Title:
Transition From Military Healthcare Provider to Professional Nurse: A Qualitative Study

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References:


**Abstract Summary:**
This qualitative study describes the transition process of military healthcare provider to professional nurse from student veterans enrolled in an accelerated veteran to BSN track. Understanding this transition may contribute not only to the development of a conceptual framework; but also as a pipeline to address the nursing shortage worldwide.

**Learning Activity:**

<table>
<thead>
<tr>
<th>LEARNING OBJECTIVES</th>
<th>EXPANDED CONTENT OUTLINE</th>
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</thead>
<tbody>
<tr>
<td>1. The learner will be able to describe the transition process from military healthcare provider to professional nurse from the perspective of the student veteran.</td>
<td>Provide examples of student veteran comments describing their experiences and perspectives of the transition process from military healthcare provider to professional nurse.</td>
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<tr>
<td>2. The learner will be able to discover the types of resources, assets and liabilities involved in the transition process from military healthcare provider to professional nurse from the perspective of the student veteran.</td>
<td>Provide examples of resources, assets and liabilities the student veterans identify are involved in their transition from military healthcare provider to professional nurse.</td>
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**Abstract Text:**

**Background/Significance**

The transition from the military to higher education institutions presents a number of challenges for veterans, including adaption into a new environment and new role expectations. The transition can be traumatic and challenging, not only for the student veteran; but also for administrators, faculty and staff in higher education (Naphan & Elliott, 2015). The GI Bill affords educational benefits to veterans, and the end of the wars in Iraq and Afghanistan, provides the opportunity for more student veterans on college campuses and the passing of Post 9-11 GI Bill benefits in 2008. In addition, budget cuts by the Department of Defense has resulted in the downsizing of as much as twenty percent of the total active force, and has created an influx of military in higher education. This expected influx requires faculty, staff, and administrators to understand veterans in order to positively impact their college experience (Vacchi, 2012). There are many reasons why veterans join the military, one being to earn educational benefits in order to achieve opportunities available through higher education. As veterans move to civilian life they are faced not only with adjusting to civilian life, but also with taking on the role of a student as well. Several studies demonstrate the need to identify risk factors that affect the veteran’s successful transition and reintegration to civilian life and the student role (MacLean et al., 2014; Danish & Antonides, 2013).

**Global Implications**

According to Buchan, O'May and Dussault (2013), the nursing workforce throughout the world has been “deeply” affected by the global economic crisis of 2008 (p. 298). This crisis has ongoing global implications for nursing. Since demand for health care continues to grow across the world, many countries will experience an ever increasing nursing workforce shortage. Military healthcare providers may serve as a pipeline to address the worldwide nursing shortage. This conceptual framework may be translated to international usage to encourage worldwide collaboration for health care systems and policy development affecting the nursing workforce.
Purpose

The *purpose* of this qualitative study is to explore the transition (experiences and perspectives) of military healthcare providers to professional nurse from student veterans enrolled in an accelerated veteran to BSN track.

Aims

The specific *aims* of this study are to:

1. Describe the transition process from military healthcare provider to professional nurse from the perspective of the student veteran.
2. Discover the types of resources, assets and liabilities involved in the transition process from military healthcare provider to professional nurse from the perspective of the student veteran.

Hypothesis

Grounded theory investigates the actualities in the real world and analyzes the data with no preconceived ideas or hypothesis (Glaser & Strauss, 1967). Grounded theory is often adopted to formulate hypotheses or theories based on existing phenomena, or to discover the participants’ main concern and how they continually try to resolve it.

