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WHAT MADE THEM STAY? MALE NURSING STUDENTS' PERCEPTIONS ON
ENTERING AND COMPLETING NURSING SCHOOL

A dissertation submitted in partial fulfillment
of the requirements for the degree of
DOCTOR OF EDUCATION
to the faculty of the Department of
ADMINISTRATIVE AND INSTRUCTIONAL LEADERSHIP
of
THE SCHOOL OF EDUCATION
at
ST. JOHN'S UNIVERSITY
New York
by
Michael M. Sealy

Submitted Date _02/11/2020_

Approved Date _02/11/2020_

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ABSTRACT

WHAT MADE THEM STAY? MALE NURSING STUDENTS' PERCEPTIONS ON ENTERING AND COMPLETING NURSING SCHOOL

Michael M. Sealy

The purpose of the study was to explore the lived experiences of male nursing students and recent graduates of nursing school as related to their attraction to the profession, recruitment into a nursing school, retention and persistence toward attainment of a baccalaureate nursing degree. The participants in the study included male baccalaureate nursing students who were engaged in their last year of nursing school, and male recent graduates who successfully completed their baccalaureate nursing degree within the last three years. The participants were between 24 to 46 years of age. The study employed a phenomenological design. A semi-structured interview protocol was developed to conduct one-to-one interviews with six male nursing students and recent graduates regarding participants' perceptions of their lived experiences within their nursing schools and the profession. By understanding factors that influence male students' attraction to the profession, recruitment into a nursing school, and retention and persistence of male baccalaureate nursing students toward successful attainment of a nursing degree, recommendations for best practices and structural improvements within institutions of higher education can be used to mediate the nursing shortage by creating equity and access for gender inclusion in the profession.

DEDICATION

This study is dedicated to my mother and father. I wish you could have been here to see this! I love you and we'll be together again one day!

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Karen, you have always been my biggest cheerleader. With you beside me, as my partner through life, I can do anything. Thank you for all that you do for me. I love you!

David and Tristan, we endured some of the most trying times while I was working towards my doctorate. We lost not one, but both of our parents! Thank you for your patience, understanding, and your love!

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Pat and Charlene, your love, support and encouragement have meant a lot to me! Thank you for all that you have done for Karen and me! I love you both!

Fern, Jeanne, and Andrew - my fellow Quiet Revolutionaries! I'm proud to have had you three with me through this long journey! I am blessed to have met such wonderful and supportive friends!

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CHAPTER 1

Introduction

According to the Bureau of Labor Statistics (2016), in the United States of America, there are approximately 2,857,180 active registered nurses. Approximately 90% of those registered nurses are women (Minority Nurse, 2015). Between 1980 and 2013, the percentage of men in nursing went from 2.7% to 10.7% (Sherrod, Sherrod, & Rasch, 2005; Villarruel, Washington, Lecher, & Carver, 2015). Men who enter the profession of nursing often feel that female nurses and society marginalize them in general. They feel that they are *outsiders* or *others* (Juliff, Russell, & Bulsara, 2016; Meadus & Twomey, 2011; Sedgewick & Kellett, 2015). Contrary to current attitudes toward men in nursing, men have had a long-standing involvement in nursing practice, dating to a time before the birth of Jesus Christ. There is historical evidence from 250 B.C. that the first nursing school, founded in India, allowed only males to enter. “Only men were allowed to go to nursing school and work as nurses since women were not considered worthy enough to be nurses in ancient Indian society” (O’Lynn, 2013, p. 15).

There is further historical evidence of males assuming the role of nurses. The Romans employed specially trained male nurses in their military hospitals known as the *Nosocomi*. The *Nosocomi* were in use by the Roman Empire until the Middle Ages (O’Lynn, 2013). During the reign of the Roman Emperor Justinian (527 to 565 C.E.), hospitals were constructed throughout the empire, and he gave the bishops of the Christian church authority over the hospitals. These hospitals employed male nurses to take care of the male patients because, at the time, it was societally improper for women

to provide personal care to males they did not know, just as it was believed that it was improper for men to care for women (O'Lynn, 2013).

Through the centuries, there have been many religious military orders that provided nursing care to the sick. According to Nutting and Dock (1935), as cited by O'Lynn (2013):

Three major military orders operated hospitals in the Holy Land during the Crusades: The Knights Hospitallers of St. John of Jerusalem (now the Sovereign Military Order of Malta, or the Knights of Malta), the Knights of St. Lazarus, and the Teutonic Knights (p. 19).

These men provided nursing and healthcare services for soldiers, as well as the general population (O'Lynn, 2013). The Alexian Brothers, a nonmilitary religious group founded in 1057, provided nursing care for sick people in their homes. They built hospitals throughout Europe, which are currently active. Eventually, they came to the United States, where they built hospitals and nursing schools for men (O'Lynn, 2013).

During the late 1500s, St. Camillus de Lellis established a congregation of men who provided nursing care to the sick and dying. In 1591, the Pope created the congregation into a religious order called *The Brothers of a Happy Death*. They were given the red cross as their symbol by the Pope. It is from this group that the red cross has come to be an international health care symbol (O'Lynn, 2013).

The association of men with nursing was changed in the mid 19th century, during the Crimean War (1853 – 1856), when Florence Nightingale, the founder of modern nursing, was able to establish nursing as a women's occupation (Evans, 2004). Nightingale (1969) Florence believed every woman was a nurse because women take

care of someone else at some point in their lives. To advance her agenda of nursing strictly made up of women, Nightingale established schools of nursing that only admitted women (Nightingale, 1969).

During World War II (1939 – 1945), men in the United States who were nurses in civilian life, were not allowed to be nurses in the Military. They had to take positions (such as medics) which did not afford them officer status. Conversely, female ranks were commensurate with their education. Men argued since both men and women received similar training and males were allowed membership in all national nursing organizations and could be registered in every state of the Union, they should be able to be commissioned officers like their female counterparts (Threat, 2012). According to Evans (2004), concern for the status of male nurses appears to be a significant factor in the governmental decision to deny them commissioned officer status. By denying men the opportunity to be nurses, nursing ideological designation as a woman's occupation became pervasive. Female-focused fields of that time were considered to be lower skilled positions and less prestigious (Evans, 2004). The conventional wisdom that nursing is a woman's work established by Nightingale's reforms persists to the present day (O'Lynn, 2013).

In the United States, gender stereotyping has socialized many men and women from an early age that duties within the home are culturally associated with women and femininity. "Conversely, men and masculinities are associated with duties that represent physical rigor, strength, and power" (Harris & Harper, 2008, p. 27). "Male peers have also profound influences on boys' gender identities. Interactions with male peers

reinforce the early lessons about gender and masculinities that are learned primarily in the home” (Harris & Harper, 2008, p. 207).

Social, political, and legal changes during the 1980’s and 1990’s have allowed for greater career opportunities for women, which has contributed to a reduction in the propensity for women to choose nursing as a career (Buerhaus, 2008). According to Meadus (2000), women have been moving into professions traditionally perceived to be male-oriented such as medicine, dentistry, law, business, and pharmacy. As females entered professions once perceived as male occupations (Meadus, 2000), they have become more involved in other pursuits that were traditionally thought to be male-oriented, such as sports (tennis, basketball, and soccer). Women who play sports deal with many of the same issues that male nurses face. Both male nurses and female athletes face gender discrimination and questions regarding their sexuality (Cahn, 2015). Additionally, female athletes have their femininity and womanhood questioned (Cahn, 2015). These women are sometimes called *man-ish* or are sexualized by society. They are constantly compared to men (Cahn, 2015).

Another group that challenges the accepted societal gender roles are male elementary school teachers. “Research concerning men working in predominantly female environments has suggested that stereotyping can occur when gender norms are violated, such as men teaching at the elementary school level” (Lesser, 2016, p. 20). Male elementary school teachers, similar to male nurses, must deal with the stereotypes of being a sexual predator or a homosexual (Meadus & Twomey, 2011; Sargent, 2000). According to Sargent (2000), the feeling of working under a cloud of suspicion emerged as a theme when studying the perceptions of male elementary school teachers. The male

teachers were particularly cautious and careful not to touch children because they felt their touch may be misconstrued as a sign of pedophilia or homosexuality. Male intimate touch is also sexualized in nursing. Male nurses in the study conducted by Juliff et al., (2016) expressed a theme similar to the participants in the study by Sargent (2000). The participants, “acknowledged that intimate care by a nurse who is male can be an issue generally in instances when the patient is female, due to cultural beliefs and in gender sensitive ages, such as the adolescent patient” (Juliff, Russell, & Bulsara, 2016, p. 48). Male nursing students who participated in Smith (2006) expressed that female patients sometimes asked for another female nursing student to be present when they were attempting to provide care.

Purpose of the Study

The purpose of the study was to explore the lived experiences of male nursing students and recent male graduates of nursing school as related to their attraction to the profession, recruitment into a nursing school, and retention and persistence toward attainment of a baccalaureate nursing degree. By examining the lived experiences of the participants, their method of entry into the field of nursing could be further understood in terms of the categories of “finder, seeker, settler” (Moore, 2008; Simpson, 2005).

Literature indicates those who are *finders* of the nursing profession come across the field of nursing as they explore their career interests. *Seekers* actively search for roles in the field; often related to prior knowledge of the career from close relationships or personal experiences. *Settlers* in the profession often intended an alternate career but happened into the field as a second career (Moore, 2008; Simpson, 2005). Using an intersection of the Kuhn Cycle of paradigm shift, student persistence and retention in

their programs will be explored through the conceptual model of retention and persistence (Tinto, 2017), Expectancy – Value Theory of Achievement Motivation (Wigfield & Eccles, 2000), and Attribution Theory (Weiner, 2010). A phenomenological method was employed to investigate the lived experiences of male nursing students and recent graduates in order to identify factors that influenced their attraction to the nursing field, recruitment into a nursing school, and their retention and persistence in the program toward successful attainment of a baccalaureate nursing degree. By understanding factors that influence attraction to the profession, recruitment into nursing school, retention and persistence of aspiring male nurses, recommendations for best practices and structural improvements to the recruitment processes, student services, curriculum, nursing programs and culture within institutions of higher education can be used to mediate the nursing shortage by creating equity and access for gender inclusion in the profession.

Significance of the Study

The significance of this study is to find ways to possibly mediate the nursing shortage and create a more diversified nursing workforce through the inclusion of more male baccalaureate nursing students. In order to provide the best possible care for patients, it is important to find methods of educating diverse baccalaureate prepared nursing workforce. Initiatives within institutions of higher education can be implemented based upon a deeper understanding of what attracts males to the field of nursing, and the recruitment strategies which promote increased male enrollment. “However, it is not enough to attract qualified applicants. They also must provide resources to facilitate success so students will continue in the program, graduate, and become competent, caring members of the nursing profession” (Shelton, 2003, p. 69). The study provided an

understanding of the factors that promote equitable access for male nursing students; and the factors that influenced their engagement, retention and persistence. The data gathered through the study provided insight and contributed to the existing body of knowledge and literature to provide tools that administrators of colleges and universities can use for decision-making in providing academic and social-emotional supports to male nursing students; increasing recruitment efforts focused on potential male students; and increasing retention efforts. The school administrators can use the findings derived from the reflections of current nursing students as they evaluate initiatives, programs, and policies currently in practice and opportunities for growth and improvement. Other stakeholders can benefit from the research, including perspective male nursing students, their parents and families; professors / instructors, guidance counselors, career and college readiness coaches, researchers, textbook and curriculum resource publishers, and text book authors.

Research Questions

The following research questions guided this study.

1. How do male nursing students and recent male graduates describe their attraction to the nursing field?
2. How do male nursing students and recent male graduates describe their experiences of recruitment into a nursing school?
3. How do male nursing students and recent male graduates describe the factors that influenced their retention and persistence toward the attainment of a baccalaureate nursing degree?

Definition of Terms

Male Nursing Student

For the purpose of this study, male nursing student was defined as any nursing student in a baccalaureate nursing degree program that self-identified as being male.

Nursing schools

For the purpose of this study, nursing schools were defined as accredited institutions offering the educational opportunity for students to earn baccalaureate degrees, leading to state certification.

Recruitment

For the purpose of this study, recruitment were all the activities, initiatives, and programs that attracted males to the profession and into nursing school (Meadus, 2000).

Retention

For the purpose of this study, retention was defined as all of the resources, supports, and activities in which the school of higher education and the nursing school therein provided, and designed to intentionally influence the students' decision to remain engaged in school until they successfully completed their intended degree program (Tinto, 2007).

Persistence

For the purpose of this study, persistence was the pursuit, participation, and engagement in activities by the student designed to lead to the completion of an intended nursing degree, regardless of challenges that might arise (Duckworth et al., 2007).

