective for her. She said, “One of my classmates was amazing. She was going through the same thing and I think a lot of us went through the same thing. One of my classmates was amazing support during that time.” Similarly, Participant-10 shared “we all know when one of us isn’t doing so well and one of us isn’t okay.” This feeling of comradery and mutual understanding allowed participants to feel supported in a way that cannot be offered by other friends and family since those people may be unable to relate to the challenges and demands of being in a nursing program.

One of the primary means through which classmates provided emotional support to their peers was through the use of social media, especially Facebook. Four of the participants described using Facebook to interact with classmates. Participant-9, reflecting on the supports she received during her time in the nursing program relayed, “Classmates have been so amazing and so supportive. We have this network and we, just Facebook alone, supporting each other that way has been unbelievable.”

In sum, all of the participants ( $N = 11$ ) described ways in which they perceived that they had received emotional support that buffered their college-related stress and fostered their academic success. Most of the participants ( $n = 8$ ) reported receiving emotional support from professors; followed, in decreasing frequency, by classmates, family members, and others (e.g., nursing staff, counseling centers).

**Interview findings for Research Question 2.** The analysis of the in-person interview data led to the following findings about the emotional support that participants' reported buffered their college-related stress and fostered their academic success.

Finding I2.6: In the interviews, all participants ( $N = 11$ ) described instances in which they perceived that they had received emotional support that buffered their college-related stress and fostered their academic success.

Finding I2.7: In the interviews, eight participants ( $N = 11$ ) reported they received emotional support from professors.

Finding I2.8: In the interviews, six participants ( $N = 11$ ) reported they received emotional support from classmates.

Finding I2.9: In the interviews, five participants ( $N = 11$ ) reported they received emotional support from family members.

Finding I2.10: In the interviews, five participants ( $N = 11$ ) reported they received emotional support from others.

**Summary of the data analyses for Research Question 2.** The analyses of the survey and interview data revealed that all eleven of the participants reported that they had received

emotional support that buffered their college-related stress and fostered their academic success. In the survey, classmates, friends, family members, and professors were identified most often by participants as providing emotional support. During the interviews, all eleven of the participants described instances in which they perceived that they had received emotional support that buffered their college-related stress and fostered their academic success. Participants most often shared stories describing professors as a source of support.

**Research Question 3: What are single-parent associate degree nursing students' reports of the types and sources of instrumental supports (House, 1981) that buffered their college-related stress and fostered their academic success?**

Instrumental support (House, 1981) is characterized by behaviors that directly help the person in need. These behaviors could include providing aid in kind, money, time, and modification of the environment. Although these acts are regarded as specific interventions designed to help individuals, these acts can have unintended psychological effects. For example, House warned that while giving someone financial assistance can demonstrate caring and concern, it may in turn reinforce, for the receiving individual, a reliance on others to meet financial obligations.

**Survey results for Research Question 3.** The survey included ten sources of instrumental support (significant other, family members, friends, neighbors, work supervisors, co-workers, professors, classmates, clergy, and other) that gathered participants' ( $N = 11$ ) reports of the sources that provided instrumental support that buffered their college-related stress and fostered their academic success. Participants ( $N = 11$ ) most frequently identified family



members ( $n = 8$ ) as a source of instrumental support. Table 16 summarizes the distribution of sources of instrumental support reported by participants on the survey.

Table 16

*Sources of Instrumental Support Identified in the Survey*

P	SO	FM	FR	N	WS	CW	PR	CM	CL	O
1	–	–	–	–	–	–	–	X	–	–
2	–	X	X	–	–	–	–	–	X	X
3	X	–	–	–	–	–	–	–	–	X
4	–	X	X	–	X	–	–	–	–	–
5	–	X	–	–	–	–	–	–	–	–
6	–	X	–	–	–	–	–	–	–	–
7	X	X	–	–	–	–	–	–	–	–
8	–	X	–	–	–	–	–	–	–	–
9	–	X	X	–	–	–	–	X	–	–
10	–	X	X	–	–	–	–	–	–	–
11	–	–	–	–	–	–	X	–	–	–
Totals	2	8	4	–	1	–	1	2	1	2

*Note:* P = Participants; SO = Significant Other; FM = Family Members; FR = Friends; N = Neighbor; WS = Work Supervisor; CW = Co-workers; PR = Professors; CM = Classmates; CL = Clergy; O = Other. X = Identified Source of Instrumental Support.

**Survey findings for Research Question 3.** The analysis of the participants' responses to the survey items that asked them to identify the sources of instrumental support led to the following findings.

**Finding S3.1:** On the survey, all participants ( $N = 11$ ) reported that they received instrumental support that buffered their college-related stress and fostered their academic success.

Finding S3.2: On the survey, eight participants ( $N = 11$ ) indicated that family members were a source of instrumental support.

**Interview results for Research Question 3.** The semi-structured, in-person interviews focused on the participants' reports of the types and sources of instrumental support that had been helpful in buffering their college-related stress and fostering their academic success. During the interviews, participants ( $N = 11$ ) each described instances in which they perceived that they had received instrumental support that buffered their college-related stress and fostered their academic success. Table 17 summarizes the distribution of sources of instrumental support reported by the participants ( $N = 11$ ) during the in-person interviews.

Table 17

*Sources of Instrumental Support Identified during the In-Person Interviews*

P	SO	FM	FR	N	WS	CW	PR	CM	CL	O
1	X	–	–	–	–	–	X	X	–	X
2	–	X	X	–	–	–	–	–	X	X
3	X	–	–	–	–	–	–	–	–	X
4	–	X	X	–	X	–	–	–	–	X
5	–	X	–	–	–	–	–	–	–	X
6	–	X	–	–	–	–	–	–	–	X
7	X	X	X	–	X	X	–	X	–	X
8	–	X	–	–	X	–	–	–	X	X
9	–	X	X	–	X	–	–	–	–	X
10	–	X	X	X	–	–	–	X	–	X
11	–	X	–	–	X	–	X	–	–	X
Totals	3	9	5	1	5	1	2	3	2	11

*Note:* P = Participants; SO = Significant Other; FM = Family Members; FR = Friends; N = Neighbor; WS = Work Supervisor; CW = Co-workers; PR = Professors; CM = Classmates; CL = Clergy; O = Other. X = Identified Source of Instrumental Support.

All participants ( $N = 11$ ) reported receiving instrumental support primarily from the college and the State. Interviewees described instrumental support in the form of financial and childcare assistance. Regarding financial sources, participants reported receiving financial help primarily from college grants. Participant-2 shared her struggle paying for textbooks and discussed the assistance provided to her by the college, stating, “I was unable to pay for my books and they have the grant money, so they gave me a check to pay for my books. That was so helpful. That helped take away a lot of the stress.” Similarly, Participant-6 described how the college was able to provide instrumental support in the form of grants that buffered her stress and allowed her to complete her coursework. She said,

My biggest obstacle last semester was financial. My financial aid had run out because I had too many credits. I earned another degree while I was pursuing the pre-requisites, so that was over. . . . I didn’t have the money, it was hard, it was a struggle. . . . I heard . . . they have the grant . . . which would cover this semester and next semester, so I applied for that and I got that and it took a huge weight off my shoulders.

In addition to the support provided by colleges, participants highlighted instrumental support received from family members when they experienced difficulty securing financial aid. Participant-5 highlighted the support received from her grandfather stating, “I got denied financial aid because I was over 100 credits. He funded it . . . My grandfather is basically there for financial support.”

As daycare posed an additional financial burden, and often was not available to those students who had evening or long-distance clinical placements, seven of the nine participants

talked about family members as a source of instrumental support by providing childcare. In discussing balancing childcare and school work, Participant-8 shared,

[child] is in school Monday, Wednesday, Friday at my church. It is just a short 2 hours in the morning. Then she's here [at the college] preschool Tuesdays and Thursdays 8:00 - 3:00, which is really nice. My dad watches her now on Mondays and then he picks her up on Tuesdays because my clinical day is in the evening. . . . My dad works nights, so he's able to watch her all during the day, but then come 3:00, my mom watches her for clinical days until I come home at 10:30, 11:00 p.m.

Similarly, Participant-11 reflected on the challenge of getting care for her children and arriving to her clinical placement on time. She described her mother as a source of instrumental support stating:

I am driving to [placement town], so I sat down with my mom and said, listen I need you this semester. I have to drive 55 minutes and I have to be at clinical at 6:45 a.m. So, please I need you to bring my kids to school Mondays and Tuesdays. She said that was okay . . . so I can be there on time. Because that was the only first shift that I could get and it was all the way in [placement town], otherwise I would have to take second shift and pay extra daycare for that and I didn't want to do that. So she is doing that for me this semester.

In addition to obtaining financial assistance to reduce the costs of going to college, participants ( $n = 3$ ) reported receiving instrumental support to meet childcare expenses. Although participants received financial support for daycare, primarily from the State of Connecticut, this program was very specific in how support was provided. For participants who

worked while going to school, the support was limited, requiring participants to rely on family members for daycare. As Participant-7 relayed,

Care for Kids is a State of Connecticut program where, if you are a working parent, you can get your childcare costs either free or reduced. . . . But the parameters are only for working . . . so . . . I'm covered for the times I'm at work, but I'm not covered for the times I'm at school . . . thankfully [I] have support from my family to fill in those gaps.

In addition to family members, participants described their friends as sources of instrumental support. Sometimes the support was not only for before and after school care, but to give participants some respite from life's daily demands. As Participant-2 shared, "having friends call up and say, 'I am going to take your daughter, I am going to take her for just a few hours so you can rest,' that has meant a lot to me." Likewise, Participant-10, who was in the midst of a divorce, reflected on the support received from a friend:

My friends, like there are things I would not be able to do with my kids . . . she got tickets to go to Beauty and the Beast and asked my youngest son and me to go with her youngest son; took us out to dinner . . . I can't afford to take him out to dinner . . . so it was nice to be able to see him having fun and doing that.

Making childcare arrangements was not the only stressor faced by participants while being a student. Having clinical placement schedules vary by semester was a challenge for those who worked other jobs. Participants described the importance of work supervisors who accommodated their schedules as a source of instrumental support. Participant-4 relayed, "they allow me to leave work to come [to school]." Similarly, Participant-7 discussed difficulties she faced at work, including a loss of income, when she was scheduled for a weekend clinical placement and the instrumental support offered to her by her employer. She said,

When I stopped working weekends my clients had to adjust as well, and I've lost money, I've lost clients because of it. . . . So for me it's like my whole life got uprooted with this clinical. Thankfully, [my employer] accommodated me and thankfully, they let me keep my job and they gave me different days to work. . . . But it's definitely going to drop my income.