Study Design

This study used a qualitative, inductive, grounded theory approach to develop a theory of veterans’ transition experiences. Grounded theory guides the identification of key themes from individual veteran students’ cases, relying on their shared feelings and experiences. Grounded theory emphasizes the subjective thoughts and feelings used to make sense of the world. Grounded theory incorporates the principles of theoretical sampling, constant comparative analysis of collected data to discover core variables, and coding of relationships. Grounded theory processes include collecting and analyzing data concurrently, allowing researchers to start with basic questions to initiate the study and add or modify questions as concepts are identified through analysis. As concepts are identified through the process of ongoing analysis, categories may emerge to include groups of concepts (Corbin & Strauss, 1990). Coding of concepts and development of categories may be identified through the use of NVivo © (2012) software to analyze participants’ responses to questions. Study participants were asked to describe their educational experiences through the use of broad, open-ended questions, allowing participants to guide the interview. This study will interview students enrolled between 2016 and 2017 in a Veteran to Bachelor of Science in Nursing (VBSN) education track. Interviews will be conducted at various stages in the educational experience to determine if patterns emerge and how the patterns may relate to their transitioning roles from a military healthcare provider to a registered nurse. Researchers will be replicating a previous study, *From Combat to Campus: Voices of Student-Veterans* (DiRamio, Ackerman, & Mitchell, 2008).

In the DiRamio et al. (2008) study, key themes emerged related to veteran students’ transitions from military life to student roles. Transition is defined as any event or nonevent that results in changed relationships, routines, assumptions, and roles. DiRamio et al. (2008) used Schlossberg’s Transition Theory (1984) to develop a conceptual framework for understanding the challenges veteran students faced when transitioning from military service to college student. The Transition Theory includes three types of transition: anticipated, unanticipated, and nonevents. The context of transitions is evaluated within sets of four major factors including situation, self-factors, social support and strategies or coping responses.

Sample
A purposive sample of up to seven (7) Veteran to BSN students will be the first group interviewed. Purposive sampling will be used to select the “information-rich” student veterans enrolled in an accelerated veteran to BSN track in order to learn about their experiences and perspectives during their transition military healthcare provider to professional nurse. Purposive (purposeful) sampling is widely used in qualitative research for identifying and selecting information-rich cases related to the phenomenon of interest.

Initial study participants will be sought from the seven (7) Veterans to BSN students enrolled in 2016, including five males and two females, ranging in age between 25-36 years old. The initial participants will include military veterans who have served in the Army or Air Force from two to eight years’ active duty, with one currently serving in the active reserves. All participants have been rated in the military with a healthcare specialty including medic, medical corpsman, cardiopulmonary lab journeyman, and practical nurse. Six (6) of the participants were enlisted military members, and one had achieved an officer rating while on active duty.

Students enrolled in the 2017 three semester track will be recruited and interviewed at various stages of their educational progress, including first, second, and third semesters. The recruitment method will be face-to-face or via electronic video conferencing by members of the research team. The interviews will be face-to-face or via electronic video conferencing depending on the participant’s geographic campus location. The study will be conducted at five geographic campus locations throughout Texas associated with one academic institution. Participation is voluntary with compensation of a $10 gift card at the completion of each interview. Informed consent will be obtained face-to-face at each participant’s geographic campus location by a member of the research team. Results of the study will be made available to the participants upon completion of the study. A minimum of thirty (30) interviews will be completed to fully develop patterns, concepts, categories, properties, and dimensions of transition.

Study Procedures

Data collection will be conducted using a semi-structured interview format. An active interview approach will be used to ask eight (8) scripted questions. Interviews will be conducted by the members of the research team trained in active interviewing techniques and the use of the interview guide. Active interviewing considers the interviewers and interviewees as equal partners in constructing meaning around an interview. The key to active interviewing is to gain rapport with the respondents to avoid manipulating their responses. Participants will be given an opportunity to openly discuss feelings and perceptions of experiences in the nursing education track. There will be no personally identifiable data included in the reporting. Participants will have the option to withdraw from the study at any time without impact on their grade or performance evaluation. If during the interview the researcher determines that the participant appears unduly stressed, the interview will end. If an interview is stopped by the researcher due to participant distress, the researcher will offer support resources to the participant. Interviews will be audio recorded to capture the essential dialogue of the interviews and transcribed for analysis. Audio recordings will be maintained for two years by the researchers and will be destroyed in two years. Transcriptions will be stored on a password protected computer in the primary investigator’s office for two years and will be destroyed in two years. Researchers will write a memo in the interview guide following each interview to reflect what was learned from that interview. Memos are used to stimulate and record the researcher’s reactions and thinking.