Activities of persistence included consistent in-class attendance, active participation in

classroom and clinical settings, studying, completing assignments, and other requirements necessary for degree completion (Tinto, 2007).

Mentor

For the purpose of this study, a mentor was an individual with more experience who shared their lived experiences, and provide support, to the less experienced individual in a formal established structure (Fullick, Smith-Jentsch, Yarbrough, & Scielzo, 2012).

CHAPTER 2

Review of Related Research

Introduction

The following review of literature begins with a discussion of the theoretical framework. Then focuses on the current and projected nursing shortage. The remainder of the chapter is divided into 3 primary sections that discuss the research related to attraction to the nursing field, recruitment into a nursing school, and finally, a focus on retention and persistence toward the attainment of a baccalaureate nursing degree.

Theoretical Framework

The dominant canon of limiting nursing to a female-focused profession is no longer sustainable. According to Sherrod, Sherrod, and Rasch (2005), patients should be cared for by a nursing workforce that is representative of the diversity of the population it serves. Males comprise 49% of the population of the United States (United States Census Bureau, 2019). To achieve a representative proportion of males in nursing, the proportion of male nurses should be approximately 49% of the nursing workforce (Sherrod et al., 2005).

The theoretical underpinning of this study is a paradigm shift, also referred to as the Kuhn Cycle, developed by Thomas Kuhn in 1962. Kuhn developed the terms *paradigm*, and *paradigm shift*. The Kuhn Cycle consists of one pre-step called *Pre-Science* and the five main steps: *Normal Science*, *Model Drift*, *Model Crisis*, *Model Revolution*, and *Paradigm Change* (Kuhn, 1962). According to Kuhn (1962), new fields begin in *Pre-Science*; in this pre-step, the field has no working paradigm to successfully guide its work.

In the *Normal Science* step, there is a current model of understanding that is a widely accepted paradigm. When a field is in this step, progress can be made on its central problems. The *Normal Science* step is where a field will spend most of its time (Kuhn, 1962). In the current study, *Normal Science* is the paradigm of nursing as a profession that has been, and currently is, predominately occupied by women.

The *Model Drift* step is where continued research into the field creates new questions the current model of understanding cannot answer. As more of these questions appear, the model grows weaker (Kuhn, 1962). In terms of the current study, recent literature suggests that patient care and outcomes improve when care is provided by baccalaureate trained nurses that are representative of the population they are caring for (IOM, 2011; Sherrod, Sherrod, & Rasch, 2005).

When enough unsolved questions arise and the model cannot explain them, the *Model Crisis* step is reached. In this step the model is no longer capable of solving the field's current problems. It is a crisis because rationality is replaced by non-evidence-based practices (Kuhn, 1962). In the current study, the emerging crisis is resulting from an aging population and workforce, as well as an anticipated shortage in skilled and registered nurses.

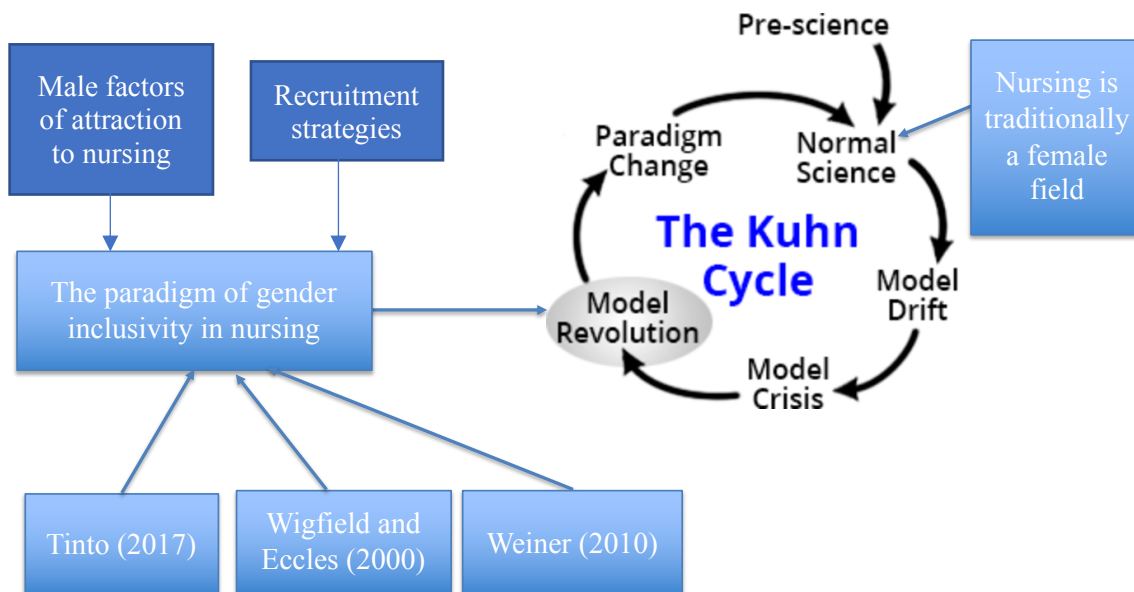
The *Model Revolution* step is a revolution in that the old model is so engrained in the lives and habits of the people using it, that they cannot understand or accept the new model. The resistance to the new model is known as paradigm change resistance (Kuhn, 1962). The central focus of this study resides in an exploration of the *Model Revolution*. Given the overwhelming majority of females in the field of nursing, as well as the widespread stereotypes and related stigma attached to males entering the field, a study of the

ways in which males are attracted to the field of nursing, are recruited into nursing schools, and the major factors of retention and persistence connects the current thinking with potential disruptions to the status quo.

The *Paradigm Change* step begins when a new paradigm is agreed upon by influential supporters (Kuhn, 1962). In this step the new paradigm is taught to both newcomers, as well as to those already in the field. Eventually the old paradigm is replaced by the new paradigm, which becomes the field's new Normal Science. At this point the cycle then begins all over again (Kuhn, 1962). For the purpose of the current study, *Paradigm Change* will be recommended for exploration in later studies.

The study seeks to explore the phenomena of successful male baccalaureate nursing students. What attracted them to nursing school? Why did they stay in nursing school? The phenomena will be explored through the examination of the factors, attributes, and variables that attract them to nursing school, affect recruitment of male baccalaureate nursing students into nursing school, and the factors that affect the retention, and persistence of the male nursing students through completion of their baccalaureate nursing degrees. Student persistence, and retention in their baccalaureate degree programs will be explored using the conceptual model of student retention and persistence (Tinto, 2017), Expectancy–Value Theory of Achievement Motivation (Wigfield & Eccles, 2000), and Attribution Theory (Weiner, 2010).

Figure 1 The Theoretical Framework



According to Tinto (2017) students and places of higher education have two different goals. Students want to persist their schooling and schools of higher education want to retain students. Tinto (2017) seeks to address the differing ideas by discussing a conceptual model of student persistence as seen through the eyes of students. Tinto (2017) discussed persistence as motivation.

Students have to want to persist and expend the effort to do so even when faced with the challenges they sometimes encounter. Without motivation and the effort it engenders, persistence is unlikely. Motivation, however, is malleable. It can be enhanced or diminished by student experiences in college. (p. 2)

The model proposed in Tinto (2017) was described thusly:

Given the goals that lead students to begin college, it is argued that the impact of student college experiences on motivation can be understood as the outcome of the interaction among student goals, self-efficacy, sense of belonging, and perceived worth or relevance of the curriculum. (p. 2)

The goal of students entering into an institution of higher education is to earn a degree.

This can happen at the institution in which they begin at or another one that they transfer

into. The students' motivations behind the goal are sometimes more in line with the intrinsic benefits while other students are more motivated by the perceived extrinsic benefits (Tinto, 2017). Some students can be easily derailed from their goal because of a weak commitment to the goal (Tinto, 2017).

Self-efficacy is a learned concept and cannot be generalized to all tasks and situations. Student persistence is built upon their feelings of self-efficacy. Students have to believe they can succeed in college (Tinto, 2017). "A strong sense of self-efficacy promotes goal attainment" (Tinto, 2017, p. 4). A person believing in their abilities is not merely enough to ensure they succeed. They have to also have a sense that they belong to the group or community. If they do not experience a sense of belonging, they are more likely to not persist in their program of study (Tinto, 2017).

Perception of the curriculum influence students' motivations to persist (Tinto, 2017). Curriculum that is perceived to be of value and worth their time will motivate students to persist. Curriculum deemed not worthy will have the opposite effect (Tinto, 2017).

Wigfield and Eccles (2000) discussed the Expectancy-Value Theory of Motivation. Expectation of success and values (i.e. incentive and attainment value, utility value, and cost) influence achievement choices, influence performance, effort, and persistence (Wigfield & Eccles, 2000). "Expectancies and values are assumed to be influenced by task-specific beliefs such as ability beliefs, the perceived difficulty of different tasks, and individuals' goals, self-schema, and affective memories" (Wigfield & Eccles, 2000, p. 69). These variables are influenced by individuals' perceptions of their

own previous experiences (causal attributions, locus of control), and gender roles, cultural stereotypes, and activity stereotypes. (Wigfield & Eccles, 2000).

Using the framework of the Expectancy-Value Theory (Wigfield & Eccles, 2000), the current study explored ways in which participants' beliefs and mental models influenced their persistence toward successful completion of their baccalaureate nursing degree. By understanding the motivations of male nursing students, nursing schools can seek to find ways to bolster student outcomes by leveraging incentives and other factors of retention.

Weiner's (2010) Attribution Theory was grounded in the work of Heider (1958), and the seminal book, *The Psychology of Interpersonal Relationships*. Building on a foundation of causal reasoning, Weiner explored the connections to education, in terms of the perceptions of achievement and failure and their root-causes (Weiner, 2010). Weiner (2010) distinguished the differences between reasons and causes in this way:

Causes are invoked to explain outcomes or end results, such as success and failure, rather than actions; they are antecedents instead of (in addition to) justifications and can apply to intended or unintended outcomes and to factors that may or not be controllable. (p. 558)

Further, Weiner (2010) explained that “not all outcomes elicit a search for understanding and causality” (p. 558). For the outcomes that did warrant further exploration, Attribution Theory places the emphasis on phenomena, rather than *true cause*, especially because situational contexts vary and significantly influence causal beliefs (Weiner, 2010). Weiner (2010) cautioned that while generalizations were not necessarily reliable, the following causes of success and failure were common:

The most common causes of success and failure are aptitude, ability (or a learned skill), immediate and long-term effort, task characteristics (such as ease or

difficulty), intrinsic motivation, teacher characteristics (such as competence), mood, and luck. (p. 559)

Weiner (2010) concluded by noting,

Expectancy and affect, in turn, are two key mediators to achievement-related behavior. This increased school motivation and decreased school dropouts can be affected by alteration of perceived causality. In sum, the study of education processes is intimately linked with attributional analyses. (p. 562)

Within the context of this current study, Attribution Theory (Weiner, 2010), guided the exploration of phenomena that contributed to the successful retention and persistence of male baccalaureate nursing students.

Possible strategies can be found that help schools of higher learning increase the number of males who are applying to and graduating from nursing schools. Through an increase in the amounts of male nurses entering the field creating more gender diversity, the nursing shortage could be mediated. *Paradigm Change* will emerge out of the model revolution. The paradigm of gender inclusivity will become the new *Normal Science* of nursing.

The Nursing Shortage

In the United States of America, there is currently a nursing shortage. According to The American Association of Colleges of Nursing (AACN, 2017a) there will be 1.09 million job openings for registered nurses by 2024. There are many compounding reasons for the nursing shortage. The reasons for the shortage include: nursing school enrollment not growing with the projected demand for nurses; a shortage of nursing school faculty; a higher number of older patients who need more specialized care; a higher number of older people who have chronic health conditions; nursing work settings other than hospitals; the high number of nurses who will reach retirement age by 2020; and

insufficient staffing levels of nurses that is causing stress and a loss of job satisfaction that is influencing many nurses to leave the profession (AACN, 2017a).

Nursing school enrollment is not growing with the projected demand for nurses because a shortage of nursing school faculty in both undergraduate and graduate programs is keeping the number of student enrollments in nursing schools at current levels (AACN, 2017a). Several factors are supporting the shortage of nursing faculty. First, many institutions require nursing faculty positions to have a doctoral degree. This is problematic because there are not enough nurses with doctoral degrees to fill the vacancies for professors. Specifically, there is a lack of nurses who are educationally qualified to teach (AACN, 2010). A factor contributing to the lack of master's and doctoral prepared nurses is that programs in nursing are not producing a large enough pool of potential nurse educators to meet the demand (AACN, 2017b). Another factor in the faculty shortage is that nurses can often make more money working in other types of nursing settings. The American Association of Nurse Practitioners states the average salary of a nurse practitioner, across different settings and specialties, is \$97,083 in contrast, the average salary for a master's prepared Assistant Professor in nursing schools was \$77,022 (AACN, 2017b). In 2016, U.S. nursing schools had to turn away approximately 64,067 qualified applicants from baccalaureate and graduate nursing schools due to insufficient faculty, clinical sites, classroom space, and clinical preceptors, as well as budget limitations (AACN, 2017a).