In sum, all of the participants ( $N = 11$ ) reported instances in which they perceived that they had received instrumental support that buffered their college-related stress and fostered their academic success. The greatest number of the participants ( $N = 11$ ) reported that a source of their instrumental support was from others, primarily the college (in the form of grants) and the State (in the form of assistance for daycare related expenses). The second most commonly reported source of instrumental support was from family members ( $n = 9$ ).

**Interview findings for Research Question 3.** The analysis of the in-person interview data led to the following findings about the instrumental support that participants reported buffered their college-related stress and fostered their academic success.

Finding I3.3: In the interviews, all participants ( $N = 11$ ) described instances in which they perceived that they had received instrumental support that buffered their college-related stress and fostered their academic success.

Finding I3.4: In the interviews, all participants ( $N = 11$ ) reported they received instrumental support from others, primarily from the college and the State.

Finding I3.5: In the interviews, nine participants ( $N = 11$ ) reported they received instrumental support from family members.

Finding I3.6: In the interviews, five participants ( $N = 11$ ) reported they received instrumental support from friends.

Finding I3.7: In the interview, five participants ( $N = 11$ ) reported they received instrumental support from their work supervisor.

**Summary of the data analyses for Research Question 3.** The analyses of the survey and interview data revealed that all of the participants ( $N = 11$ ) reported that they had received instrumental support that buffered their college-related stress and fostered their academic success. On the survey, family members were identified by the largest number of participants as providing instrumental support. During the interview, all of the participants reported instances in which they perceived that they had received instrumental support that buffered their college-related stress and fostered their academic success. Participants most often shared stories in which others, primarily the college and the State were the source of support. Similar to the survey results, nine of the eleven participants reported family members were a source of instrumental support.

**Research Question 4: What are single-parent associate degree nursing students' reports of the types and sources of informational supports (House, 1981) that buffered their college-related stress and fostered their academic success?**

Informational support (House, 1981) is described as providing advice, suggestion, directives, and information that a person can use in coping with personal and environmental problems. As explained in Chapter 1, affording this form of support allows individuals to help themselves by making available useful information that enables the person to manage stressors. According to House, informational support is difficult to define and differentiate from other types of support and can, in some cases, be viewed as emotional support.

**Survey results for Research Question 4.** The survey included ten sources of informational support (significant other, family members, friends, neighbors, work supervisors, co-workers, professors, classmates, clergy, and others) that gathered participants' ( $N = 11$ ) reports of the sources that provided informational support to buffer their college-related stress and fostered their academic success. Ten of the eleven participants most frequently identified family members ( $n = 8$ ) and classmates ( $n = 8$ ) as sources of informational support. Table 18 summarizes the distribution of sources of informational support reported by the participants on the survey.

Table 18

*Sources of Informational Support Identified in the Survey*

P	SO	FM	FR	N	WS	CW	PR	CM	CL	O
1	X	X	X	X	–	–	–	X	–	–
2	–	–	–	–	X	–	X	–	–	–
3	X	X	X	–	–	–	X	X	–	–
4	–	X	X	–	–	X	X	X	–	–
5	–	X	–	–	–	–	–	X	–	–
6	–	X	–	–	–	–	–	X	X	–
7	X	X	X	–	–	–	X	X	–	–
8	–	–	–	–	–	–	X	–	–	–
9	–	X	–	–	–	–	–	X	–	–
10	–	X	X	–	X	X	X	X	–	–
11	–	–	–	–	–	–	–	–	–	–
Totals	3	8	5	1	2	2	6	8	1	–

*Note:* P = Participants; SO = Significant Other; FM = Family Members; FR = Friends; N = Neighbor; WS = Work Supervisor; CW = Co-workers; PR = Professors; CM = Classmates; CL = Clergy; O = Other. X = Identified Source of Informational Support.



**Survey findings for Research Question 4.** The analysis of the participants' responses to the survey items that asked them to identify the sources of informational support led to the following findings.

Finding S4.1: On the survey, ten participants ( $N = 11$ ) indicated that they received informational support that buffered their college-related stress and fostered their academic success.

Finding S4.2: On the survey, eight participants ( $N = 11$ ) indicated that family members were a source of informational support.

Finding S4.3: On the survey, eight participants ( $N = 11$ ) indicated that classmates were a source of informational support.

Finding S4.4: On the survey, six participants ( $N = 11$ ) indicated that professors were a source of informational support.

Finding S4.5: On the survey, five participants ( $N = 11$ ) indicated that friends were a source of informational support.

**Interview results for Research Question 4.** The semi-structured, in-person interviews focused on the participants' reports of the types and sources of informational support that were helpful in buffering their college-related stress and fostering their academic success. During the interviews, ten of the eleven participants described instances in which they perceived that they had received informational support that buffered their college-related stress and fostered their academic success. Table 19 summarizes the distribution of sources of informational support reported by the participants during the in-person interviews.

Table 19

*Sources of Informational Support Identified during the In-Person Interviews*

P	SO	FM	FR	N	WS	CW	PR	CM	CL	O
1	–	–	–	–	–	–	–	–	–	–
2	–	–	–	–	–	–	X	X	–	–
3	–	–	–	–	–	–	X	X	–	X
4	–	–	–	–	–	–	–	X	–	–
5	–	–	–	–	–	–	–	X	–	–
6	–	X	–	–	–	–	X	X	–	–
7	X	X	–	–	–	–	–	–	–	X
8	–	–	–	–	–	–	X	–	–	X
9	–	X	–	–	–	–	X	X	–	–
10	–	–	–	–	–	X	X	X	–	–
11	–	–	–	–	–	X	X	X	–	–
Totals	1	3	–	–	–	2	7	8	–	3

*Note:* P = Participants; SO = Significant Other; FM = Family Members; FR = Friends; N = Neighbor; WS = Work Supervisor; CW = Co-workers; PR = Professors; CM = Classmates; CL = Clergy; O = Other. X = Identified Source of Informational Support.

Concerning informational support, participants most frequently discussed receiving support from classmates and professors. Specific to classmates, the form of informational support reported most often was provided by peer study groups. Reflecting on previous study habits and academic success prior to entering the nursing program, Participant-4 relayed:

I usually study by myself and I have always been very successful with that. . . . Actually . . . a couple of classmates had formed a study group; I asked if I could be part of it. . . . I ended up being in that study group moving forward. . . . I picked up a lot of different study habits that are beneficial. I didn't really need that before.

Similarly, Participant-5, who had previously failed a nursing course, shared her thoughts about the effect of joining a peer study group on her current academic standing:

Actually, this semester . . . was the first study group that I ever did in my whole life. And I got an A. First time ever, so my first A in the nursing program . . . was with a study group. . . . I used to hate study groups, because they would aggravate me; I didn't think I was learning. But I found a good one. . . . So it helped.

In addition to the informational support that was provided by peer study groups, two participants ( $N = 11$ ) indicated that they received support from classmates via social media, especially Facebook. Social media provided a means to obtain information and clarification of class lectures and ask questions about course content. Participant-10 described the informational support she received by using social media with her classmates. She stated, "If I have a question we have a Facebook page . . . that's just our class. I could post something on there right now and somebody will answer the question in a couple of minutes. That's really nice." Likewise, Participant-2 discussed using social media to connect with classmates and reap the information support benefit of a study group, despite not being able to physically attend because of time constraints and travel distance. She stated,

Facebook has been great. All of our classmates . . . have set up a Facebook page for that class. You can contact people that way, actually converse that way when you are studying, we will put up NCLEX questions on there and study that way.

In addition to classmates, participants ( $n = 7$ ) reported that informational support was obtained from their professors. Examples included tutoring, being available to answer questions, and directing students to resources that could assist them with personal and financial stressors. Participant-8, who was repeating a course, described the informational support received from her professor, recounting;

My professor is helping me . . . I come in and she helps me, tutors me. . . . It's really good. She has some practice questions we go over. She's having me make charts with my reading. I'll read and then I'll make the charts. Then we go over it. She's very, she's so helpful . . . . She said, 'You have to read!' I wasn't reading. Last semester, I wasn't reading because I didn't have time. She goes, 'At least you have to read the summary and the charts.' . . . This semester I'm reading the book and I'm taking notes.

Similarly, Participant-2 reflected about the information support provided by the laboratory teacher. She said,

[laboratory teacher] is one of the ones I rely on a lot, because she is the lab teacher and so whenever we have issues or we don't understand something, she is the go-to person for the most part. . . . She is a good support and helpful that way.

Faculty members were also helpful in providing information on resources that would assist individuals with managing personal life crises. Participant-10 was behind in her bills, as a result of going through a divorce, and shared this fact with a faculty member who responded by saying,

Try not to look too far in the future even though you're behind in some bills. Then she remembered there was a program that will pay. . . . There was a program that paid up to \$600.00 for bills, so I actually got my electric bill paid. That was huge because I was a month behind.

Likewise, Participant-10 described the assistance provided by a faculty member when she was in the midst of a personal crisis stating, "So I needed a lawyer . . . She [the professor] walked me to this lady downstairs that have a free lawyer. She did that for me too. She gave me a whole list of pantries to go get food."

Other sources of informational support were provided by college support staff, such as those in the academic advising and the tutoring centers. Participant-5 reflected on the support received when she was readmitted to the nursing program sharing:

because I am retaking this course, I have to meet with [advisor] . . . all of us who are re-taking . . . we all have to meet on Mondays for an hour. She gives us advice and we have to check in. . . . She's really good with study advice and test-taking advice. She's really good with that kind of stuff.

Additionally, Participant-7 discussed the informational support she received when confronted with technology issues that arose when completing a required course assignment:

I find most of my challenges have been technical issues with the school and I have had to go down to our tutoring center quite a few times, because with the digication thing we have going on now . . . My professor kept telling me you didn't post it . . . and I'm like I posted it two weeks ago. . . . I just went down to the tutoring center and this woman helped me and she said it's there.

In sum, ten of the eleven participants described instances in which they perceived that they had received informational support that buffered their college-related stress and fostered their academic success. Participants most often reported the informational support received was from classmates ( $n = 8$ ) and noted that the support was often received through peer study groups and the use of social media. The second most often reported source of informational support was professors ( $n = 7$ ). Students described the support provided by faculty as tutoring on effective study aids, being available to answer questions, and directing students to specific college resources.

**Interview findings for Research Question 4.** The analysis of the in-person interview data led to the following findings about the informational support that participants reported buffered their college-related stress and fostered their academic success.

Finding I4.6: In the interviews, ten participants ( $N = 11$ ) described instances in which they perceived that they had received informational support that buffered their college-related stress and fostered their academic success.

Finding I4.7: In the interviews, eight participants ( $N = 11$ ) reported they received informational support from classmates.

Finding I4.8: In the interviews, seven participants ( $N = 11$ ) reported they received informational support from professors.