The nursing shortage is predicted to increase as nurses that are baby boomers continue to retire. Approximately 55% of the current RN workforce is age 50 or older, and at least one million registered nurses will reach retirement age within the next 10 to

15 years (AACN, 2017a). Not only is the nursing work force aging, but so is the population of people that they care for. Ortman, Velkoff, and Hogan (2014) described the following:

In 2050, the population aged 65 and over is projected to be 83.7 million, almost double its estimated population of 43.1 million in 2012. The baby boomers are largely responsible for this increase in the older population, as they began turning 65 in 2011. By 2050, the surviving baby boomers will be over the age of 85. (p. 1)

Attraction to the Nursing Field

Career exploration integrates multiple factors, including a general interest in a field, aptitude for the skills required to perform the work, previous knowledge of the jobs, availability, benefits, and a myriad of other considerations. A review of the current literature on the most prevalent factors that draw men into the profession include attributions of the field, such as work-life balance and the nature of providing care for others (McKenna, Brooks, & Vanderheide, 2017; McKenna, Vanderheide, & Brooks, 2016; Meadus & Towmey, 2007, 2011) and encouragement of personal relations, included the reflected appraisal indicating that their personal behaviors are valued in the profession and the influence of close friends and family members who are associated with the healthcare field (O'Connor, 2015; Rajacich, Kane, Williston, & Cameron, 2013; Yi & Keogh, 2016). Throughout the literature on factors that motivated males to enter into the nursing field, potential barriers, including negative stereotypes, relatively few role models, and general stigma related to entering a nontraditional field emerged as challenges that had to be overcome by males entering the field (Rochlen, Good, & Carver, 2009; Smith, 2006; Weaver, Ferguson, Wilbourn, & Salamonson, 2014).

Attributes of the Field

Simpson (2005) explored the lived experiences of men in non-traditional occupations. Forty semi-structured interviews with male workers who are elementary school teachers, flight attendants, librarians and nurses were conducted. Results suggest that the men fell into three groups: seekers (men who actively chose to enter the non-traditional occupation), finders (men who did not seek out the occupation but found it while in the process of making general career decisions), and settlers (men who tried a variety of different mostly dissatisfying masculine jobs before settling in their current traditionally female occupation) (Simpson, 2005). “While there is no discernible pattern between seekers and finders, settlers gave priority to intrinsic rather than extrinsic rewards” (Simpson, 2005, p. 15).

Most of the men claimed to have little interest in climbing the career ladder in their new occupations. Role strain may influence the men’s aspirations. Men expressed feelings of embarrassment, discomfort and shame. For some men the feelings were internal and were in relation to their own sense of self and self-worth. Other men held feelings of embarrassment or discomfort that were external in that they came from how others perceived them (Simpson, 2005). This was especially seen in regard to male friends and peers. The men felt they were stigmatized in relation to assumptions of homosexuality and of sexual perversion. To hide their careers men would deliberately mislead people as to what they did for work or would emphasize masculine aspects of the job (Simpson, 2005).

Meadus and Twomey (2007) used a questionnaire to survey 62 male registered nurses on their reasons for entering the profession and what they perceived as the barriers to being employed in a predominantly female-oriented profession. Open-ended questions

allowed the participants an opportunity to provide recommendations regarding recruitment and their satisfaction with their choice of career (Meadus & Twomey, 2007). The findings showed the reasons for becoming a nurse were career opportunities, job security, and salary. Other reasons were the opportunity to travel and having a family member in the profession, and they wanted to be part of a caring profession (Meadus & Twomey, 2007). The most commonly perceived barriers were sexual stereotypes, lack of recruitment strategies by both nursing school programs and other nursing professional venues, a female-oriented profession and lack of exposure to male role models in the media. Other barriers included low salaries, patients' preferences towards female nurses and how the participants' family viewed nursing as a career choice (Meadus & Twomey, 2007).

In recent years, nontraditional or mature male students have been encouraged into the nursing field because of their ability to assist in providing a solution to the current nursing shortage (O'Brien, Keogh, & Neenan, 2009). Research identified that nontraditional male students have concerns about work-life balance, family responsibilities, school work responsibilities, returning to fulltime schooling. They perceive having more difficulty than traditional students adjusting to school; have problems writing essays, and experience gender bias.

The purpose of this study was to explore the phenomenon of being a male in undergraduate nursing baccalaureate program that is predominately female. Meadus and Twomey (2011) used a phenomenological approach. The study had 27 participants from across a variety of programs. Five themes emerged from the research: *choosing nursing*; *becoming a nurse*; *caring within the nursing role*; *gender-based stereotypes*; and

visible/invisible (Meadus & Twomey, 2011, p. 273). The reasons men chose nursing are job stability, opportunities, role models, and the opportunity to provide care. Meadus and Twomey (2011) found that men felt like they were intruders in the nursing field. The men experienced discrimination on patients' refusal of care based on verbally expressed preconceived notions of male nurses. Men also felt nursing education programs participated in gender bias. Men discussed feeling that they were singled out in class by being called on more often than their female counterparts (Meadus & Twomey, 2011). Additional findings included the bias evident in the wording and the imagery of text books are geared toward female students, the male students felt more alienation. Finally, retention and recruitment efforts are hampered by the barriers that were identified.

Moore and Dienemann (2014) examined if job satisfaction differed for men who entered nursing by choice, as a convenience after exploring other options, or as a second career. There were 249 participants who completed surveys. Moore and Dienemann (2014) found men across all entry paths to nursing were more likely to work in specialties other than medical surgical nursing. Second career men were significantly more likely to work in specialty practice. Additionally, they are more likely to want to continue in direct patient care or continue into advanced practice than those entering by choice or convenience early in their careers. Moore and Dienemann (2014) found no significant differences in job satisfaction between entry paths.

The study by Christensen and Knight (2014) examined the experience of men training to be registered nurses in New Zealand. Data was collected through an interview using semi-structured interview protocol. The main findings were how men are perceived within the profession and those factors which drew them to the profession. Christensen

and Knight (2014) found there was an element of hostility towards men in the profession from mature female students. Younger female students were more accepting of the male students. Perceived gender inequality in providing care to female patients was a barrier experienced by men. The factors which drew men to the profession were financial security, travel and career opportunities. Nursing was not a first choice for the male students. All worked in “traditional” male vocations such as the police, farming, horticulture and IT. Financial security, career longevity and the ability to move easily into differing specialties were attractive characteristics of the nursing profession (Christensen & Knight, 2014).

McKenna, Brooks, and Vanderheide (2016) surveyed 43 male nursing students to assess their characteristics, teaching and learning needs, and factors relating to their decisions to enter the nursing field. Findings show that there are multiple reasons why men choose nursing. Career stability, diverse practice opportunities, and a profession where they provide care to others were important factors. Participants were influenced to become a nurse through personal and family experiences in health care. The participants also had diverse job histories, backgrounds and life experiences.

McKenna et al., (2017) employed a descriptive design using a questionnaire with two open-ended questions to better understand individuals' motivations to undertake nursing as a second career and what they were seeking from that nursing career. The total population was 286 nursing students with prior degrees other than nursing. Findings suggested that participants found care to be central to a nursing career, and they wanted a career providing care to people. Further findings suggest lived experiences either direct or indirectly through family was an influential factor in pursuing a nursing career.

Participants reported that a wide range of media influenced participants perceptions of the field. “Findings reinforce the need for the profession to continue working to effectively market nursing in a realistic way to promote future recruitment” (McKenna, Brooks & Vanderheide, 2017, p. 26).

Encouragement of Personal Relations

Rajacich et al., (2013) explored concerns surrounding recruitment, retention, and work life satisfaction for male nurses working in acute care settings. Sixteen men participated in four focus groups. The findings were men commonly entered the nursing field through family encouragement or having friends or family in health care. Some entered because of longstanding interest, some as a second career or after working various other jobs after earning a degree. The final way men entered was after experiencing serious illness and hospitalization. Men continued in nursing due to the personal rewards from helping people, the flexibility of the profession, and financial stability. Men disliked the gendered label of *Male Nurse* because it singles them out and reinforces their minority status (Rajacich et al., 2013).

O’Connor (2015) conducted a study to investigate the experiences of men choosing to be nurses in Ireland. The participants of the study were 18 male registered nurses in a general hospital setting. The age range of the sample was 25 years to 58 years old. Single in-depth interviews were conducted with the participants using a semi-structured interview protocol. The findings included a variety of factors that were influential in helping the men choose to become nurses. Some of the factors identified in the study included previous work as a care assistant or a porter in the hospital, and

nursing home settings, helping to care for sick relatives in their homes and their personal experiences of illness and hospitalization (O'Connor, 2015).

The participants identified individuals who were influential in their decision to enter nursing school. The individuals included family members, friends and acquaintances who were already in the profession (O'Connor, 2015). Exposure to discussions promoting nursing as a career was considered by participants to be influential in their decision to become a nurse. One of the ways that some men come to the nursing field is that they have *fallen* into nursing by virtue of chance and circumstance. Mature entrants to school as well as school leavers both discussed falling into the field. This is portrayed as being in contrast to females in the nursing profession who probably had chosen nursing as a career from an early age (O'Connor, 2015).

According to Yi and Keogh (2016) being exposed early to nursing and other health care professionals is influential in male nurses' decisions to become nurses. Parental influence was a factor in male students going to nursing school. Exposure to the nursing field could include friends or relatives who were nurses and, other men who were in the field. Male nurses who had friends or relatives who were nurses are encouraged by them to consider nursing as a career (Yi & Keogh, 2016). The most common extrinsic motivating factors for male nurses were job security, job opportunity, and high salary. In addition, some male nurses chose nursing because of their perception of the reputation of nursing as a professional career (Yi & Keogh, 2016). Intrinsic motivating factors which are factors that are internally motivating and emerge from within the individual such as a sense of personal satisfaction and enjoyment. Intrinsic motivations of male nurses were

personal fulfilment, self-validation, a sense of altruism and caring, and their perception of nursing as a profession.

Barriers

The study by Smith (2006) employed a mixed method design to explore challenges experienced by nontraditional male students in a nursing program. Twenty-nine students aged 26-60 participated in the survey part of the study, while six participants were interviewed. Male participants were most concerned with work-life balance, balancing family responsibilities and balancing school work responsibilities (Smith, 2006). The perception of nursing as a female field was expressed by participants. Participants believed being a male was not a hinderance to opportunities. The lack of males in the clinical setting and in the faculty, and the use of female images in the nursing media reminded them that males were a minority. The participants reiterated a common issue of female patients not wanting a male nursing student, or wanting another female person present during their care (Smith, 2006).

Rochlen et al., (2009) examined factors predictive of work and life satisfaction, and gender-related work barriers among men in the nursing profession. The sample consisted of 174 men in the nursing profession in the United States. Participants completed questionnaires on gender role conflict, social support, gender-related work barriers, and work and life satisfaction (Rochlen et al., 2009). Findings suggested gender role conflict was associated with less social support, lower job skills, and less work and life satisfaction. Further findings suggest more social support from significant others, family, and friends was positively associated with the work and life satisfaction of male nurses (Rochlen et al., 2009). Male nurses who experienced less gender role conflict

about work and family relations, received greater support from their significant other, assessed their job skills more positively, and perceived fewer gender-based barriers in the workplace reported greater satisfaction with life (Rochlen et al., 2009). Finally, men who reported greater conflict in their work and family lives, lower self-assessed job skills, and less support from their families perceived greater gender-related barriers in their workplace (Rochlen et al., 2009).

The qualitative study by Weaver et al., (2014) was conducted to determine if men in the nursing profession as portrayed on television are subject to stereotyping and to explore the status and role of the men who are nurses in these programs. Male nurses on television are presented in contradictory ways that both expose and reinforce stereotypes. The majority of the characters reviewed in the programs did not conform to conventional ideas of masculinity (Weaver et al., 2014). Patients in the programs would assume the male nurse characters were doctors. The patient's assumptions reflect the real-life assumptions that people may make about male health professionals and their role in the health care field. Additionally, the male nurse character's sexuality is called into question due to his choice of profession. Men in nursing on television are usually competent but unimportant nurses. They are usually a prop, or a representative of a minority group, or are used to provide comedic relief. Even as the programs try to present an awareness of the problems facing men in nursing, they are in many ways reinforcing the men nurse stereotypes that are outside of conventional ideas of masculinity (Weaver et al., 2014).

Cottingham, Johnson, and Taylor (2016) conducted eleven audio diaries and 35 semi-structured interviews from 40 male nurse participants from across the United States

of America. The purpose of the study was to examine how heteronormativity and masculinity shapes men's experiences in nursing across interactions with colleagues and patients (Cottingham et al., 2016). Three main themes emerged (1) both heterosexual and non-heterosexual men distance themselves from homosexuality by rejecting the stereotype that men nurses are gay; (2) primarily heterosexual men use cognitive strategies to reconcile the feminine aspects of nursing with heteronormative masculinity; and (3) both heterosexual and non-heterosexual men manage distinct emotions as a result of the perceptions and the emotions of others who view the use of men nurses physical touch as sexual (Cottingham et al., 2016).

Recruitment into a Nursing School

A level of skilled training and education is a basic requirement to enter into the nursing profession. Both associate degree and baccalaureate programs currently support the prerequisite higher-education required for sitting for the registration exam, as well as meet basic requirements of potential employers. Selecting a nursing school and program that both offers and meets the needs of potential students can be challenging. Intentional recruitment efforts, including offering specialized opportunities and potential networking opportunities that may provide advantages when entering the workforce (Cottingham, 2014; Hayes, 2007; Rajacich et al., 2013; Sherrod et al., 2005), and making the often-difficult decision of which program to attend, factored into decisions made to enter a specific program (Agrey & Lampadan, 2014; Joseph, Mullen, & Spake, 2012; Stephenson, Heckert, & Yeager, 2016).

Intentional Recruitment Efforts

Strategies for recruiting men into nursing school programs have been discussed in the research literature. A recruitment strategy that some researchers have suggested is targeting males at an early age, such as students in middle school and high school (Cottingham, 2014; Rajacich et al., 2013; Sherrod et al., 2005). Schools of higher learning can use media that targets boys and young men that is de-gendered and racially diverse so as to lessen the stigma associated with male nurses (Roth & Coleman, 2008).

According to Hayes (2007) testimonials from male nurses should be included in the media. By showing examples of the perspectives of successful male nurses, young men and boys will be more easily attracted to the field. Hayes (2007) studied the recruitment practices for basic baccalaureate degree nursing programs in Ontario. At three universities 15 interviews of nursing faculty and institutional liaison officers were conducted, and recruitment publications and relevant institutional web sites were examined (Hayes, 2007). The recruitment activities are organized and carried out mainly at the institutional level to promote the university and its programs. The findings show recruitment efforts involve visits to secondary schools, on campus events, and dissemination of recruitment publications. School visits that are targeted are performed so that the most qualified applicants can be recruited. The on campus recruiting events give potential students the opportunity of a better view of the institutional offerings, the culture, and the social aspects of the campus (Hayes, 2007). According to Hayes (2007), schools mail handouts to prospective students, as well as use the internet to provided information to potential students. Nursing faculty can help to ensure nursing applicants receive relevant and accurate information to promote realistic expectations of nursing

education and practice, which may minimize student attrition and early withdrawal from nursing practice (Hayes, 2007).

Meadus and Twomey (2011) reiterate that there is gender bias evident in the wording and the imagery in nursing textbooks and other media used by nursing schools. School guidance counselors are the key to making the dissemination of de-gendered media an effective strategy (Cottingham, 2014; Meadus & Twomey, 2011). The guidance counselors are usually the school officials who young students receive information from about higher education and professions.

Deciding Factors of Enrollment

Joseph et al., (2012) explored which criteria are important for entering freshmen in selecting a university; how these criteria match up with students' views of the institution they ultimately attended; how students gained information about the colleges and universities they considered; and whether there are differences between United States' public and private university students' views on these topics. Surveys were conducted with 277 participants at two universities in the United States to compare the criteria that public and private university students use when selecting the colleges/universities to which they applied (Joseph et al., 2012). The importance of university selection criteria differs between those who attend public and private institutions Public university students top five criteria were quality education, accredited university, friendly environment, availability of financial aid and location. Private university students top five criteria were availability of financial aid, quality education, opportunity to receive a scholarship, an accredited university and reputation of the university (Joseph et al., 2012). Public university students rated quality education,

accredited university, friendly environment, location, facilities, acceptance rate and athletic programs as being more important than did private university students when deciding which college to attend. In comparison, private university students thought availability of financial aid, availability to get a scholarship, size of the university, faculty/student ratio, small class sizes and private university were more important than did public university students (Joseph et al., 2012). These findings suggest that university branding initiatives need to be customized by type of institution (Joseph et al., 2012).

Agrey and Lampadan (2014) found five factors that significantly influenced student decision-making on which institution of higher learning they will attend. Participants were either high- school seniors or students who had just enrolled for the first time at their chosen institution of higher education (Agrey & Lampadan, 2014). The factors include support systems, both physical (e.g. bookstore, guidance/counselling office) and non-physical (scholarships, credit transferability, spiritual programming); secondly, learning environment (modern learning environment and facilities, reputation, beautiful campus, library and computer lab) and job prospects i.e. high rate of graduates, being employed; thirdly having good sporting facilities; fourthly, a strong student life program (health care services, residential accommodation) and activities (wide range of extracurricular activities) and finally a safe and friendly environment (safe campus as well as supporting faculty) (Agrey & Lampadan, 2014). The previous five factors have the strongest influence on students' decision to attend an institution of higher learning (Agrey & Lampadan, 2014).

The purpose of this research by Stephenson et al., (2016) was to explore college selection in a consumer decision framework using a qualitative study. Participants

included 30 incoming first-year students. Results showed the participants of this study had an average of 3.03 institutions in their consideration set. Findings suggested four influential factors in college selection: image/reputation, cost, location, and availability of major. The findings showed that students included institutions from different categories in their consideration set. Those categories included public, private, small, large, religiously affiliated, etc (Stephenson et al., 2016). Results of this study showed the importance to many participants of having family or friends that attended the school. These students had a level of comfort and familiarity with their school choice due to the prior relationship. When asked what drew participants to the institution, many answered that the school offered their chosen major (Stephenson et al., 2016). Attraction to the institution included the cost or affordability of the school (Stephenson et al., 2016).

Campus visits were shown to have a profound effect on the draw to the university major (Stephenson et al., 2016). Participants stated that after their visit to the school it became their first choice (Stephenson et al., 2016). Results showed the positive and negative perceptions of relevant others as pertaining to the university mattered to participants (Stephenson et al., 2016). Regardless of the school's perceived size, perception of the size in relation to the desire of the students was influential over the choice to attend. Location was also a common response. Many participants chose the school because of the proximity to their home. The beauty of the campus was a draw to the college and beautiful was how they would describe the institution to others. Students felt that a campus that was warm and welcoming was attractive. Students describe a friendly staff and faculty as being attractive features of schools. Institutions should

realize that a holistic package is needed to attract students not just academics (Stephenson et al., 2016).

Retention and Persistence

Once the decision is made to enter the field and enrollment into a program has been accomplished, the focus shifts to the successful completion of the program. Significant distractions often present in the forms of pull and push factors (Ierardi et al., 2010; Leone & Tian, 2009; Sherrod et al., 2005). Pull factors are the ways in which factors outside of the school setting draw the students' attention away from their educational pursuits. Push factors are the difficulties students face within the school context. In an attempt to mediate the distractions that might deter a students' successful completion include the motivators for persistence (Duckworth, Peterson, Matthews, & Kelly, 2007; Guiffrida, Lynch, Wall, & Abel, 2013; Williams, 2010) and intentional retention efforts designed by the institution of higher education (Alfes, 2011; Blum, Borglund, & Parcels, 2010; Harmer, Huffman, & Johnson, 2011; Kenner & Weinerman, 2011; Stott, 2007).

Significant Distractions

In the study by Sherrod et al. (2005), students stated that few to no male faculty are available and they have few opportunities to work with male nurses when they are in the clinical setting. Similar notions about the lack of male role models were discussed by Ierardi et al., (2010). The students in Ierardi et al., (2010) expressed that the lack of male mentors was a barrier for them and they felt that the nursing instructor was one of the reasons that they could continue to be motivated. These barriers may make male nursing students feel unable to fully participate in the dominant culture of nursing (Sedgewick &

Kellett, 2015). An increase in the number of males in nursing academia, on all levels from faculty to deans, potentially can increase the visibility and contribution of males to the nursing field (Roth & Coleman, 2008). The student's experiences with faculty, preceptors, and other nursing role models, can either increase or decrease academic outcome expectations, depending on whether the interactions were perceived by the students as positive or negative (Shelton, 2012). Through listening to the perspectives of the students, factors contributing to reforms in their programs are able to emerge (Noguera, 2007).

The study by Leone and Tian (2009) identifies the possible push and pull factors that promote students leaving from a college and transferring to other colleges to continue their college studies. The sample consisted of 122 students who completed questionnaires and open-ended interviews. The results showed two types of factors called push and pull that effected if the student left or stayed in their school. The push factors are those factors from the original colleges that pushed the student out of the school. While the pull factors are those factors from their current school which pulled those students from their original colleges. In this case the most important push factors are the campus life, not enough financial aid, limited degree programs, poor location, and poor food service. Pull factors were nice campuses, good facilities, great faculty and interesting degree programs. Results showed that students leave most frequently in their freshmen, and sophomore years. People who played the most important role in the participants decision to change colleges were themselves and their parents.

Bradley and Renzulli (2011) offered a model of student dropout with three outcomes instead of the traditional two: in school, pushed out or pulled out. Push factors force a student out of school, while pull factors interfere with a student's commitment to his or her education. Reasons for being pushed out of school were school characteristics and academic achievement, including: participants did not like school, did not get along with teachers or students, were suspended or expelled, did not feel safe, did not feel as if he/she belonged there, academic issues or failure, and missed too many school days (Bradley & Renzulli, 2011). The reasons for being pulled out of school focused on environmental factors outside of school which were: got a job, was pregnant, became the father/mother of a baby, had to support his/her family, had to care for a member of his/her family, got married/planned to get married, and could not work at the same time. According to study findings one explanation of dropout cannot be applied to all (Bradley & Renzulli, 2011).

Sealy (2015) investigated the lived experiences of students as related to their disengagement from traditional public high schools, reengagement with alternative school programs, and persistence toward educational attainment. A phenomenological design using focus groups and one to one interview was employed to conduct the study. The study findings suggest that there are factors that push students out of school, as well as factors that pull students away from school (Sealy, 2015). Push factors were the interactions and systems in place within the school that did not support student engagement and graduation. Push factors included negative interpersonal relationships, limited academic achievement, and the unwillingness or inability to comply with school rules. "Pull factors were the situations, events, and interactions that happened outside of

the school setting” (Sealy, 2015, p. 86). Participants described physical and mental health concerns, shift in home lives, and compliance with educational policy as being pull factors (Sealy, 2015).

The purpose of the study by Ellis, Meeker, and Hyde (2006) was to explore men's perceptions of their experiences in a baccalaureate nursing program, to obtain a better understanding of what the experience of nursing school is like for male students. Ellis et al., (2006) used face-to-face audiotaped interviews with 13 male nursing students who were in their last semester at three baccalaureate nursing programs in Southern Louisiana. Four themes were identified: survival, differences, nursing school requirements, and career goals. Survival or just getting through nursing school was a major topic highlighted in the study. Participants viewed nursing school as being tiring, stressful, busy, and intellectually difficult. Many believed they might not have chosen nursing as a career if they knew how much time and effort were involved.

Ellis et al., (2006) highlighted differences in communication styles. The communication struggles that male nursing students face when, their communication styles are misunderstood by their female colleagues or their female faculty members was a problem. Men expressed wanting more male instructors to better the communication. Participants in Ellis et al., (2006) viewed their female classmates as “caring, organized, and helpful, but also moody and overly dramatic” (Ellis, Meeker, & Hyde, 2006, p. 524). The study participants felt that “men get to the point more quickly, and women take much longer when discussing a topic” (Ellis et al., 2006, p. 524). Because of the differences in communication styles, men felt like they did not fit in with their female counterparts. Another theme that came out of the research was that the time requirement for nursing

school was not conducive to work and family life (Ellis et al., 2006). Career goals of higher education and advanced practice were the final theme.