**Summary of the data analyses for Research Question 4.** The analyses of the survey and interview data revealed that ten of the eleven participants reported that they had received informational support that buffered their college-related stress and fostered their academic success. In the survey, family members ( $n = 8$ ) and classmates ( $n = 8$ ) were identified most often as providing informational support. During the interviews, ten participants ( $N = 11$ ) described instances in which they perceived that they had received informational support that buffered their college-related stress and fostered their academic success. Participants most often shared stories in which classmates and professors were the source of support.

**Research Question 5: What are single-parent associate degree nursing students' reports of appraisal supports that buffered their college-related stress and fostered their academic success?**

Appraisal support (House, 1981) is characterized by the communication of information related to self-evaluation. As explained in Chapter 1, is difficult to differentiate from the other forms of support. According to House (1981), individuals who receive appraisal support evaluate themselves based on information provided by others, either directly or indirectly.

**Survey results for Research Question 5.** The survey included ten sources of appraisal support (significant other, family members, friends, neighbors, work supervisors, co-workers, professors, classmates, clergy, and others) that gathered participants' ( $N = 11$ ) reports of those sources who provided appraisal support that buffered their college-related stress and fostered their academic success. Participants ( $N = 11$ ) most frequently identified classmates ( $n = 10$ ) as a source of appraisal support. Table 20 summarizes the distribution of sources of appraisal supports reported by the participants on the survey.

Table 20

*Sources of Appraisal Support Identified in the Survey*

P	SO	FM	FR	N	WS	CW	PR	CM	CL	O
1	–	–	–	–	–	–	X	X	–	–
2	–	X	X	–	–	–	X	X	–	–
3	–	–	–	–	–	–	X	X	–	–
4	–	X	X	X	–	X	X	X	–	–
5	–	X	X	–	–	–	–	X	–	–
6	–	X	–	–	–	–	–	X	X	–
7	X	X	X	–	–	–	X	X	–	–
8	–	–	–	–	–	–	–	–	–	–
9	–	–	X	–	–	–	–	X	–	–
10	–	X	X	X	–	X	X	X	–	–
11	–	–	X	–	–	–	X	X	–	–
Totals	1	6	7	2	–	2	7	10	1	–

*Note:* P = Participants; SO = Significant Other; FM = Family Members; FR = Friends; N = Neighbor; WS = Work Supervisor; CW = Co-workers; PR = Professors; CM = Classmates; CL = Clergy; O = Other. X = Identified Source of Appraisal Support.

**Survey findings for Research Question 5.** The analysis of the participants' responses to the survey items that asked them to identify the sources of appraisal support led to the following findings.

Finding S5.1: On the survey, ten participants ( $N = 11$ ) reported that they received appraisal support that buffered their college-related stress and fostered their academic success.

Finding S5.2: On the survey, ten participants ( $N = 11$ ) indicated that classmates were a source of appraisal support.

Finding S5.3: On the survey, seven participants ( $N = 11$ ) indicated that friends were a source of appraisal support.



Finding S5.4: On the survey, seven participants ( $N = 11$ ) indicated that professors were a source of appraisal support.

Finding S5.5: On the survey, six participants ( $N = 11$ ) indicated that family members were a source of appraisal support.

**Interview results for Research Question 5.** The semi-structured, in-person interviews focused on the participants' reports of the types and sources of appraisal support that were helpful in buffering their college-related stress and fostering their academic success. During the interviews, five of the participants described instances in which they perceived that they had received appraisal support that buffered their college-related stress and fostered their academic success. Table 21 summarizes the distribution of sources of appraisal support reported by the participants during the in-person interviews.

Table 21

*Sources of Appraisal Support Identified during the In-Person Interviews*

P	SO	FM	FR	N	WS	CW	PR	CM	CL	O
1	–	X	–	–	–	–	–	–	–	–
2	–	–	–	–	–	–	–	–	–	–
3	–	–	–	–	–	–	–	X	–	–
4	–	–	–	–	–	–	–	–	–	–
5	–	–	–	–	–	–	–	–	–	–
6	–	–	–	–	–	–	X	–	–	–
7	X	X	–	–	–	–	X	–	–	–
8	–	–	–	–	–	–	–	–	–	–
9	–	–	–	–	–	–	–	–	–	–
10	–	X	–	–	–	–	X	–	–	–
11	–	–	–	–	–	–	–	–	–	–
Totals	1	3	–	–	–	–	3	1	–	–

*Note:* P = Participants; SO = Significant Other; FM = Family Members; FR = Friends; N = Neighbor; WS = Work Supervisor; CW = Co-workers; PR = Professors; CM = Classmates; CL = Clergy; O = Other. X = Identified Source of Appraisal Support.

Participants identified family members and professors as a source of appraisal support.

The most frequently reported type of appraisal support received from family members was provided primarily in the form of positive feedback regarding their performance in the nursing program. When describing what was most helpful during the nursing program, Participant-1 shared remarks she received from her children:

they will send me little messages, they'll text me, 'mommy I am so proud of you', or 'mommy I can't believe you are doing this', or 'it's almost over, I can't wait to be there at graduation.' So it's those little things that they are doing.

Similarly, Participant-7 described the mutual support shared between her and her teenage daughter, which motivated both of them when they encountered academic challenges:

having that looming question of am I going to pass . . . I cannot fail. And I basically had to sit down and tell my daughter that I know that you need me, but we . . . need this to happen . . . and I think she got it, because after that she was struggling with her math grades, so we kind of were helping each other . . . giving each other positive support and anytime I had a test coming up she'd be like, 'hey mom, how'd you do on your test?' I'd be like . . . I got a B this time and she's like 'good job!' And I'd say how about your math test and she'd go, 'I got a B too.' . . . I'm like okay good job, so we kind of motivated each other through it.

In addition to her teenage daughter, Participant-7 reported instances of appraisal support provided by other family members. She indicated that the support she received from her sister (who was a nurse) was particularly effective because she was able to relate to how the participant was feeling. She said,

because she gets it and she says, 'Listen, I know you are as smart as me, we come from the same family . . . if I can do it, you can do it.' So . . . anytime I've had that doubt in my mind, she's kind of like, 'listen.'

Conversely, Participant-11 discussed a general lack of appraisal support about her attending college from family members, which she attributed to cultural differences. She said, "education is not one of their priorities . . . They don't see it as a priority, so I don't get a lot of that support from my family, because they don't see it as I see it." This participant highlighted the need for appraisal support as a source of support. When asked what she thought would have been effective help during her nursing program, she sadly stated, "Just somebody to be there with me telling me, 'you can do this. You can do it, I am proud of you.' But it is okay, I did it regardless."

In addition to family members, three of the participants reported professors, both in the academic and clinical settings, as sources of appraisal support. Specifically, when asked what was helpful to her academic success Participant-6 shared:

Academic help, I asked for tutoring if I am not doing well, I just ask and they give the feedback that you need. But I think that people are afraid to actually engage the faculty in those kinds of discussions. [Faculty members will] be honest . . . and sometimes that feedback is a little difficult to take, but it is necessary.

Faculty was a source of appraisal support not only when individuals faced academic jeopardy, but when confronting significant personal life stressors. Participant-10 described reaching out to faculty during one particularly difficult time. She said, “I just need somebody to tell me I’m going to make it through this. . . . They were just like, ‘You got this far, you’re going to get it.’”

In addition to classroom instructors, clinical instructors were identified as a source of appraisal support for not only clinical issues, but also with academic issues. Participant-7 detailed the influence her clinical instructor had on her:

she was pushing me because she knew I could do it. She was pushing me to motivate me to be like you got this . . . you can do it. . . . She was constantly checking on my grades too, and she was like, ‘how did you do on this test’ and ‘I saw you did better on this test’. . . ‘I see you’re improving.’ She was giving me constant feedback saying, ‘you did really good in clinical this week’ . . . and at the end she was like, ‘you are my most improved student.’ . . . So, I think that motivation was really good for me . . . pleasing her was definitely a big motivator.

In sum, five participants described instances in which they perceived that they had received appraisal support that buffered their college-related stress and fostered their academic success. The appraisal support that participants described consisted primarily of positive feedback regarding their performance in the nursing program provided by family members and professors.

**Interview findings for Research Question 5.** The analysis of the in-person interview data did not generate any findings, at the level determined for discussion, about the appraisal support that participants reported buffered their college-related stress and fostered their academic success.

**Summary of the data analyses for Research Question 5.** In the survey, ten participants ( $N = 11$ ) reported that they had received appraisal support that buffered their college-related stress and fostered their academic success. Classmates, professors, and friends, were identified by most respondents as providing appraisal support. Notably, during the interviews, only five of the participants ( $N = 11$ ) described specific instances in which they perceived that they had received appraisal support that buffered their college-related stress and fostered their academic success.

**Research Question 6: What are single-parent associate degree nursing students' reports of what drives their continued persistence towards academic success?**

Many factors drive single parents to persist in college. These include, for example, wanting to provide for their children (Deutsch & Schmertz, 2011), possessing intrinsic

motivation, and being self-directed (Knowles, Holton, & Swanson, 2012). Similarly, these themes emerged during the interviews.

Seven of the participants ( $N = 11$ ) described what drove their continued persistence in the nursing program. Six participants expressed the desire to provide for their children and to become economically self-sufficient as the driving forces for their persistence in the nursing program. Participant-4 relayed,

My daughter! She is my driving force for sure. You wake up some days and it is tough. Sometimes you can barely lift your head out of bed because I work full-time too. I just look at her, she just does it, she's my drive. I have to do it; regardless I just have to do it. . . . Being able to provide, obviously financially for her. Being able to have more flexibility in my schedule. Being able to have more choices available to me. . . . Being able to provide her with everything that she needs. . . . I have to be a role model.

The need to provide for her children was mentioned by Participant-7 as a reason for her return to school. She highlighted the financial struggles she confronted after a divorce by saying,

I am in an industry now where the economy is dependent [*sic*]. One week I can have a good pay check and another week I can have a barely scraping by paycheck. So for me I couldn't afford a place on my own right now with the paycheck if I wanted to. I'd have to be in subsidized housing to get my own place because . . . I just can't afford it. So my main motivation for going back to school was to be able to provide for my kids and be independent as a person and not have to rely on subsidies and family and programs. I want to be able to pay for everything for my own way and give my kids a comfortable lifestyle.

Becoming self-sufficient and being able to meet the needs of their children were not the only factors that participants reported enabled them to persist in the nursing program. Four of the participants ( $N = 11$ ) identified possessing an “internal drive” (Participants-3, 4, & 5) and a desire or want to “reach out and grab their success” (Participant-6). Participant-5, who reflected on other types of help that might be effective in encouraging persistence, suggested being motivated by an internal drive. Specifically she said,

it’s just the person itself that if you want to do that, it can be done. If you don’t want to do that. . . . Even if no one’s there to support you, it can be done. There’s been times where I’ve been isolated . . . I just keep going. It’s the internal drive . . . because it’s you.