The purpose of the study by O'Brien et al., (2009) was to explore the experiences of a group of undergraduate mature nursing students in three Bachelor of Science in Nursing programs in the Republic of Ireland (O'Brien et al., 2009). A secondary aim of the study was to examine the gender differences in the issues they experienced. A mature student is defined as an individual who is 23 years of age or over. Twenty-eight students participated in three focus group interviews. Twenty-four females and four males were interviewed. Students discussed that it was hard returning to fulltime schooling, and that it was harder to be an older student than being a traditional age student. Essay writing was a major barrier that was difficult for the mature students to overcome (O'Brien et al., 2009). They expressed a need for more support in this area, and for revisions to the curriculum to more accommodate mature students. While students knew that there were support systems in place for them as mature students, they expressed not having time to use the supports. One support that was highlighted was other mature students. They felt that the other students kept them motivated to continue (O'Brien et al., 2009). Making time to study, work-life balance, and spousal support were all identified as being important to their success. Those with children expressed feeling guilty about not devoting enough time to them. Lastly, students felt glad despite the challenges they faced while in school (O'Brien et al., 2009).

The purpose of the study by Ierardi, Fitzgerald, and Holland (2010) was to investigate male students' perceptions of their associate degree programs. Ierardi et al. (2010) used qualitative descriptive methods to conduct their study. Ierardi et al., (2010)

found that men described their experience as being socially isolating. Male students felt the stereotypes of homosexuality and femininity that many attributed to male nurses as being burdensome. Men also felt that the teaching strategies employed in nursing schools were ineffective when applied to males. The lack of male mentors was identified as a problem for the men (Ierardi et al., 2010). The men stated that the nursing instructor was one factor that kept them motivated. The final theme identified in this study was that the men felt people believed that men held a higher place in medicine than did women. The male students discussed people mistaking them for doctors during their clinical rotations because they were wearing white lab coats (Ierardi et al., 2010).

Further findings of the previously referenced Meadus and Twomey's study (2011) revealed that men felt nursing education programs participated in gender bias. Men discussed feeling that they were singled out in class by being called on more often than their female counterparts (Meadus & Twomey, 2011). Additional findings included the bias evident in the wording and the imagery of text books are geared toward female students, the male students felt more alienation. Finally, retention and recruitment efforts are hampered by the barriers that were identified.

Sedgwick and Kellett (2015) studied whether there were any differences in feelings of belongingness between male and female nursing students during clinical practice experiences. A cross sectional survey called the Belongingness Scale–Clinical Placement Experience (BES-CPE) questionnaire. The sample was 462 participants in two baccalaureate nursing programs. No significant gender differences were found on overall (BES-CPE) or on esteem and connectedness subscales (Sedgwick & Kellett, 2015). However, male students demonstrated significantly lower scores on the efficacy

subscale ($p = 0.02$). This finding suggests that some men experienced some degree of marginalization and discrimination (Sedgwick & Kellett, 2015).

Men perceive further alienation through the imagery in textbooks and the language used by nursing school professors who refer to nurses with the pronoun *she* (Roth & Coleman, 2008; Sherrod et al., 2005). The message that is conveyed through the media and the nursing school professors reinforces the societal image of the nurse as female. The subtle reminders help to make male nursing students feel that they are out of place in the profession. In an earlier referenced study by O'Connor (2015) subjects discussed finding few popular images being connected to their sense of their jobs and some images of male nurses are offensive to them, such as Greg Fokker, in the movie *Meet the Parents*.

Historical contributions made by men in the field of nursing have been left out of the nursing curriculum. Nursing students have little to no knowledge of nursing before Florence Nightingale. The lack of historical male nursing figures is a big concern for male nursing students. Male students have expressed that the deficit of knowledge of historical male contributions causes a barrier for them entering the field of nursing (Roth & Coleman, 2008; Sherrod et al., 2005; Smith, 2006).

Motivations for Persistence

Grit is defined as perseverance and passion for long-term goals (Duckworth et al., 2007). Grit entails working strenuously toward challenges, maintaining effort and interest over years despite failure, adversity, and plateaus in progress (Duckworth et al., 2007). Duckworth et al., (2007) conducted 6 studies using surveys. In studies one and two, there were 1545 and 706 adult participants respectively. Results showed grittier individuals had

attained higher levels of education than less gritty individuals of the same age (Duckworth et al., 2007). Older individuals tended to be higher in grit than younger individuals, suggesting that grit may increase over the life span. Grittier individuals changed careers less often than less gritty peers of the same age (Duckworth et al., 2007). In study three, there were 139 participants. Results showed undergraduates at an elite university who were more *gritty* earned higher GPAs than their peers even though they had lower SAT scores (Duckworth et al., 2007). In studies four and five, there were 1218 and 1308 participants respectively. Result suggested grit was more predictive of retention at West Point than was either self-control or a summary measure of cadet quality used by the schools admissions committee (Duckworth et al., 2007). Among those who persisted at West Point, self-control was a better predictor of academic performance. In study six, there were 175 participants. Result suggested grittier competitors in the Scripps National Spelling Bee outranked less gritty competitors of the same age (Duckworth et al., 2007). The findings suggest that the achievement of difficult goals entails not only talent but also the sustained and focused application of talent over time (Duckworth et al., 2007).

Williams (2010) conducted interviews to uncover factors that influence students' persistence in the nursing major. The study population consisted of nursing students enrolled in a college of nursing in the Midwest who had completed nursing courses as freshmen, sophomores, or juniors. Four major themes that emerged were key to persistence in these students. The four themes were keeping up, not giving up, doing it, and connecting. Time management skills and using resources emerged as strategies students used to keep up. Participants spoke about not giving up, and having both negative and positive mindsets. The participants were motivated by the thought of

completing the nursing program. Students describe the multiple ways they persisted by connecting with family and friends. According to Williams (2010) beginning students must make new connections with others at the school. Students described that connecting with peers is vital to persistence. Participants spoke of being encouraged to persist by the positive feedback they received from a clinical instructor. Participants elaborated that connecting with patients helped them to self-identity as a nursing student.

McLaughlin et al., (2010) examine how gender, gender role identity and views of nursing careers assessed at the beginning of a nursing course related to course completion. 384 nursing students were given a questionnaire measuring gender role identity and perceived gender appropriateness of careers. Results showed males were more likely to withdraw from the program. There was no significant relationship between gender role orientation and course completion. (McLaughlin et al., 2010). The majority of nursing specialties were considered by participants to be more appropriate for women. Gender role identity was not a predictive factor of nursing students' course completion in this study. The participants with the least gendered views of nursing were more likely to withdraw from their course (McLaughlin et al., 2010).

Shillingford, and Karlin (2013) examined the role of intrinsic motivation in the academic pursuits of nontraditional students. The Academic Motivational Scale (AMS) was administered to 35 undergraduate students. The results of the study showed that participants had more intrinsic motivation than extrinsic motivation or amotivation. The findings suggested that intrinsic motivation is vital to the academic pursuits of nontraditional students (Shillingford, & Karlin, 2013). Therefore, rewarding the intrinsic

motivation of nontraditional students may help them to persist and have a more worthwhile college experience.

Guiffrida et al., (2013) surveyed 2,520 college students from two ethnic, socioeconomic, age and gender diverse colleges to test relationships between academic success and college student motivational orientation, conceptualized from a Self-determination theory (SDT) perspective, while also considering the moderating effects of background characteristics such as gender, socioeconomic status, race/ethnicity, and institutional type. Guiffrida, Lynch, Wall, and Abel (2013) described self-Determination Theory in the following way:

SDT is a theory of motivation, personality, and development that proposes that intrinsic motivation, or motivation derived purely from the satisfaction inherent in the activity itself, is more conducive to learning than extrinsic motivation, or motivation to achieve an external reward or to avoid a punishment. According to SDT, there are three primary psychological needs that, when satisfied, foster intrinsic motivation: (a) autonomy, which occurs when students choose to become engaged in learning because the subject and activities are closely aligned with their interests and values; (b) competence, which is the need to test and challenge one's abilities; and (c) relatedness, which is the need to establish close, secure relationships with others. (p .1)

In Guiffrida et al. (2013) there were four types of relatedness: (a) relatedness to school/faculty (RSF), indicating the desire to connect with college faculty/staff as a strong motivation for attending college; (b) relatedness to school/peers (RSP), indicating the desire to connect with other college students as a motivation for attending college; (c) relatedness to home / altruistic (RHA), indicating the desire to give back to people from home or make them proud as a motivation for attending college; and (d) relatedness to home / keep up (RHK), indicating the desire to maintain relationships with family and friends from home by attending college (Guiffrida et al., 2013). None of the four types of

relatedness were significantly associated with intention to persist. Guiffrida et al., (2013) found that those who attended college motivated by the need for competence were more likely to report intentions to persist. An additional finding suggested that men who were motivated to attend college to be connected to peers were significantly less likely than women to report intentions to persist (Guiffrida et al, 2013).

Findings indicated that students who attended college motivated by intrinsic needs for autonomy and competence were more likely to have higher GPAs and more intentions to persist than students who were not intrinsically motivated to attend college (Guiffrida et al., 2013). Attending college to be more autonomous was more important to the success of higher socioeconomic status (SES) students than lower SES students (Guiffrida et al., 2013). According to Guiffrida et al., (2013) peer relationships potentially may negatively impact GPA, but the relationships may also support persistence through social integration. Further findings indicated that white students who stated they were motivated to attend college to give back to their home communities indicated less intention to persist than did students of color who had a similar motivation (Guiffrida et al., 2013).

Anchors of Retention

To improve retention and graduation rates, institutions must begin by focusing on their own behaviors and establishing conditions within the institutions that promote those outcomes (Tinto, 2012). Long term improvement in retention and graduation must begin with efforts to establish campus conditions that are known to promote student success (Tinto, 2012). Tinto (2010) described four institutional conditions that are associated with student retention. These institutional conditions are expectations, support, feedback, and

involvement. Students expectations of the environment and of themselves due to their environmental experiences partially explains the students' actions (Tinto, 2010). Tinto (2010) went on to explain:

Though many students begin higher education knowing what to expect, others do not. Low-income students are typically the first in their families to attend college and as a result frequently do not have the sorts of shared knowledge, often referred to as cultural capital, that more affluent students commonly possess about the nature of the college experience and what it takes to succeed in college. They often do not know what to expect (p. 56-57).

Therefore, expectations should be clear and consistent. Expectations are broken up into three categories which are: those for success in a course, in a program of study, and in the institution (Tinto, 2010). These types of expectations are generally expressed through coursework and formal/informal advising, and mentoring that arises through formal and informal campus networks like those within student peer groups and faculty-student contacts (Tinto, 2010). Expectations about success in the classroom are primarily influenced in formal and informal ways by the faculty providing their syllabi, course materials, and engaging in conversations with students (Tinto, 2010). Students are more likely to succeed in places that have specific high expectations for their success, provide academic and social supports, frequently provide assessment and feedback about their performance, and actively involve them with other students and faculty, in learning on campus and in the classroom (Tinto, 2012).

Stott (2007) reported the findings of a qualitative study that investigated the factors influencing both the academic and clinical practice performance of undergraduate male nursing students. The sample was eight male nursing students aged 21 to 53 years enrolled in a Bachelor of Nursing course. The first theme was feelings of isolation or

exclusion from the academic and clinical settings. Students felt singled out when they were asked to perform tasks because they are male. One participant was told to remove his shirt so that the other students could see where Electrocardiograph (EKG) leads are placed. A second theme that emerged was concern about the ability to show care. A third theme was traditional gender roles. Finally, participants highlighted their enjoyment of the technical aspects of nursing (Stott, 2007). Retention strategies included teaching staff being made aware of their tendency to isolate male students; selecting gender neutral textbooks; making sure there are adequate male role models; providing opportunities for discussion of issues; be cognizant of gender differences in learning styles; and actively promote the technical aspect of nursing in the education (Stott, 2007).

Blum et al., (2010) examined simulation as a factor in the growth of entry-level nursing student self-confidence and clinical competence. The results suggested entry-level students' self-confidence and competence increased regardless of students being enrolled in traditional or simulation laboratory classes. One explanation for the results as suggested by Blum et al., (2010) is the effect simulation has on student self-confidence and competence can be obscured based on factors of student motivation, maturity, and high educational attainment prior to entry into nursing. Another explanation is that students in this study had to demonstrate appropriate introductory nursing assessment and skills safely no matter which teaching method was employed (Blum et al., 2010). The results of their study suggest that simulation is likely to be more beneficial when used in later semesters.

Alfes (2011) evaluated and compared the effectiveness of simulation versus a traditional skills laboratory in promoting student self-confidence and satisfaction with

learning among entry level nursing students. 63 first semester baccalaureate nursing students participated in the study (Alfes, 2011). Statistically students who were in the simulation group were more confident than students who were in the traditional group. According to Alfes (2011), students with higher levels of self-confidence had higher levels of satisfaction with learning and students with lower levels of self-confidence had lower levels of satisfaction with learning. Alfes (2011) supports using simulation experiences with entry level students as well as the need to provide students with various interactive learning methods.

Shelton (2012) examined a model of nursing student retention in nontraditional nursing students. Participants included 458 nontraditional nursing students who completed a questionnaire consisting of four sections: background of the participant, academic efficacy expectations, academic outcome expectations, and perceived faculty support. The participants were broken into three groups: students who persisted, those who withdrew voluntarily and those who failed academically. Results suggested students who persisted and were successful academically were more financially stable, had higher high school and college grade point averages than those who failed academically (Shelton, 2012). Shelton (2012) reported the following:

They had higher levels of both prior and expected education, and higher college grade point averages than those who withdrew voluntarily. Interestingly, there were no significant differences in prior education or expected education between students who persisted and those who failed academically. The only significant difference between students who withdrew voluntarily and those who failed academically was in college grade point average (p. 11).

Perceived faculty support was related to both persistence and academic performance. Students who perceived having increased support from faculty were more likely to persist until graduation and were more likely to be academically successful.

Students who perceived having more faculty support also were more likely to have higher expectations of earning a nursing degree (Shelton, 2012).

Zapko, Ferranto, Blasiman, and Shelestak (2018) examined student perception of best educational practices in simulation and to evaluate their satisfaction and self-confidence in simulation. Participants included sophomore, junior, and senior nursing students enrolled in the baccalaureate nursing program (Zapko et al., 2018). Over two consecutive years data was collected. Results suggested support for using serial simulation as an educational tool. Students felt satisfied with their experiences, felt confident in their performance, and believed that simulations were based on evidence based educational practices and were beneficial for student learning. Simulations can lead to increased student satisfaction and self-confidence (Zapko et al., 2018).

Kenner and Weinerman (2011) classified adult learners as people who are between the ages of 25 and 50. By understanding the differences between adult learners and traditional students, educators can provide specific tools to help adult learners integrate into the college or university setting and increase their chances for success (Kenner & Weinerman, 2011). Learning strategies must be framed in a way that allows adult learners to see the purpose of the exercises, otherwise adult learners may not see the value and may resist new strategies. Educators will need to incorporate repetition and variety into their educational strategies, in order to rid students of ineffective strategies they have learned in the past. These new strategies must be in direct competition with the adult learners' existing strategies (Kenner & Weinerman, 2011).

Evans, Hartman, and Anderson (2013) conducted a study to explore how for-credit Leisure Skills classes at a mid-sized southeastern university may lead to

engagement. The sample was class sections from five areas of the Leisure Skills curriculum. Leisure Skills is an academic program at a mid-sized university in the Southeast. Data was collected using focus groups. Three themes were identified enhanced sense of community, enhanced sense of self, and cross-disciplinary skill building. Within enhanced sense of community were subthemes of relationship building, school pride/connection, and campus resource knowledge. The participants made more social connections. They felt more connected to their school and were proud that the school provided something beyond academics. Finally, the participants discussed gaining a better understanding of the resources available to them at their institution simply by participating in Leisure Skills (Evans et al., 2013).

The theme of enhanced sense of self had subthemes of opportunity for self-improvement/introspection and confidence building. Participants felt they became more introspective and learned about their physical limits. As a result, the participants became more confident (Evans et al., 2013). The final major theme cross-disciplinary skill building identified the notion of learning skills that transcended a single discipline or area of study. Some participants learned skills that they could implement in their academic classes. Others gained lifelong and career skills such as learning to work in groups (Evans et al., 2013). Evans et al., (2013) concluded that a structured Leisure Skills program can allow students to build activities into their class schedule and can provide opportunities for both physical activity and other leisure pursuits essential to students' physical and mental health that contribute to students' engagement.

Shelton (2003) explored the relationship between nursing students' perceived faculty support and nursing student retention. The sample consisted of 458 nursing

students who were categorized according to their persistence: Students who had persisted continuously throughout a nursing program, Students who had withdrawn voluntarily at some time during a program, and Students who had been required to withdraw because of academic failure at some time during their program (Shelton, 2003). A questionnaire was used to gather data. The findings indicated that students who reported greater perceived faculty support were more likely to persist throughout a nursing program than students who withdrew either voluntarily or because of academic failure (Shelton, 2003). Faculty support has been found to promote academic integration. Students who integrate academically are more likely to be successful and persist (Shelton, 2003). Faculty support is both functional and psychological. Examples of functional support are monitoring academic progress of students, identifying problems, providing academic assistance with course content and study skills, referring students for learning support and counseling, goal setting, and helping prepare students for licensure (Shelton, 2003). Psychological support is also important in student retention. Students who persisted perceived more psychological support than those who did not. Psychological support included approachable faculty, having confidence in students, showing students respect, acknowledging students' successes, having patience with students, and having an interest in students (Shelton, 2003). "Psychological support provides an atmosphere conducive to learning and promotes students' self-efficacy" (Shelton, 2003, p. 74).

Smith (2006) discussed schools of higher education incorporating peer support networks into their nursing programs with a faculty person in the leadership role as a retention strategy. First year male students would be paired with third- or fourth-year male students to provide a supportive environment. Male nursing student retention can

also be promoted by placing them in mentor programs with other veteran male nursing faculty (Roth & Coleman, 2008; Shelton, 2003).

The purpose of the study by Sawatzky and Enns (2009) was to complete a mentoring needs assessment of full-time nursing faculty, with a goal to establish a formal mentoring program. The study sample consisted of 29 full-time faculty members who completed a six-item questionnaire that included room for qualitative comments.

“Themes from the nine qualitative responses included learning about the processes of the faculty; offer teaching support strategies; insight into role expectations, university policies, and protocols; and celebrating achievements” (Sawatzky & Enns, 2009, p. 148).

Findings showed that most stressors of new faculty were due to fitting into the academic environment and learning the practicalities of teaching. Caring was also found to be essential in a mentor. Desirable characteristics of a mentor participants cited were trustworthiness, respectability, willingness to share experiences, and being an approachable and effective listener. Participants perceived mentoring as a rewarding experience. In conclusion Sawatzky, and Enns (2009) discuss that a caring mentoring environment is an important and timely strategy for nursing education.

Harmer et al., (2011) described a Clinical Peer Mentoring (CPM) program that partnered 16 pairs of seniors (mentors) and sophomore (novices) BSN students to provide patient care on a Dedicated Education Unit (DEU) at a VA Medical Center. Participants completed an eleven-item survey to build an understanding of the implications of peer mentoring on both novice and mentor nursing students. Five major themes emerged: improved self-confidence, teamwork and collaboration, better clinical judgment, time management and prioritization, and understanding of the nurse educator role (Harmer et

al., 2011). Improved self-confidence was reported by both the novices and their mentors. The second theme was demonstrated when the groups believed CPM helped them become more collaborative. Many also reported the DEU staff was supportive and welcoming. Harmer et al., (2011) state this is a unique finding of this study. The participants discussed gaining improved skills related to time management and prioritization and gained better clinical judgment due to CPM. The last finding was mentors believed they gained a better understanding of the role of the nurse educator due to CPM. Harmer et al., (2011) believed nurse educators might find this study useful in the creation of new mentorship programs.

Heidelberg (2017) conducted a study to explore beliefs of Registered Nurses' regarding the preparedness of nursing students who have completed the DEU program. Surveys were given to 33 participants. Participants were required to have 2 years of experience as a clinical instructor in a DEU. Findings showed that participants agreed that the students were prepared to practice upon completion of the program. Another finding was that students became more confident clinically after completion of the DEU program (Heidelberg, 2017).

Fullick, Smith-Jentsch, Yarbrough, and Scielzo (2012) studied how individual characteristics of peer mentors and their protégés interact to reduce new-student stress. Participants were 271 college first-year students who took part in a formal peer-mentoring program. Participants filled out a 25-item survey. According to Fullick et al., (2012), mentoring was defined as a relationship where a more experienced individual provides support to the less experienced individual. The formal mentor was a role model that helped their protégé acquire knowledge about the field that the protégé will be

entering. Additionally, mentors have been found to help reduce the stress levels of their mentees. Mentees who were provided more psychosocial and career support showed increases in their stress reduction (Fullick et al., 2012). Mentors can further encourage retention and student persistence through the formation of intentional relationships. One attribute of these relationships is the perception of being cared for and cared about (Noddings, 2012).

Demir et al., (2014) conducted a study evaluating the effectiveness of a 14-week mentoring program for first year nursing students and their ways of coping with stress and locus of control. The study was a quasi-experimental study. Sixty-six first year students (mentees) and sixty-six fourth year students (mentors) maintained weekly contact providing information and support. “In order to determine the efficiency of the mentoring program, a Locus of Control Scale, the Ways of Coping Inventory and Mentoring Assessment Form were filled out by mentees” (Demir, Demir, Bulut, & Hisar, 2014, p. 254). Findings demonstrated that the mentoring program supported the mentees for problem solving, adaptation to university environment, self-awareness, self-confidence, and establishment of positive relationships with their mentors. Additionally, the students' internal LOC and their active coping with stress were increased by the program. Mentees stated that they benefited from the mentoring program. Demir et al., (2014) recommend that in nursing schools a mentoring program be used as an additional program to help students adjust to university life and the nursing profession, and to help them cope with stress and internal locus of control.

Another attribute of this type of relationship is the formation of positive academic self-concept in the student. Academic self-concept is the student's perception of their

ability or competence in an academic arena (Demetriou & Schmitz-Sciborski, 2011). According to Chickering (1969) academic self-concept can be positively influenced by student-faculty interactions. While academic self-concept speaks to student perceptions in their ability and competence; Self-efficacy beliefs are the individual's beliefs about whether or not the individual can perform a given activity which results in a desired outcome (Bandura, 1977).

Conclusion

In an attempt to mediate the nursing shortage gender inclusivity is a new paradigm that can expand the potential labor force. Studies have examined attributes of the nursing field that attract men to the career. Literature included factors such as work-life balance and the ability to care for others, as well as job stability and satisfaction. (McKenna et al., 2017; Meadus & Twomey, 2007; Moore & Dienemann, 2014; O'Brien et al., 2009). Research explored the motivation behind the decision to enter the field, including the influence of friends, family, and personal healthcare experiences (O'Connor, 2015; Rajacich et al., 2013; Yi & Keogh, 2016). The perception of the numerous barriers' males faced as they were making career decisions were researched. Amongst the barriers described, stigma and negative stereotypes, lack of visible role models, the imagery of nursing, unsupportive guidance in school and open hostility were discussed (Meadus & Twomey, 2007; O'Connor, 2015). The most commonly perceived barriers were sexual stereotypes, lack of recruitment strategies, female-oriented profession and lack of exposure to male role models in the media. Other barriers included low salaries, patients' preferences towards female nurses and how the participants' family viewed nursing as a career choice (Meadus & Twomey, 2007). Barriers that were

identified were the stigma of male nurses being gay, the lack of visibility of male nurse role models for men and boys considering nursing as a career; and career guidance in school not being supportive or encouraging of their decision to apply for nursing school. Additionally, school culture, particularly in all-boys schools, were discussed as being openly hostile to men becoming nurses (O'Connor, 2015).

As more males are choosing to enter the field of nursing, they are faced with the decision on where to pursue the education that allows them to earn their credentials. Intentional recruitment efforts by the institutions of higher learning include offering unique learning communities and experiences that may yield higher levels of placement in jobs post-graduation (Cottingham, 2014; Rajacich et al., 2013; Sherrod et al, 2005). The decision of which program a nursing candidate attends is complex (Agrey & Lampadan, 2014; Joseph et al., 2012).

Nontraditional students faced significant distractions both within the learning environment and outside of school. These factors, categorized as push and pull factors, were examined (Bradley & Renzulli, 2011; Leone & Tian, 2009; Sealy, 2015). The ways in which students were motivated to persist were also studied (Factors of retention were described as the intentional opportunities and resources offered by colleges and universities to promote student engagement and reduce dropout rates. Studies examined the retention in terms of the influence on nontraditional students.

Significant adversity participants faced while in the school environment included push factors such as communication gaps (Ellis et al., 2006); social isolation (Ierardi et al., 2010); and limitations of the curriculum, resources, and materials (O'Brien et al., 2009). Distractions that required attention of the participants to shift from in school to out

of school circumstances were noted as pull factors (Bradley & Renzulli, 2011; Sealy, 2015).

In an attempt to mediate the distractions of push and pull factors, participants exhibited focus on their persistence. Motivations for Persistence were the behaviors and dispositions employed by participants to remain engaged in their school programs. Studies suggested that grit, (Duckworth et al., 2007) keeping up, not giving up, doing it, and connecting (Williams, 2010); persistence as motivation (Tinto, 2017); and self-determination (Guiffrida et al., 2013) contributed to the students' willingness to engage with school until they graduated.