Similarly, Participant-6 shared her thoughts on what contributed to her being successful in the nursing program:

ultimately, the students in this program are going to be the deciding factor. They need to decide that they want to reach out and grab their success. They need to make it theirs. I think the relationship between the student and the faculty also lies in the court of the student. You will have the experience that you look for. If you decide you are going to have a good semester, you will. If you decide that you are going to have a bad semester then you will. Your attitude is going to show up in your actions. That is really how it is.

In sum, most of the participants ( $n = 6$ ) described being internally motivated by a need to provide for their children by becoming economically self-sufficient that drove their continued persistence in the nursing program. Four of the participants shared stories of possessing an internal drive that contributed to their persistence.

**Interview finding for Research Question 6.** The analysis of the in-person interview data led to the following finding about what drove participants' continued persistence towards academic success.

Finding I6.1: In the interviews, six participants ( $N = 11$ ) reported they wanted to provide for their children and be economically self-sufficient.

### **Summary of the Chapter**

This single-case study of single-parent associate degree nursing students' reports of the social supports that buffered their college-related stress and fostered academic success resulted in 40 findings. The findings were based on the review and analysis of the data gathered through surveys and in-person interviews conducted according to the guidelines outlined in Chapter 3. This section will be followed by Chapter 5, which will present a summary, conclusions, and recommendations.



## **CHAPTER 5: SUMMARY, CONCLUSIONS, AND RECOMMENDATIONS**

### **Introduction to the Chapter**

The purpose of this chapter is to present conclusions and recommendations based on the analysis of single-parent associate degree nursing students' reports of the social supports that buffered their college-related stress and fostered their academic success. More specifically, this study focused on single-parent nursing students who were enrolled in their senior year at one of four nursing programs in Connecticut's state community college system. This chapter is organized into three parts. First, a summary of the study is presented, followed by a list of findings organized under the associated research question. The conclusions, which are based on these findings and recommendations for practice, are presented next. Finally, recommendations for future research are offered.

### **Summary of the Study**

Over the next decade the nation is expected to experience a significant shortage of RNs necessary to meet the increased demands of healthcare services that will be required due to an aging population and newly imposed insurance mandates. Associate degree nursing programs educate a significant number of RNs who are prepared to enter numerous healthcare settings (AACC, 2011). Nevertheless, high attrition rates have continued to be a significant issue for administrators and faculty of nursing education programs (Wells, 2003). One factor contributing to the high attrition rate is the increased enrollment of nontraditional students who often confront considerable challenges in their personal lives while working toward a nursing degree.

Major stressors faced by nontraditional students include trying to achieve academic success, balancing academic and personal life responsibilities, and paying for college (Dill & Henley, 1998; Miller et al., 2005). The stress inherent in coping with such chronic concerns is one reason many adult women do not complete their educational programs (Johnson et al., 2000). This is particularly true for student-mothers, especially those from low-income families (McLaughlin & Randolph, 2011).

Although there is no one best way of meeting the needs of all students, research underlines the effectiveness of social supports in fostering persistence for college students who face personal and academic stressors (Goff, 2011; Home, 1997; Lewis, 1988; McLaughlin & Randolph, 2011; Peterson-Graziose et al., 2013; Pierceall & Keim, 2007; Reeve et al., 2013). This appears to be true for both community college students generally and for those enrolled in nursing programs specifically. Social supports, such as those identified by House (1981), can play a significant role in decreasing college students' stress and can contribute positively to academic success. The purpose of this exploratory case study was to describe single-parent associate degree nursing students' reports of the social supports that buffered their college-related stress and fostered their academic success.

### **Conceptual Framework**

The conceptual framework used in this case study was House's (1981) model of social support. According to House, social support is defined as "a flow of emotional concern, instrumental aid, information, and/or appraisal between people" (p. 26). The concept of social support addresses the question: "*Who gives what to whom regarding which problems?*" (p. 22). Through his research, House learned that social supports could mitigate or buffer the negative effects that stress, especially occupational stress, can have on health. Crucially, support was

found “to be effective only to the extent it is perceived” (p. 27). House also learned that individuals frequently reported family, friends, and co-workers as important sources of support, with emotional support most often described by individuals when referencing the type of support received.

## **Methodology**

The phenomenon under investigation in this study was single-parent nursing students’ reports of the social supports that buffered their college-related stress and fostered their academic success. A purposeful sample, drawn from the population of associate degree nursing students who were single-parents, over the age of 18, and who were in their second year of the nursing program, was used in this investigation. Eleven students were recruited from four of the six nursing programs in a state-wide community college system to participate in this study.

A case study, developed using Yin’s (2014) work, was the approach selected to answer the research questions for this exploratory investigation. A two-method approach was used to collect data to answer the research questions; study volunteers were asked to complete a paper-and-pencil survey and participate in an in-person interview. The survey was administered first, followed by the in-person interview, which was based on Flanagan’s (1954) Critical Incident Technique. Study participants were asked to describe a situation in which they received help or support to succeed in the nursing program. In addition, they were prompted to describe what led up to the situation, who provided the help, the help received, and why the help was effective.

Complete surveys and interview transcripts formed the data set. House’s (1981) model of social support served as the template for analyzing participants’ responses. The survey was analyzed first using descriptive statistics. The analysis of the survey data yielded 22 findings. Following the survey, each volunteer participated in an in-person interview. Each interview

lasted between 20 and 108 minutes and was digitally recorded. Methods typically associated with qualitative data analysis were used to identify units of meaning (e.g., words, phrases) that reflected the dimensions of the conceptual framework, namely the types of support, the people who were identified as providing the support (i.e., sources of support), and the importance of the support as perceived by the interviewee. Additional codes were created as they emerged through the analysis of the data. A qualitative finding was generated when 5 or more of the interviewees identified a particular type or source of support (frequency or importance) as buffering their college-related stress and fostering their academic success. The analysis of the in-person interview data yielded 18 findings, for a total of 40 findings. The findings are categorized under the associated research question.

**Research Question 1: What are single-parent associate degree nursing students' reports of the types and frequency of college-related stress?**

Finding S1.1: On the survey, all participants ( $N = 11$ ) reported that they experienced stress from being a college student *some of the time* or more often.

Finding S1.2: On the survey, all participants ( $N = 11$ ) reported that they experienced stress from day to day performance of course tasks *some of the time* or more often.

Finding S1.3: On the survey, ten participants ( $N = 11$ ) reported that they experienced stress from balancing coursework with self-care *some of the time* or more often.

Finding S1.4: On the survey, all participants ( $N = 11$ ) reported that they experienced stress from balancing coursework with personal responsibilities *some of the time* or more often.

Finding S1.5: On the survey, all participants ( $N = 11$ ) reported that they experienced stress from daily hassles *some of the time* or more often.

Finding I1.6: In the interviews, all participants ( $N = 11$ ) provided examples of typical stressors associated with being a college student.

Finding I1.7: In the interviews, all participants ( $N = 11$ ) indicated that they experienced stress in trying to balance coursework with personal responsibilities.

Finding I1.8: In the interviews, ten participants ( $N = 11$ ) indicated that they experienced stress in the day-to-day performance of tasks related to their courses.

Finding I1.9: In the interviews, nine participants ( $N = 11$ ) indicated that they experienced stress in trying to balance coursework with self-care.

**Research Question 2: What are single-parent associate degree nursing students' reports of the types and sources of emotional supports (House, 1981) that buffered their college-related stress and fostered their academic success?**

Finding S2.1: On the survey, all participants ( $N = 11$ ) reported that they received emotional support that buffered their college-related stress and fostered their academic success.

Finding S2.2: On the survey, ten participants ( $N = 11$ ) indicated that classmates were a source of emotional support.

Finding S2.3: On the survey, nine participants ( $N = 11$ ) indicated that friends were a source of emotional support.

Finding S2.4: On the survey, eight participants ( $N = 11$ ) indicated that family members were a source of emotional support.

Finding S2.5: On the survey, six participants ( $N = 11$ ) indicated that professors were a source of emotional support.

Finding I2.6: In the interviews, all participants ( $N = 11$ ) described instances in which they perceived that they had received emotional support that buffered their college-related stress and fostered their academic success.

Finding I2.7: In the interviews, eight participants ( $N = 11$ ) reported they received emotional support from professors.

Finding I2.8: In the interviews, six participants ( $N = 11$ ) reported they received emotional support from classmates.

Finding I2.9: In the interviews, five participants ( $N = 11$ ) reported they received emotional support from family members.

Finding I2.10: In the interviews, five participants ( $N = 11$ ) reported they received emotional support from others.

**Research Question 3: What are single-parent associate degree nursing students' reports of the types and sources of instrumental supports (House, 1981) that buffered their college-related stress and fostered their academic success?**

Finding S3.1: On the survey, all participants ( $N = 11$ ) reported that they received instrumental support that buffered their college-related stress and fostered their academic success.

Finding S3.2: On the survey, eight participants ( $N = 11$ ) indicated that family members were a source of instrumental support.

Finding I3.3: In the interviews, all participants ( $N = 11$ ) described instances in which they perceived that they had received instrumental support that buffered their college-related stress and fostered their academic success.

Finding I3.4: In the interviews, all participants ( $N = 11$ ) reported they received instrumental support from others, primarily from the college and the State.

Finding I3.5: In the interviews, nine participants ( $N = 11$ ) reported they received instrumental support from family members.

Finding I3.6: In the interviews, five participants ( $N = 11$ ) reported they received instrumental support from friends.

Finding I3.7: In the interview, five participants ( $N = 11$ ) reported they received instrumental support from their work supervisor.

**Research Question 4: What are single-parent associate degree nursing students' reports of the types and sources of informational supports (House, 1981) that buffered their college-related stress and fostered their academic success?**

Finding S4.1: On the survey, ten participants ( $N = 11$ ) indicated that they received informational support that buffered their college-related stress and fostered their academic success.

Finding S4.2: On the survey, eight participants ( $N = 11$ ) indicated that family members were a source of informational support.

Finding S4.3: On the survey, eight participants ( $N = 11$ ) indicated that classmates were a source of informational support.

Finding S4.4: On the survey, six participants ( $N = 11$ ) indicated that professors were a source of informational support.

FindingS4.5: On the survey, five participants ( $N = 11$ ) indicated that friends were a source of informational support.

Finding I4.6: In the interviews, ten participants ( $N = 11$ ) described instances in which they perceived that they had received informational support that buffered their college-related stress and fostered their academic success.

Finding I4.7: In the interviews, eight participants ( $N = 11$ ) reported they received informational support from classmates.

Finding I4.8: In the interviews, seven participants ( $N = 11$ ) reported they received informational support from professors.