Additionally, schools provided anchors of retention, including clear and consistent expectations and a focus on developing student self-efficacy (Tinto, 2010); implementing practices to fit adult learning styles (Alfes, 2011; Blum et al., 2010; Kenner & Weinerman, 2011; Stott, 2007); and creating a culture of belonging in the learning community (Evans et al., 2013; Zapko, 2018). The influence of interpersonal relationships developed in school such as a supportive faculty (Shelton, 2003) peer supports and mentoring were studied for their effect on retention (Harmer et al., 2011; Roth & Coleman, 2008; Sawatzky & Enns, 2009; Smith, 2006).

CHAPTER 3

Methods and Procedures

Introduction

This chapter describes the methods and procedures used in designing and implementing this study. A review of the research questions is followed by a description of the design for data collection and analysis. The inclusion criteria are explained, as well as how participants were recruited and selected. The semi-structured interview protocol is delineated and finally, a discussion as to the trustworthiness, validity, and reliability concludes this chapter.

Specific Research Questions

1. How do male nursing students and recent male graduates describe their attraction to the nursing field?
2. How do male nursing students and recent male graduates describe their experiences of recruitment into a nursing school?
3. How do male nursing students and recent male graduates describe the factors that influenced their retention and persistence toward the attainment of a baccalaureate nursing degree?

Participants

Six participants fit the inclusion criteria and agreed to participate in the study. The participants included three male students that were in their senior year of a baccalaureate nursing degree program and another three participants that were recent graduates. Recent graduates were defined as male graduates who successfully completed their Baccalaureate Nursing degree within the past three years. The informant was a

registered nurse and the snowball effect was used to assist in the recruitment of the participants. The first participant gave the name of a colleague who fit the inclusion criteria and agreed to participate in the study. The third participant also shared the name of a colleague who fit the inclusion criteria and agreed to participate in the study.

Procedures for Data Collection

The study employed a phenomenological design. Following the Institutional Review Board approval, one-to-one interviews ranging in length from 20 minutes to 40 minutes were performed using a semi-structured interview protocol. The participants selected pseudonyms to maintain confidentiality during the study. The participants were given a \$10 gift certificate for volunteering to take part in the study.

Trustworthiness of the Design

To demonstrate the trustworthiness of the semi-structured interview protocol dimensions under study, qualitative validity and reliability were examined by conducting a pilot interview. A non-participating student who matched the inclusion criteria was invited to participate in a pilot interview in an attempt to validate the semi-structured interview protocol. The results of the pilot interview were used to modify both the interview questions and probing questions (Gay, Mills, & Airasian, 2012). Question 2.1 was modified to include a probe to elicit more information.

Descriptive validity was maintained by using participant quotes throughout the study to ensure accuracy in the representation of the participants' lived experiences. Theoretical validity was maintained based on how the results of the research literature paralleled the phenomena revealed through the lived experiences of the participants. (Gay et al., 2012). Interviewer reliability was addressed by reducing the influence of interview

questions by asking non-leading questions designed specifically to not intentionally lead participants to answer or respond in a specific manner (Brinkmann & Kvale, 2015).

Data Analysis Procedure

The purpose of this study was to explore the lived experiences of male nursing students and recent graduates as related to their attraction to the field, recruitment into their respective schools, and retention and persistence toward the attainment of a baccalaureate nursing degree. The framework underpinning this study used a phenomenological approach. A phenomenological design was chosen because phenomenology seeks to answer, “What is the experience of an activity or concepts from these particular participants’ perspectives?” (Gay et al., 2012, p. 12). The instrument for this study was developed following a review of the research literature. The following themes emerged as reasons in support of examination of males entering the nursing profession: recruitment; working in the nursing workforce; persistence toward educational attainment (see Table 1).

Table 1 Individual Interviews: Dimensions, Interview Questions, and Sources

Dimension	Interview Questions	Sources
Recruitment	1, 1.1, 1.2, 1.3, 1.4, 1.5	Cottingham, M. D. (2014) Meadus, R. J., & Twomey, J. C. (2011) Roth & Coleman (2008) Shelton, E. (2003) Sherrod et al., (2005)
Working in nursing workforce	2, 2.1, 2.2, 2.3, 2.4, 2.5	Ierardi et al., (2010) Noguera (2007) O'Lynn, C. (2013) Rajacich et al. (2013) Smith (2006)
Retention and Persistence Toward Educational Attainment	3, 3.1, 3.2, 3.3, 3.4, 3.5	Bandura (1977) Duckworth et al. (2007) Fullick, et al. (2012) Noddings (2012) Shelton (2012) Tinto (2012)

Data were digitally recorded and collected in a researcher field note journal to include descriptive and reflective field notes. The recordings were transcribed by a transcription application called Otter Voice Notes. The transcriptions were reviewed by an expert qualitative researcher by a peer checking process. After transcription, the data were coded and analyzed for emergent themes, patterns, and discrepancies in response to the previously stated research questions.

Researcher Role

As Banks (2006) indicated on the typology for cross cultural researchers, the researcher assumed the role of indigenous insider, which allowed for the opportunity to probe when concepts were introduced. The researcher self-identified as a male nurse who had previously and successfully completed nursing school. When introducing himself to the participants, the researcher shared this demographic information as an indigenous insider. The researcher was acquainted with two of the participants as the participants and researcher worked in the same facility. The other four participants were unknown to the researcher.

CHAPTER 4

RESULTS

Introduction

The purpose of the study was to explore the lived experiences of male baccalaureate nursing students and recent graduates from nursing school as related to their attraction to the profession, recruitment into nursing school, retention and persistence toward attainment of a baccalaureate nursing degree. The participants in the study included male baccalaureate nursing students who were enrolled in their last year of nursing school, and recent graduates who successfully completed a baccalaureate nursing degree within the last three years. A semi-structured interview protocol was developed and used to conduct one-to-one interviews with six male nursing students and recent graduates. The idea was to understand their perceptions about the nursing profession, including why they entered the field of nursing, their perceptions about recruitment, institutional engagement while in their nursing school and nursing career. By examining the lived experiences of the participants, their method of entry into the field of nursing could be further understood in terms of the categories of “finder, seeker, settler” (Moore, 2008; Simpson, 2005). The interview responses were coded for emergent themes. Following the development of codes, units of text from the interview responses in support of the codes were further analyzed to search for themes, patterns, and discrepancies. Presented in this chapter are the findings of the analyzed data.

Demographics

All of the participants in this study self-identified as male. Each participant was either persisting toward or attained a baccalaureate degree from a Commission on

Collegiate Nursing Education accredited nursing school. The six participants attended four different nursing schools, each a traditional campus located in a suburban area within the northeast region of the United States of America. Participants were asked to choose a pseudonym to maintain confidentiality. Their ages ranged from 24 to 46 years of age at the time of the interviews. Four of the participants identified as being currently married, while two were single or in a long-term relationship. Five of the participants spoke of having one or more children.

Table 2 provides a summary of the demographic information provided by the participants of this study, including their pseudonym, age in years, attraction to the field, current educational status, professional status, marital status, and paternal status.

Table 2 Description of Participants – Demographic Information

Pseudonym	Age (in years)	Attraction to the Field	Educational Status	Professional Status	Marital Status	Paternal Status
Jack	30	Seeker	Student	Non-RN	Single	Father of 2
Ryan	35	Finder	Student	Non-RN	Married	Father of 4
John	44	Seeker	Student	Non-RN	Married	Father of 1
Henry	46	Finder	Graduate	RN	Married	Father of 3
Bob	43	Settler	Graduate	RN	Married	Father of 4
Steve	24	Settler	Graduate	RN	Single	No Children

Jack and Ryan attended the same nursing school and were in their final year of their program during the interviews. Subsequently, both successfully graduated prior to the completion of this study. Jack was a *seeker* connected to his expressed interest in nursing from childhood and his admiration of his grandmother, who was also a nurse, while Ryan was a *finder*, as he was looking into a different career path in healthcare and became interested in nursing after getting to know a nurse professionally. John previously attended an associate degree program and dropped out in the last year of that program.

After a brief disengagement, he enrolled in a nursing school with a baccalaureate degree program in which he was in the final semester at the time of this study. John was a *seeker*. He was a patient-care assistant who, through the encouragement of nurses, decided to enter the field. Henry and Bob attended nursing school together and graduated within the past three years. Henry was a *finder*. He was in the Informational Technology field. After leaving the field, he became interested in nursing after consulting with friends who are nurses. Bob was a *settler*. He looked at, and pursued, many different occupations before settling on the nursing profession. Steve graduated from nursing school one year ago. Steve was a *settler*. Steve looked at nursing after realizing the field in which he was preparing for no longer interested him.

Finding for Research Question 1

How do male nursing students and recent male graduates describe their attraction to the nursing field?

Research question one allowed participants to describe what attracted them to the nursing profession. Themes that emerged from both students and recent graduates included attributes of the field, and the encouragement of personal relations. Within the themes of Attributes of the Field and Encouragement of Personal Relationships were the patterns that included Reputation of the Profession, Diversity of Clinical Setting, Work Life Balance, Providing Care for Others, Connected with Observed Traits, Consultation of Others' Lived Experiences, and Discrepancies which included Lived Experiences of Others Had a Negative Influence or No Influence. The themes, patterns, and discrepancies that emerged from the analysis of the attraction of the participants into the nursing field are shown in Table 3.

Table 3 Themes, Patterns, and Discrepancies: Attraction to the Nursing Field

Themes	Patterns	Discrepancies
Attributes of the Field	Reputation of the Profession Diversity of Clinical Settings Work-Life Balance Providing Care for Others	
Encouragement of Personal Relationships	Connected with Observed Traits Consultation of Others' Lived Experiences	Lived Experiences of Others Had a Negative Influence or No Influence

Attributes of the Field

Participants who had close, personal relationships with people in the nursing profession had opportunities to observe general attributes of the nursing field, exemplified through others. As participants expressed these attributes, there was an intersection of the ways in which they viewed themselves, the reflection of their self-identification within the career, and the opportunity to build upon attributes that they aspired to develop. Patterns that emerged within this theme included the reputation of the profession, diversity of clinical settings, work-life balance, and providing care for others. Presented below are sample units of text from the interview data in support of the themes and patterns.

Reputation of the Profession

One of the reasons that the participants were attracted to nursing was because of the reputation that the nursing field holds. Students Jack, Ryan, and John used descriptors such as “dignity,” “composed,” and “the sky’s the limit” to describe their attraction toward the field of nursing.

Jack, a current student, recalled his initial interest in nursing began when he was young with the influence of his family of healthcare professionals. Jack's grandmother was a nurse and influential in him deciding to become a nurse. By recognizing the attributes of the career in her personal life, Jack knew this was an occupation he aspired to join. He reflected on the feelings of admiration he had toward his grandmother regarding her profession.

Well, my interest in nursing started very young. I come from a family full of healthcare professionals. My grandmother was actually a nurse. For as long as I can remember, I admired her profession because she always carried herself with such dignity.

Current student, Ryan, recognized the attributes of professionalism in nursing as evidenced by his discussion about a flight nurse he met while he was training to become an Emergency Medical Technician. Ryan had a reverential tone of voice as he discussed the attributes of the flight nurse. "I just... you see the jump suit, you see how well they handle themselves, how composed they are, and that's the type of, I think that's the type of care that I'd like to deliver."

John, a current student, elaborated on his feelings toward the reputation of the nursing field and the potential career growth the field afforded him. "I mean a Patient Care Assistant is nothing to say alright it sucks or anything bad, but it's a vast difference in my opinion. To be a nurse, that's a career right there because the sky's the limit." While John's words described how he felt about nursing, John's tone of voice also conveyed the admiration he felt for the nursing profession.

Diversity of Clinical Settings

Nurses can be found in a variety of work settings. The diversity of the occupation was important in motivating the participants to consider nursing. The participants

discussed the various settings nurses can be employed in, and the flexibility of the career in regards to their work life balance and the accommodating schedule as being factors that attracted them to the field. Jack and Ryan, current students, described their appreciation in the following ways.

Jack reflected on how, during his childhood, he would often visit his parents and grandmother at their places of employment. It was during this time his interest in the hospital setting and nursing as a career, were formed. As Jack matured, he also realized the flexibility of the healthcare field was desirable to his lifestyle.

It's kind of always been with me, you know, growing up... stopping in to like my parents' jobs and my grandmother's jobs. I've always taken a keen interest to a hospital setting. So, it's always been a mission of mine to work in the hospital. In what capacity, I didn't know.