**Research Question 5: What are single-parent associate degree nursing students' reports of appraisal supports (House, 1981) that buffered their college-related stress and fostered their academic success?**

Finding S5.1: On the survey, ten participants ( $N = 11$ ) reported that they received appraisal support that buffered their college-related stress and fostered their academic success.

Finding S5.2: On the survey, ten participants ( $N = 11$ ) indicated that classmates were a source of appraisal support.

Finding S5.3: On the survey, seven participants ( $N = 11$ ) indicated that friends were a source of appraisal support.



Finding S5.4: On the survey, seven participants ( $N = 11$ ) indicated that professors were a source of appraisal support.

Finding S5.5: On the survey, six participants ( $N = 11$ ) indicated that family members were a source of appraisal support.

**Research Question 6: What are single-parent associate degree nursing students' reports of what drives their continued persistence towards academic success?**

Finding I6.1: In the interviews, six participants ( $N = 11$ ) reported they wanted to provide for their children and be economically self-sufficient.

### **Conclusions and Recommendations**

**Conclusion 1:** Overall, single-parent associate degree nursing students participating in this study reported they experienced stress from being a college student in a nursing program.

This conclusion was based on the following findings: S1.1, S1.2, S1.3, S1.4, S1.5, I1.6, I1.7, I1.8, and I1.9.

The analyses of the survey and interview data indicated that all of the study participants ( $N = 11$ ) reported that they experienced stress related to being a college student. In the survey, the source of stress identified by the most participants was balancing coursework with personal responsibilities. During the interviews, all of the participants ( $N = 11$ ) shared stories about experiencing stress in trying to balance coursework with personal responsibilities. They also experienced stress in the day-to-day performance of tasks related to their courses.

These results are consistent with the research that found that female students enrolled in community colleges, in general, experience stress (Pierceall & Keim 2007). College students,

especially those attending community colleges, typically confront varied stressors as they attempt to balance the demands of their academic role with personal, family, work, and financial obligations (Miller et al., 2005). Moreover, it has been reported that female college students who have children frequently struggle with balancing academic responsibilities with the demands and obligations of caring for their families and their work responsibilities (Home, 1997; Johnson et al., 2000). Notably, female students with young children (under age 13) have been found to experience higher role demands and role stress and role strain, as did women with lower incomes (Home, 1997). Particular to nursing students, Goff (2011) found female baccalaureate nursing students perceived more stress than males in relation to their academic performance.

Related research to date has primarily focused on baccalaureate nursing students (Goff, 2011; Hegge et al., 1999; Home, 1997; Reeve et al., 2013). The findings in this study confirm the findings of those researchers and add insight into the experiences of nursing students in associate degree programs.

Participants in the present investigation reported that clinical placements were a source of their stress. Depending on the shift assigned and the amount of travel time required to attend clinical placements resulted in additional daycare expense for these students. In many cases, students reported they were not able to request or switch clinical placements that could best accommodate their schedule. In addition, students' perceptions of the support provided by clinical placement staff influenced their performance in the clinical setting. Students described nursing staff who were nurturing, helpful, and supportive decreased their stress and boosted their confidence. These results are similar to previous research, in which authors have found that in addition to the stress from managing the demands of the general academic setting, nursing students, in particular, incur stressors as a result of their experience in the clinical setting.

Specifically, the clinical setting causes additional stress due to the distance traveled to and from clinical placements (Hegge et al., 1999), the amount of guidance and direction provided by faculty (O'Reilly-Knapp, 1994), and perceived faculty support (Shelton, 2000). Moreover, the experiences that made students feel most rejected produced the most stress; these experiences included feeling rejected from staff nurses (Reeve et al., 2013).

In sum, single-parent associate degree nursing students in this study reported they experienced stress related to school and being a nursing student. In the interviews, participants identified stressors that were similar to those previously identified in the literature on stressors experienced by single-parent college students.

**Recommendation for Practice 1.** Community college administrators would do well to review the availability and efficacy of counseling and other support services.

The findings from this investigation indicated that for single-parent nursing students, the most frequently experienced source of college-related stress was trying to balance coursework with additional responsibilities (e.g., job, childcare). College administrators would do well to gather data on the availability of support services, such as counseling and academic support, at their respective institutions and solicit students' perceptions of how well these support services are meeting their needs. Data, obtained via a college-wide survey that addresses the availability and perceived effectiveness of support services, could provide rich information for college administrators to develop or modify student support services, and tailor them specifically for the populations they serve.

**Recommendation for Practice 2.** College nursing program administrators would do well to formally assess and evaluate clinical placement settings for students that would best accommodate their individual needs and foster a positive learning environment.

The findings in this study clearly identified the participants experienced stressors associated with traveling to and from the clinical site and their scheduled clinical placements. Participants indicated that they were not informed about their clinical placement sites early enough to secure daycare for their children. Furthermore, if participants were assigned a clinical placement that created additional challenges, specifically in regard to travel distance and having to obtain additional daycare providers, they were not allowed the opportunity to switch with a willing classmate. Nursing program administrators need to plan and post clinical placement schedules as early as possible to try to best accommodate student's needs. This could be implemented by instituting a student request form prior to establishing clinical placement schedules in an effort to best accommodate students' needs for a specific shift and clinical site. In addition, students should be offered the opportunity to switch with their classmates if a conflict is encountered.

Nursing program administrators would do well to design an evaluation tool to elicit students' perceptions of the clinical learning environment. The feedback obtained would be useful in assigning and evaluating the effectiveness of clinical experiences. Information could be reviewed with clinical agencies to foster improved staff-student relationships and how best to enhance the learning environment.

**Recommendation for Practice 3.** Consideration should be given to providing a counselor dedicated to nursing students.

As nursing students are required to participate in a weekly clinical experience, in addition to their academic workload, having a counselor who can relate to the stressors associated with the demands of nursing program, including those that result from having to assume professional accountability in the clinical setting could provide a valuable source of support for these

students. Moreover, it would be important to design a workshop for students entering the nursing program that includes information on topics such as strategies to help cope with stress, time-management, and effective study skills. Community colleges that provide a counselor dedicated to nursing students to address the unique stressors of balancing the demands of a professional practice program with work and family demands have the potential to experience improved nursing program outcomes.

**Conclusion 2:** Emotional support was identified by study participants as buffering their college-related stress and fostering their academic success. The primary sources of support were classmates, friends, family members, and professors.

This conclusion was based on the following findings: S2.1, S2.2, S2.3, S2.4, S2.5, I2.6, I2.7, I2.8, I2.9, and I2.10.

The analyses of the survey and interview data indicated that all of the study participants ( $N = 11$ ) reported emotional support as one type of support that buffered their college-related stress and fostered their academic success. In the survey, most participants reported classmates ( $n = 10$ ) as providing emotional support, followed in decreasing frequency, by friends ( $n = 9$ ), family members ( $n = 8$ ), and professors ( $n = 6$ ).

During the interviews, eight of the participants spoke about professors as a source of emotional support, provided primarily in the form of listening and understanding. Participants shared stories about professors allowing them the opportunity to vent, listening to their personal struggles, and being understanding of their difficulties balancing work and school with diverse family situations.

Participants also spoke about receiving similar emotional support from peers, as a result of shared understanding of the demands they experienced being a student in the nursing program. Emotional support provided by peers included demonstrating caring and concern when they faced similar cultural issues and when someone in their class was not doing well.

Emotional support is characterized as acts or behaviors that demonstrate empathy, care, love, and trust (House, 1981). This type of support usually occurs within social networks that involve a continuing relationship with another individual or individuals such as family, friends, spouse, and co-workers. According to House (1981), individuals frequently reported family, friends, and co-workers as important sources of support, with emotional support most often described by individuals when referencing the type of support received.

Other researchers have learned that emotional support was strongly linked with positive outcomes for college students (Hegge et al., 1999; O'Reilly-Knapp, 1994; Shelton, 2000; Williams, 2005; a finding that was confirmed in this study. Hale et al. (2005) found social support, wherein individuals feel connected to others, or form social networks, had a positive effect on physical health, especially for female college students. This finding was also supported by the findings of the current study. Additionally, Reeve et al. (2013) noted the support provided by peers was important for adult women returning to school to cope with the demands of balancing school and family responsibilities. Reeve et al.'s finding was likewise confirmed by the findings of this investigation.

**Recommendation for Practice 4.** College administrators would do well to develop a long-term professional learning program for counselors and faculty on how to effectively support single-parent students and addresses interactions that contribute to a positive student-faculty relationship that will strengthen student success and program outcomes.

The findings from this study indicated professors were a key source of emotional support for single-parent nursing students, primarily provided in the form of listening and understanding. Shelton (2000) found psychological support from faculty, such as being approachable, listening, and expressing a genuine interest in students was associated with increased student retention. Moreover, Williams (2005) found perceived faculty support was an important factor that enabled nursing students to persist. College administrators would do well to ensure all faculty members (including adjunct faculty) participate in ongoing professional learning to enhance their understanding of how best to identify students who need support and to institute effective advisement focused on both academic concerns and personal stressors.

**Recommendation for Practice 5.** College administrators would do well to formulate a professional learning program for faculty on the availability of college and community support services and the processes necessary to identify and refer students to appropriate support services.

The students in this study shared stories about faculty directing them to needed resources, such as free legal services and food pantries, to address personal crises. A workshop could be provided by community agencies to inform faculty and staff about community-based social services that are available for students, such as 2-1-1 CT. In addition, college administrators could design an orientation program for new students that include an opportunity for students to learn about available resources. Austin and McDermott (2003/2004) suggested that college administrators would do well to dedicate an on-campus advocate or office to be a source of information on resources targeted specifically to single parents. By providing this information to all members of the teaching faculty, rather than concentrating it in one office on campus, colleges can better ensure that available information will make its way to the students in need of

that information. As faculty are the most frequent and direct point of contact for students, information can be readily available to students in need. In addition, nursing faculty could be asked to incorporate community resources into the curriculum using focused assignments that would organically increase student awareness of available resources since many patients are in need of services.

**Recommendation for Practice 6.** Given the high frequency of peer support, college administrators should develop and implement peer-support programs to strengthen student retention rates.

The findings from the study indicated that students perceived classmates to be a significant source of emotional support as a result of shared understanding of their experiences in the nursing program. College administrators would do well to develop and implement peer-support groups, potentially in the form of a mentorship program. Austin and McDermott (2003/2004) found that establishing peer networks allowed low-income single mothers to persist in college. A peer-mentor program could be designed by soliciting interested senior-level nursing students to be assigned to in-coming first-year students to assist in their transition and to be a source of ongoing support. Recent graduates, especially those enrolled in RN-BSN programs, could also be asked to participate in mentorship programs for current senior-level nursing students in the same way. In addition, professional organizations could be asked to provide volunteers for mentorship and guidance for students.

**Conclusion 3:** Instrumental support was identified by study participants as buffering their college-related stress and fostering their academic success. The primary sources of instrumental support were mainly the colleges, the State, and family members.



This conclusion was based on the following findings: S3.1, S3.2, I3.3, I3.4, I3.5, I3.6, I3.7.

The analyses of the survey and interview data indicated that all of the study participants ( $N = 11$ ) reported instrumental support as a type of support that buffered their college-related stress and fostered their academic success. In the survey, eight participants reported they received instrumental support from their family members. During the interviews, all of the participants spoke about their respective colleges and the State as the primary sources of instrumental support; this was followed by family members. Participants primarily talked about receiving instrumental support in the form of financial assistance from their colleges to help them to pay for college-related costs, such as tuition and textbooks, and from the State to manage their children's daycare expenses. When childcare was required beyond normal daycare operating hours, participants shared that family members provided instrumental support by taking care of their children.

House (1981) characterized instrumental support as behaviors that directly help the person in need. These behaviors could include providing aid in kind, money, time, and modifying the environment. Although similar to emotional support, which conveys caring and concern, instrumental acts are regarded as specific interventions designed to assist people with tangible needs.

Participants' responses to the survey prompts and interview questions confirmed findings from the related research, in which the provision of instrumental supports was found to buffer college-related stress and foster academic success (Austin & McDermott, 2003/2004; Giglotti, 2004). Austin and McDermott (2003/2004) identified obtaining financial assistance with childcare, housing, and tuition and having support from family and community as factors that

allowed low-income single mothers to persist. Specifically, in regard to nursing students who were married and had a least one child, Gigliotti (2004) found that, regardless of age, receiving aid from family members was most important to decreasing their stress while attending college.

**Recommendation for Practice 7.** Community colleges would do well to provide a financial aid counselor dedicated to single-parent students to assist students to locate and secure unique financial resources available to these students that would lessen the barrier of financial disadvantage and improve retention rates.

Most participants in this study were required to work at least eight hours per week, in addition to balancing school and family responsibilities, in order to meet their living expenses. The stress associated with this need to work highlights the need for college administrators to investigate ways to secure additional financial aid resources for students who are single parents. Two students from one college shared that a Health Careers Grant was particularly helpful in providing them with needed financial assistance. College administrators would do well to lobby for funding, specifically earmarked for single-parents, eliciting the support of foundation boards and alumni organizations. Furthermore, college administrators should engage in legislative efforts at the local, state, and federal level to secure funding additional sources to help students to mitigate the financial difficulties associated with being a single parent and a student.

Community colleges would do well to have a dedicated financial counselor who could conduct student workshops to provide information on available sources of financial aid in the form of scholarships and grants. One participant shared her belief that resources are available but that students need to know where to find them. A dedicated financial consultant would make the finding of the resources easier. In addition, financial aid counselors could develop a workshop for students to teach them how to better manage their finances.

**Conclusion 4:** Informational support was identified by study participants as buffering their college-related stress and fostering their academic success. The primary sources of informational support were classmates, family members, and professors.

This conclusion was based on the following findings: S4.1, S4.2, S4.3, S4.4, S4.5, I4.6, I4.7, I4.8

The analyses of the survey data indicated that ten of the study participants ( $N = 11$ ) reported informational support as a type of support that buffered their college-related stress and fostered their academic success. In the survey, participants indicated they received informational support most often from, both, family members and classmates. During the interviews, eight of the participants spoke most often about classmates as the primary source of informational support; professors ( $n = 7$ ) were the next most frequently mentioned source of support. In the interviews, participants talked about the informational support most often received from classmates was in the form of peer study groups and through the use of social media, particularly Facebook. Additionally, participants described professors as a source of informational support by providing them with assistance to address academic issues, as well as, directing them to resources that were helpful in managing personal life crises.

House (1981) described informational support as the providing of advice, suggestion, directives, and information that a person can use in coping with personal and environmental problems. Affording this form of support allows individuals to help themselves, by making available useful information that enables the person to manage stressors.

Participants' responses to the survey and during the interviews confirmed the related literature suggesting the provision of informational supports helped to buffer college-related stress and foster academic success (O'Reilly-Knapp, 1994; Savitz-Romer et al., 2009; Williams,

2005). Like the findings in this study, other researchers found that functional supports provided by faculty to facilitate learning, such as direct guidance, providing academic help with study skills, and clarification of course content, were perceived by students to be helpful and contributed to their persistence in a nursing program (O'Reilly-Knapp, 1994; Shelton, 2000).

**Recommendation for Practice 8.** Given the high frequency of peer support, college administrators would do well to develop and implement peer study groups.

The findings from this investigation indicated classmates were a key source of informational support. Participants shared that using Facebook to connect with peers to clarify course content, to practice study questions, and to review lectures was helpful, especially for the times when they were not physically at the college. College administrators would do well to develop and implement peer support programs, especially in the form of peer study groups. This could be implemented by establishing a study group through Facebook, which could be monitored by a faculty member to ensure validity of the content being shared. In addition, college administrators could establish peer study groups at the college, led by an alumni student.

**Recommendation for Practice 9.** College nursing faculty would do well to evaluate the curriculum to allow for the integration of more hybrid and on-line classes to better support the needs of single-parents balancing work and family needs.

As participants in this investigation shared, the travel distance to the college and time constraints due to family and work responsibilities, impacted their academic success. Development of hybrid and on-line classes could afford students the flexibility they need to manage their busy lives.

**Conclusion 5:** Appraisal support was identified by study participants as buffering their college-related stress and fostering their academic success. The primary sources of appraisal support were classmates, friends, and professors.

This conclusion was based on the following findings: S5.1, S5.2, S5.3, S5.4, S5.5, I5.6.

Appraisal support (House, 1981) is characterized by the communication of information related to self-evaluation, which has been labeled by social psychologists as social comparison. According to House (1981), individuals evaluate themselves based on information provided by others, either directly or indirectly. House maintained that appraisal support is difficult to differentiate from the other forms of support.

The analyses of the survey data indicated that ten of the study participants reported appraisal support as a type of support that buffered their college-related stress and fostered their academic success. In the survey, ten of the eleven participants reported they received appraisal support from classmates. Notably, during the interviews, only five of the participants reported receiving appraisal support. Participants talked about family members ( $n = 3$ ) and professors ( $n = 3$ ) as providing support primarily in the form of positive feedback and affirmation regarding their performance in the nursing program. It was interesting to note that one participant reflected on the lack of appraisal support from her family, indicating her belief that this type of support would have been helpful to her during her time in the nursing program. With regard to the appraisal support received from faculty, participants relayed that the support consisted of feedback and encouragement that resulted in academic improvement.

Related research provided additional evidence that appraisal support, specifically in the form of faculty acknowledgment of students' efforts, contributed to students' persistence (Shelton, 2000; Williams, 2005). Other researchers (Hegge et al., 1999; O'Reilly-Knapp, 1994)

found appraisal support positively affected student retention and decreased the stressors associated with the demands of being a nursing student. The findings in this investigation confirmed those found in the literature; however the extant research has focused primarily on baccalaureate nursing students (Hegge et al., 1999; O'Reilly-Knapp, 1994; Williams, 2005). This study provided support for the importance of appraisal support for associate degree nursing students as well.

**Recommendation for Practice 10.** College administrators and faculty would do well to develop and implement programming for families of nursing students to increase understanding of the demands and rigor of the nursing program that will assist families to proactively develop support strategies that improve student success.

The findings in this investigation indicated families were a key source of appraisal support. However, families may not understand the demands specific to a nursing program. College administrators would do well to implement a program for students and family members, implemented prior to students' entry, that would provide information detailing the structure (classroom and clinical experience) and time commitments of the nursing program, so families are better prepared to understand the challenges the student will face balancing school, work, job, and family.

**Conclusion 6:** Single-parent associate degree nursing students participating in this study reported they wanted to provide for their children and to be economically self-sufficient. They also described possessing an internal drive that contributed to their ability to persist in the nursing program.

This conclusion was based on the following findings: I6.1.

The analysis of the interview data indicated that seven of the study participants ( $N = 11$ ) reported they wanted to provide for their children and to be economically self-sufficient. Moreover, four of the participants ( $N = 11$ ) talked about having an internal drive that contributed to their ability to persist in the nursing program.

Participants responses during the interviews, confirm the related literature suggesting adult learners are self-directed and motivated by both internal and external motivators. The adult learner, according to Knowles, Holton, and Swanson's (2012), andragogical model is based on several assumptions; they want to know the reason for learning before they engage in learning, see themselves as responsible for their her own decisions and are self-directed, bring varied life experiences to the learning environment, demonstrate a readiness to learn, and exhibit a problem-centered orientation to learning. Furthermore, adult learners are primarily motivated by internal factors, such as self-esteem and job satisfaction, as well as, external reasons, such as better jobs or increased pay (Knowles, Holton, & Swanson, 2012). Participants ( $n = 7$ ) in this study suggested that they were motivated to persist despite the difficulties that they encountered because of the promise of a better job and increased compensation that would allow them to better provide for their children.

Williams (2005) emphasized four major themes related to nursing students' persistence: (a) keeping up, (b) not giving up, (c) doing it, and (d) connecting. The reports of participants in this study strongly support Williams' second theme, not giving up. Specifically, the students reported that they were motivated to persist in the face of challenges and were supported in this persistence by the social supports provided by their peers, their families, and faculty members. Additionally, the reports of the students in this study provide confirmation of Williams' third theme, doing it. Students reported that the social supports they received allowed them to

maintain a positive mindset and unyielding drive to achieve their goal of becoming a nurse. Finally, students reports provided confirmatory evidence of Williams' fourth theme, connecting. Specifically, students provided evidence of the importance of their peers and members of the faculty as they persisted through difficult times.

Deutsch and Schmertz (2011) found that adult women reported that their children were a significant factor in their decision to return to school. The women who participated in Deutsch and Schmertz's study expressed the need to be good role models for their children which provided the impetus for them to return to school. Specifically, these women reported a desire to break out of their current economic situation through a better job. Additionally, Deutsch and Schmertz reported that these women managed multiple demands, including economic challenges, as they attempted to balance family and school responsibilities. In response, women in the study (Deutsch & Schmertz, 2011) reported that support from faculty, peers, and the institution aided their efforts to persist despite the challenges they faced. The findings from this study support those of Deutsch and Schmertz. The women in the current study reported a desire to be a positive role model for their children and were willing to endure difficult economic conditions in the short term (during the years as a college student) with the promise of increased economic opportunities in the long term.

Overall, single-parent associate degree nursing students participating in this study perceived that they had received social support that buffered their college-related stress and fostered their academic success. The findings from the present investigation, along with the conclusions and recommendations for practice, add insight into the social supports needed for this population. Presented next are recommendations for future research.



### **Recommendations for Future Research**

**Recommendation for Future Research 1.** Other researchers should replicate this study at other colleges in different geographical regions and with a larger sample.

This case study was conducted in a state-wide community college nursing program, comprised of a sample of 11 participants from four of six colleges that offered a nursing program. As this state community college was a system comprised of six colleges sharing a common curriculum, other researchers should replicate this study in colleges in other states and different geographical regions of the country, as well as with a larger sample size reflective of a diverse population to begin to determine whether geographic difference may exist in associate degree single-parent students' reports of the social supports that helped them buffer stress and be successful.

**Recommendation for Future Research 2.** Other researchers should conduct this study with a focus on students who are male single-parents and from purposefully selected diverse backgrounds.

The sample for this study was comprised of 11 associate degree nursing students who self-identified as single parents. All of the participants were female and eight identified themselves as White. Other researchers should replicate this study with a focus on recruiting male single-parents and students from diverse backgrounds to investigate their perception of social support.

**Recommendation for Future Research 3.** Other researchers should conduct an exploratory case study examining perceptions of social support received for students who withdrew from the nursing program.

The findings from this study indicated students in the sample believed that social supports, as defined by House (1981) buffered their college-related stress and fostered their academic success. Although not the focus of this investigation, students who had been re-admitted to the program after having been previously removed from the program reported several factors that had hindered their success and had led to academic failure in the nursing program. Other researchers should examine students' perceptions of the types and sources of support they report experiencing prior to withdrawing from the nursing program to compare and contrast with the findings from this investigation.

### **Summary of Chapter**

The purpose of this exploratory case study was to examine single-parent associate degree nursing students' reports of the social supports that buffered their college-related stress and fostered their academic success. The purpose of this chapter was to report conclusions and recommendations based on the findings reported in chapter 4. Recommendations for practice were made. Future research was also suggested for other investigators interested in examining the social supports that buffer college-related stress and foster academic success for single-parent associate degree nursing students.

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**Appendix A**

**Letter Granting Permission to Conduct the Study**



UNIVERSITY OF HARTFORD

Human Subjects Committee

December 10, 2014

Dawn Bunting

Dear Dawn Bunting:

Upon review of your modifications/clarifications by the Human Subjects Committee, your proposal, "*Single-Parent Nursing Students in Associate Degree Nursing Programs: The Social Supports that Foster Academic Success*," has been approved for one year according to expedited review guidelines established by federal regulation 45 CFR 46.110(b).

Approval of this research will continue until December 10, 2015. If you plan to continue the research beyond that date, please inform the Human Subjects Committee by email at least one month earlier.

Please keep in mind that it is your responsibility to notify and seek approval from this Committee of any modifications to your project, and that it is your responsibility to report to this Committee, any adverse events that occur related to this research. Reporting forms are available online at the HSC website, <http://www.hartford.edu/hsc>.

This institution has an Assurance of Compliance on file with the Office of Human Research Protections (Federalwide Assurance FWA00003578).

Congratulations and good luck.

Sincerely,

Stephen J. Misovich, Ph.D.  
Chair, Human Subjects Committee  
Cc: D. LaRocco

**Appendix B**

**Social Support Survey**

### Script for Survey and Interview Administration

Thank you for taking time to participate in my research study. Have you reviewed the informed consent form?

As you know, I am very interested in hearing about the help or supports that you feel contribute to your academic success in the nursing program. Social supports can be provided by many different people in your life such as family members, friends, peers, coworkers, professors and others and can be given in several different ways. Examples of the kinds of help you might receive are included below:

	Emotional	Appraisal	Informational	Instrumental
Examples	Caring, concern, understanding, listening	Feedback, recognition, information to evaluate your progress	Advice, suggestions, information about resources	Money, time, child care, transportation

First, I am going to ask you to complete a brief form that will tell me a little bit about you.

Second, I am going to ask you to complete a brief survey about you and school related stress. You will be asked to rate five statements that best reflect how often you experience stress and being a student. This survey should take about 5 minutes to complete.

Third, you will complete a survey about you and the help or supports that you feel contributes to your academic success in the nursing program. In it, you will be asked to identify the type of help or supports that you might get from specific individuals such as: family members, friends, classmates, and others. The survey should take about 5 minutes to complete.

Lastly, you will be asked to participate in an individual interview, which should take about 45 minutes to complete. During the interview I am going to ask you to reflect on a situation over the past few months in which you feel you received some type of help or support that helped you to succeed in the nursing program.



## Social Support Survey

Please do not put your name anywhere on the survey.

### Section I. Information about You

Please respond to the questions below by checking the response that best applies to you.

**1. Which college do you attend? Select ONE only.**

- Gateway Community College
- Naugatuck Valley Community College
- Northwestern Connecticut Community College
- Norwalk Community College
- Three Rivers Community College

**2. What is your age? Select ONE only.**

- 18-22
- 23-34
- 35-54
- 55+

**3. What is your racial/ethnic identification? Select ONE only.**

- Hispanic
- Black/African American
- White
- Asian
- American Indian or Alaska Native
- More than one
- Choose not to respond
- Other \_\_\_\_\_

**4. What is your gender?**

- Male
- Female

**5. How many children do you have and what are their ages? Please write in the age of each child.**

<b>Number</b>	<b>Age</b>
1	_____
2	_____
3	_____
4	_____
5	_____
6	_____

**6. Do you work? Select ONE only.**

- No
- 8-16 hr. / week
- 24-32 hr. / week
- 40 or more hr. / week

**7. Which of the following are sources you use to pay your college tuition? Select ALL that apply.**

- My own income/savings
- Parent income/savings
- Other family member income/savings
- Employer contributions
- Grants and scholarships
- Student loans (bank, etc.)
- Public Assistance

## Section II. Information about You and School Related Stress

Below are five statements about stress you might experience related to being a nursing student. Read each statement carefully. Then place a check in the box that best reflects how often you experience that type of stress.

School Related Stress	How often?					
	Never	Almost Never	Some of the Time	Most of the Time	Almost Always	Always
I experience stress from:						
1. Being a college student						
2. The day-to-day performances of tasks related to my courses						
3. Trying to balance my coursework with my job responsibilities						
4. Trying to balance my coursework with my personal responsibilities						
5. Daily hassles (aggravation related to my finances, work, personal life, time, environment, health, or future)						

Comments:

### Section III. Sources and Types of Help or Supports

Below is a list of people who might give you help and the type of help you might receive.

Check the box for any person who provides you help and the type of help provided.

<b>Source of Support</b>	<b>A. Emotional Examples:</b> caring, listening, concern, understanding	<b>B. Appraisal Examples:</b> feedback, assessment of success, recognition, information that helps you evaluate your progress	<b>C. Informational Examples:</b> advice, suggestions, advising, information about resources	<b>D. Instrumental Examples:</b> money, time, child care, transportation
<b>1. Significant Other</b>				
<b>2. Family Member(s)</b>				
<b>3. Friend(s)</b>				
<b>4. Neighbor(s)</b>				
<b>5. Work Supervisor</b>				
<b>6. Co-worker(s)</b>				
<b>7. Professor(s)</b>				
<b>8. Classmate(s)</b>				
<b>9. Clergy (Pastor, Minister, Rabbi, Imam)</b>				
<b>10. Other (Counselor, Social Worker)</b>				

**Comments:**

## **Interview Guide**

Thank you for volunteering to participate in this interview. Do you have any questions or concerns about this interview?

As I told you, I expect the interview portion to last between 45 minutes and one hour and you may choose to stop at any time.

With your permission, I would like to audio tape this interview. Please know that anything you share with me will be treated in confidence. Do you have any questions before we begin? May I turn on the recording device?

### **[RECORDING DEVICE IS ON]**

Let's begin!

I would like you to think about a situation, during your time in the nursing program, in which you feel you received some type of help or support that helped you to succeed in the nursing program.

1. Describe the situation that you have in mind, as if you were on video and I could see it. Tell me about who gave you the help, what kind of help you received, and why the help was effective.
2. What led up to this situation?
3. Exactly what did the person do that was especially effective? Why was the help particularly effective?
4. What was the outcome of the help you received?
5. What more effective help might have been offered?
6. Is there anything else you would like to share regarding what you feel contributed to your success?

**Appendix C**

**Recruitment Packet**

## Classroom Visit Script

Thank you for allowing me to come here today to speak with you. My name is Dawn Bunting. I am a doctoral student at the University of Hartford in the Educational Leadership program and also teach in the nursing program at Capital Community College.

I am here to invite you to participate in my research study about the help that you feel contributes to your academic success in the nursing program. My hope is your thoughts and ideas might help faculty and administrators to better understand what they can do to support students' like you achieve academic success.

To participate in my research, you must be at least 18 years of age, and a single-parent nursing student. If you agree to participate, we will schedule a mutually convenient time, date, and place to meet. I will give you a short survey to complete and interview you during the same session. Together, the survey and the interview will take about 55 minutes.

You will receive a \$20.00 gift card for your participation, whether or not you complete the survey or interview.

Please take one of these packets. In it you will find, a form that you can complete and return to me if you want to take part in my study. The packet also contains an informational flyer with my contact information and a form that describes your rights should you choose to participate in my study.

If you would like to participate, please complete the contact form and give it to me at the end of this visit. You can also email or call me. My contact information is on the flyer.

I look forward to your participation and having the opportunity to speak with you. If you have any additional questions, please feel free to contact me. It has been a pleasure speaking with you. Thank you for having me here today.



## Informational Flyer

### **Participate in a Study!!!**

If you are a **Single-Parent Nursing Student**, you can participate in a study about you and the help that you feel contributes to your academic success in the nursing program.

**You must be at least 18 years old and currently enrolled in your second year of the nursing program.**

### **Meet the minimum qualifications?**

If you volunteer, you will take a survey and participate in an interview. This will take about 55 minutes.

You will receive a \$20 gift card for your participation.

### **Want to volunteer?**

**Please contact researcher: e-mail [bunting@hartford.edu](mailto:bunting@hartford.edu) or call**

### Student Volunteer Contact Form

I would like to participate in a survey and interview related to the help that I feel contributes to my academic success in the nursing program. Completing both the survey and the interview will take about 55 minutes. I understand that the interview will be recorded. This will be scheduled at a mutually agreed upon date, place, and time. I understand all information will be kept confidential.

**Please provide your contact information, which will only be used in scheduling the survey and interview.**

**Name:** \_\_\_\_\_

**E-mail:** \_\_\_\_\_

**Phone:** \_\_\_\_\_

## **Appendix D**

### **Informed Consent**

### **Informed Consent Form**

The purpose of this study is to gather information about your reports of the help or supports that you feel contribute to your academic success in the nursing program.

- You must be at least **18 years old** to participate in this study.
- Participation in this study is **voluntary**. You may stop responding to the survey or answering interview questions and can **withdraw at any time** without adverse consequences or affecting your relationship with the University of Hartford.
- If you agree to participate, I will give you a short survey to complete and interview you during the same session. It will take you about 55 minutes to complete both. The interview will be digitally recorded.
- Your completion of the survey and the interview implies consent to use the information you provide in the study write-up and any presentations or publications.
- You will receive a **\$20.00 gift card** for your participation, whether or not you complete the survey or interview.
- You might benefit indirectly from knowing that your thoughts and ideas might help faculty and administrators to better understand what they can do to support students' academic success.
- Risks of participation in this study are not greater, considering probability and magnitude, than those ordinarily encountered in daily life. There are no apparent physical risks.
- When I write about you, I will give you a fictitious name. Your survey and interview responses will be kept confidential. They will be reported with the answers of others. No personally identifiable information will be shared.
- All survey responses, all audiotapes, and the interview transcript will be saved in a secure computer, and all paper files will be stored in a locked file cabinet in the researcher's office. Data will be destroyed five years from completion of the study.
- If you have any question about your rights as a research subject, please contact the University of Hartford Human Subjects Committee (HSC) at 860.768.4721. The HSC is a group of people that reviews research studies and protects the rights of people involved in research.

**Thank you for volunteering to participate in this study!** If you have any questions about this study, you may contact:

**Researcher**

Dawn R. Bunting

Phone:

Email: [bunting@hartford.edu](mailto:bunting@hartford.edu)

**Research Advisor**

Diana J. LaRocco, Ed.D.

Email: [dlarocco@hartford.edu](mailto:dlarocco@hartford.edu)

**Please keep this page for your records.**

## **Appendix E**

### **Emails Inviting Students to Participate in the Study**

### 1st E-mail Inviting Students to Participate in Study

Dear Students:

I am a doctoral student at the University of Hartford in West Hartford, CT and currently employed as a full-time nursing professor at Capital Community College. I invite you to participate in my study about the help that you feel contributes to your academic success in the nursing program.

You are eligible to participate if you are a single-parent nursing student, **at least 18 years of age**, and enrolled in your second year of the nursing program.

If you volunteer, you will complete a survey and an interview. We will schedule a mutually convenient time, date, and place to meet. Together, the survey and the interview will take about 55 minutes. You will receive a \$20.00 gift card for your participation.

Please review the attached informed consent form. If you want to participate, you can email me at [bunting@hartford.edu](mailto:bunting@hartford.edu) or contact me by phone at .

I look forward to your participation and speaking with you. If you have any additional questions, please feel free to contact me.

Sincerely,

Dawn R. Bunting  
Doctoral Candidate  
Email: [bunting@hartford.edu](mailto:bunting@hartford.edu)  
Phone:

## 2nd E-mail Inviting Students to Participate in Study

Dear Students,

Last week, I emailed you inviting you to participate in a very important study. I am reaching out once again, to encourage you to consider volunteering. This study is about you! The purpose is to find out the help that you feel contributes to your academic success in the nursing program.

You are eligible to participate if you are a single-nursing student, **at least 18 years of age**, and enrolled in your second year of the nursing program.

If you volunteer, you will complete a survey and an interview. We will schedule a mutually convenient time, date, and place to meet. Together, the survey and the interview will take about 55 minutes. You will receive a \$20.00 gift card for your participation.

Please review the attached informed consent form. If you want to participate, you can email me at [bunting@hartford.edu](mailto:bunting@hartford.edu) or contact me by phone at .

I look forward to your participation and speaking with you. If you have any additional questions, please feel free to contact me.

Sincerely,

Dawn R. Bunting  
Doctoral Candidate  
Email: [bunting@hartford.edu](mailto:bunting@hartford.edu)  
Phone:

### 3rd E-mail Inviting Students to Participate in Study

Dear Students,

Last week, I sent you a second email inviting you to participate in a very important study. I am reaching out one final time to encourage you to consider volunteering. This study is about you! The purpose is to find out the help that you feel contributes to your academic success in the nursing program.

You are eligible to participate if you are a single-parent nursing student, **at least 18 years of age**, and enrolled in your second year of the nursing program.

If you volunteer, you will complete a survey and an interview. We will schedule a mutually convenient time, date, and place to meet. Together, the survey and the interview will take about 55 minutes. You will receive a \$20.00 gift card for your participation.

Please review the attached informed consent form. If you want to participate, you can also email me at [bunting@hartford.edu](mailto:bunting@hartford.edu) or contact me by phone at

I look forward to your participation and speaking with you. If you have any additional questions, please feel free to contact me.

Sincerely,

Dawn R. Bunting  
Doctoral Candidate  
Email: [bunting@hartford.edu](mailto:bunting@hartford.edu)  
Phone:



## **Appendix F**

### **Facebook/Twitter Announcements Inviting Students to Participate in the Study**

**Facebook/Twitter Announcement #1****Participate in a study**

If you are a **Single-Parent Nursing Student**, you can participate in a study about you and the help you feel contributes to your academic success in the nursing program.

**You must be at least 18 years old and currently enrolled in your second year of the nursing program.**

If you volunteer, you will take a survey and participate in an interview. This will take about 55 minutes.

You will receive a \$20 gift card for your participation.

**To volunteer, please contact researcher:** e-mail [bunting@hartford.edu](mailto:bunting@hartford.edu) or call

**Facebook/Twitter Announcement #2****Participate in a study**

If you are a **Single-Parent Nursing Student**, you can participate in a study about you and the help you feel contributes to your academic success in the nursing program.

**You must be at least 18 years old and currently enrolled in your second year of the nursing program.**

If you volunteer, you will take a survey and participate in an interview. This will take about 55 minutes.

You will receive a \$20 gift card for your participation.

**To volunteer, please contact researcher:** e-mail [bunting@hartford.edu](mailto:bunting@hartford.edu) or call

**Facebook/Twitter Announcement #3****Participate in a study****LAST CHANCE**

If you are a **Single-Parent Nursing Student**, you can participate in a study about you and the help you feel contributes to your academic success in the nursing program.

**You must be at least 18 years old and currently enrolled in your second year of the nursing program.**

If you volunteer, you will take a survey and participate in an interview. This will take about 55 minutes.

You will receive a \$20 gift card for your participation.

**To volunteer, please contact researcher:** e-mail [bunting@hartford.edu](mailto:bunting@hartford.edu) or call

**Appendix G**

**Debriefing Script**

## Debriefing Script

**[NOTE: To be included with the Gift Card]**

Thank you so much for participating in my study and for sharing your thoughts and ideas about the help that you feel contributes to your academic success in the nursing program. My hope is your thoughts and ideas might help faculty and administrators to better understand what they can do to support students' like you achieve academic success.

Please accept this gift card as a token of my appreciation for taking the time to complete the survey and participate in the interview.

If you have experienced any stress as a result of completing this survey or interview and feel you need assistance, please contact the counseling office at this college. The number is **[respective college counseling office number to be provided here]**.

Again, thank you for taking the time to meet with me and share your thoughts.

It was a pleasure speaking with you today.

Sincerely,

Dawn Bunting

Email: [bunting@hartford.edu](mailto:bunting@hartford.edu)

Phone:

## CURRICULUM VITAE

Dawn R. Bunting

**EDUCATION**

- 2015                    **Edd., Educational Leadership**  
University of Hartford, West Hartford, CT
- 1994                    **Master of Science, Nursing Administration**  
University of Hartford, West Hartford, CT
- 1988                    **Bachelor of Science, Management**  
Central Connecticut State College, New Britain, CT
- 1977                    **Registered Nurse Diploma**  
St. Mary's Hospital School of Nursing, Waterbury, CT

**PROFESSIONAL EXPERIENCE**

- 1997 – present            Capital Community College, Hartford, CT  
Professor, Nursing  
Academic and clinical instruction for approximately 100 senior nursing students.  
Course Leader for senior level course  
Chair, CT-CCNP Program Committee  
Phi Theta Kappa Co-Advisor for CCC Chapter (2008-2013)
- 2012 – present            University of Hartford, Bloomfield, CT  
Adjunct Faculty - RN to BSN program
- 1998 – 2003              Bradley Memorial Hospital, Southington, CT  
Nursing Supervisor, Per Diem
- 1994 – 2000              Quinnipiac College, Hamden, CT  
Clinical Adjunct Faculty
- 1996 – 1999              Olsten Health Services, Farmington, CT  
Primary Care Nurse

1995 – 1996	Wilcox College, Middletown, CT Clinical Adjunct Faculty
1993 – 1994	New Britain General Hospital, New Britain, CT Nurse Manager
1986 – 1993	Hospital for Special Care, New Britain, CT Nursing Unit Director
1977– 1986	New Britain General Hospital, New Britain, CT Staff Nurse

### **PROFESSIONAL MEMBERSHIPS**

2014	Kappa Delta Pi, International Honor Society in Education
2005 – 2012	Connecticut League for Nursing Program Committee Member
1999 – 2011	St. Thomas School Board, Southington, CT St. Thomas School Enrollment/Retention Committee, NEASC Accreditation 2006-2008
1993 – present	Sigma Theta Tau International Iota Upsilon Chapter-At-Large
1986 – 2014	Association of Rehabilitation Nurses CT Chapter: Treasurer, 1989-1993, Board of Directors 1993-1995.

### **CERTIFICATION:**

2010 - present	Certified Nurse Educator (CNE)
1989 – 2014	Certified Rehabilitation Registered Nurse (C.R.R.N.)

### **RESEARCH:**

Bunting, D. B. (2014, April). *Developing Community College Supports for Non-traditional Nursing Students with Children*. Research Roundtable presentation at New England Educational Research Organization Annual Conference, West Dover, Vermont

Bunting, D. B. (2012, October). *Developing Community College Social Supports for Non-traditional Nursing Students with Children*. Paper Discussion presented at Northeastern Educational Research Association Annual Conference, Rocky Hill, Connecticut

Bunting, D. B. (1999, May). *Characteristics of Job Oriented Nurses versus Career Oriented Nurses*. Master's Thesis, Hartford, Connecticut

Bunting, D. B. (1991, November). *Standardizing Care Delivery in the Rehabilitation Setting*. Poster session presented at the Association of Rehabilitation Conference, St. Louis, Missouri



**PUBLICATIONS:**

Bunting, D. B. (2006). Chapter Reviewer, *Bowden-Children and Their Families: The Continuum of Care*.

Bunting, D. B. (1997).Chapter Reviewer, *Advance Practice Nursing in Rehabilitation: A Core Curriculum*.

**AWARDS:**

2015	Sigma Theta Tau International Iota Upsilon Chapter-At-Large Chapter Beverly Koerner Award
2015	Connecticut League for Nursing Ruth M. Olson Excellence in Nurse Education Award
2005	Nightingale Nursing Excellence, VNA Healthcare, Inc.
2005	HOPES Award, Archdiocese of Hartford