Jack's tone was nostalgic when discussing how his interest started from visiting his family's places of employment in hospitals.

Ryan described his interests in the clinical setting stemmed from a prior school experience, as well as the ability to engage in patient care, as initial experiences that attracted him to the nursing profession.

I first became interested in nursing when I was actually in EMT [emergency medical technician] school. I was going to school to get my EMT license and I had to do a 200-hour clinical rotation in an emergency room. And that's where I fell in love with emergency nursing.

The adoration Ryan felt for emergency nursing was evident in his tone of voice.

Henry, a recent graduate also reflected on the variety of clinical settings that drew him toward the occupation. "It was very diverse and there's a lot you can do with nursing, you aren't secluded to one area." Henry had a bright affect and his tone of voice conveyed excitement when he spoke of the diverse areas of practice in the nursing profession.

Steve, a recent graduate, also described the diversity of work settings as an attribute that made nursing appealing.

I thought it was a good option and there are so many kinds of diverse sectors you can go into in nursing, and ways to further your career and education. And you know, there was a lot of options just being an RN [registered nurse] that I think I could delve into in the future. So, you know, there's a lot of diversity in that. And that's basically what caught my attention to it.

Additionally, as Steve described the many kinds of diverse sectors someone can go into in the nursing profession Steve became excited and his tone of voice brightened.

Work-Life Balance

Jack, a current student, discussed the attributes of nursing that were important to his ability to have balance between work and other commitments. Jack considered how the attributes of his employment would be key to his personal happiness and contentment.

As I got older, I realized that medicine gave me the flexibility that I felt like I needed in life to actually be happy. You know, be able to be content with whatever profession I chose and just have the flexibility to work in different areas and help different people. So that's why I chose nursing.

Jack's tone of voice conveyed the excitement Jack felt as he discussed the flexibility he needed for happiness, and the ability of nurses to work in different areas.

Providing Care for Others

Many of the participants, both current students and recent graduates, spoke about providing care to others as being a motivating factor in choosing nursing as a career. Some reflected on caring for patients, while others discussed caring for family members as being influential in their decision making.

Henry, a recent graduate, shared that his initial interest in nursing developed during the time he was dissatisfied with a prior job. He took time off and as he was home

and taking care of his own children, he began to consider the aspects of work that he enjoyed, including working with, and helping, people.

When I was unhappy with my previous career, I had some time to stay home with the kids. I had a lot of jobs throughout my life. One thing I always enjoyed about any job, regardless of what it was, it was working with a person and helping that person. So, nursing appealed to me. That I'd be helping people primarily.

Bob, a recent graduate, thought back to when he began looking into healthcare.

He did not know what field he wanted to enter. Bob heavily considered alternatives to nursing; however, ultimately realized nursing was where he would find the best fit to his career goals.

I spent about six months shadowing respiratory therapy, radiation therapy, radiology... all the other kinds of programs that were available in order to find something that I liked. After going through all the other disciplines... you know, I've always been interested in the responsibility of being a PA [physician's assistant] or a doctor. So, after going through all these other disciplines, I said, "I don't really feel like I'm doing anything. I don't feel like I fit here. I don't feel like this is what I really want to do." Finally, I started looking into nursing, and said, "You know what? This seems to be where my interests [are] and where I feel that I could do the most good." And that's kind of how I ended up in nursing.

Bob's tone of voice showed more excitement when he spoke of the decision to become a nurse.

John, a current student, reflected upon his time as a personal care assistant and discussed how his colleagues encouraged his pursuit of nursing because of the personal traits they saw in him. "I became a patient care assistant in 2006 or something like that... A lot of people told me I should try nursing because, I used to do so good with the patients." He also discussed ways in which he connected with patients and how those experiences were influential in discovering his passion.

I used to work on a vent unit as a patient care assistant and all of these patients couldn't talk. They were non-verbal and I basically took care of them. I used to talk to them, even though they were non-verbal and some of them would actually

give me some type of smile after my care. That really, thoroughly, touched me. I had always had that passion for helping people.

John's tone sounded passionate and proud when discussing the care he provided to his patients.

Steve, a recent graduate, discussed that while he was in high school, he started looking into healthcare careers. He realized the attributes of nursing were a good fit for his interests. Steve's tone of voice conveyed enthusiasm while discussing the attributes of nursing.

I definitely liked the scientific aspect of it. You know, when I was in high school, I was thinking about doing something in the medical field; pre-med or pharmacy. But I like that nursing had more of a holistic approach and kind of more people-centered approach. So, I felt like that combines my interest in the sciences, and you know, my personality. I'm a people person and thought it was a good option.

Steve then reflected about a time in his childhood when he was the caregiver to his elderly grandmother. Steve attributed this time with his grandmother as being influential in his decision to become a nurse. "I did live with my grandmother throughout my whole childhood and teenage life. She was, of course, elderly. I had to take care of her for a while before she passed away."

Encouragement of Personal Relationships

Participants described family, friends, and colleagues with whom they had personal relationships and how those people provided encouragement in becoming a nurse. Patterns that emerged within this theme included direct encouragement based on observed traits of the participant, and consulting others on their lived experiences. Two main discrepancies emerged. First, Steve described the lack of influence the nurses in his family were on his attraction to the nursing field. Second, Bob initially did not want to become a nurse because his wife was already successfully in the field. Knowing someone

who was a nurse did not necessarily support the participants' decision to enter the field. Similarly, sometimes having a close and personal relationship with a nurse initially dissuaded participants from considering entry into the field.

Connected with Observed Traits

Participants co-workers, friends and family saw traits in them that they thought would make the participant a good fit for a nursing career. John and Ryan who are students discussed the encouragement they received from others.

John, who had previous experience in the healthcare field as a patient care assistant, described being given encouragement by his colleagues. "You know, a lot of people told me I should try to get into nursing because I used to do so good with the patients."

Ryan, a student, credited a flight nurse as the person who really encouraged him to pursue a career in nursing. Ryan had a reverential tone of voice and was excited when he recounted the story of the flight nurse who encouraged him.

So, when I was in EMT school, I was at a level one trauma center, and I met a flight nurse who used to be an EMT for the town. We became friends and we talked a lot. He's the one who really encouraged me to go into nursing. He said, "it's great that you want to go and be an EMT, but I think that you would be great at nursing. You know that this is a really rewarding career. You get to really help the patients."

Bob, and Steve, each of whom were recent graduates, shared their lived experiences with traits in which they observed.

Bob shared he was personally associated with many people who became nurses. Bob recalled many people with whom he connected. As he began to share about his connections, he realized he knew quite a few nurses, and began to consider their influence on his decision. "I mean, my wife's friends, some people who we associate

with, were nurses, but no one in my family. Actually, that's not true. On my wife's side, one of her sisters is a nurse."

Steve shared that both his mother and grandmother were key influencers in his decision to become a nurse. Steve took care of his elderly grandmother while she was ill and his mother encouraged him to move toward a field that involved him caring for others. Steve emphasized his mother's words of encouragement as he recounted them. "You know, my mom would always say, 'You have to do something to take care of people; you'd be so good at this.' So, I think those two were influential on my path of becoming a nurse."

Consultation of Others' Lived Experiences

The lived experiences of friends and neighbors was influential in a recent graduate, Henry choosing to go into the nursing profession. Henry discussed consulting with his friends and neighbors, both male and female members of the profession, before making his decision to apply to nursing school. "Yeah, I had a couple of friends that were nurses; neighbors that I consulted. They were actually men... and I knew a few women, so I spoke with them, as well." Henry had a serious tone while he discussed consulting his friends and neighbors. One of the male nurses Henry spoke with described his connection into the field as a "calling." Henry had a tone of disbelief when he discussed the other nurse feeling like nursing was a calling.

Well, I had the one person I consulted. He was a very religious guy. I go to church, but I don't really run my life by the Bible. But his words to me were that he feels nursing is a calling and he felt that he was called into nursing. I wouldn't say that nursing is my calling in the way he described being called into nursing. I felt that I was just kind of meant to do this.

Discrepancy: Lived Experiences of Others Had a Negative influence or No Influence

In the case of Ryan, a current student, he wasn't influenced positively or negatively to join the nursing field by his family members who were nurses. Ryan discussed that while he did have family members who were nurses, they were not influential in his decision to become a nurse.

Actually, my grandmother was an Army nurse in World War II... My aunt, my mom's sister is also a nurse. [During the interview, Ryan considered the influence of his family members on his decision.] "I don't think so. My grandmother died when I was 17 or 18. I didn't spend a lot of time with my aunt. I just knew that they were nurses, but I wouldn't say that they were influential on me wanting to become a nurse or continuing down that career path.

Ryan's tone conveyed the doubt he felt when he stated "I don't think so." in regards to his aunt and grandmother being influential in his decision making.

Bob's relationship with his wife had a negative influence on his decision. Bob, a recent graduate, was opposed to becoming a nurse and explicitly stated his primary opposition was due to his wife's profession.

I tried my best not to be a nurse, simply because my wife was a nurse. I was trying to avoid the nursing field for that reason. I wanted to do something in the medical field, but didn't know what.

Findings for Research Question 2

How do male nursing students and recent male graduates describe their experiences of recruitment into a nursing school?

Research question two allowed both current students and recent graduates to describe what factors influenced their decisions to select, enroll, and ultimately attend a nursing school. Themes that emerged included intentional recruitment efforts made by the school and deciding factors in selecting a program. Intentional recruitment efforts

were the activities, programs, and other efforts the school purposefully undertook to attract male students into their nursing schools. Participants shared different reasons for choosing the schools in which they attended. Deciding factors of enrollment primarily stemmed from acceptance into the school and the participants' prior academic experience with the institution. Table 4 shows the themes and patterns that emerged as participants described the factors that influenced their decisions to select, enroll, and attend a nursing school.

Table 4 Themes and Patterns: Recruitment into a Nursing school

Themes	Patterns
Intentional Recruitment Efforts	Institutional Learning Experiences Leading to Employment
Deciding Factors of Enrollment	Acceptance into the Program
	Prior Academic Experience with Institution

Intentional Recruitment Efforts

One of the primary patterns of recruitment efforts was that each of the nursing schools in which the participants engaged, there was an accredited Bachelor of Nursing degree offered. The themes that emerged were the unique opportunities offered through the program and potential advantages for employment when entering the workforce.

Institutional Learning Experiences Leading to Employment

The different schools had unique features that were emphasized in recruitment materials that were attractive to the participants. Ryan, a current student, was interested in many different nursing schools. Ryan reflected on what drew his interest to the school he ultimately attended. He decided to attend [Name of University] because the school had the Dedicated Educational Unit program. This program offered students a chance to work one-to-one with a nurse at a local, participating hospital. Ryan cited that his decision to

attend [Name of University] was directly made in response to the Dedicated Educational Unit program. Ryan had an appreciative tone as he spoke about the Dedicated Educational Unit program.

Employment opportunities after graduation was discussed as a reason for choosing which school to attend. Bob, a recent graduate, chose [Name of College] because of the employment opportunities that are afforded to its graduates. Bob was deliberate about his area of focus and conducted research before making his choice. Bob sounded proud while he discussed his reasons for choosing his nursing school.

Well, before choosing which college I wanted to go to, I did some research on what the hospital systems look for in who they are hiring. And when you look at the different hospital systems in the area, the number one person that they hire is always from [Name of College]. The opportunity that going to [Name of College] gave me was an opportunity for pretty much being first in line for employment.

Deciding Factors of Enrollment

In addition to the recruitment efforts of the nursing school, participants based their decisions of enrollment on two main patterns: acceptance into the nursing school and prior experience with the school in an earlier academic pursuit.

Acceptance into the Program

Current students and recent graduates reflected on applying to more than one school. For some participants, the decision to enroll in a particular school came down to acceptance.

Jack, a current student, described the reason he chose to attend his particular nursing school. Jack had a flippant tone when he stated “The school picked me. It was the first school that accepted me.”

Henry, a recent graduate, applied to multiple schools and made the decision through a similar process as Jack. Henry's tone was serious as he stated "[Name of College] was the first school to accept me.

John, a current student, chose [Name of College] because he had previously attended an associate's degree nursing school program prior to dropping out. He was able to apply the credits he had earned to the new nursing school program and was accepted with advanced standing. John's voice conveyed pride as he stated "So, I decided to try again after a year and I applied. I was successful in being accepted into a bachelor's program where I've been accepted into advanced standing in [Name of College]."

Prior Academic Experience with Institution

Familiarity with the school was a reason that one participant discussed as being influential in the decision he made on which school to attend. Steve, a recent graduate, chose the school he attended because he had already graduated from the same institution and was familiar with the school. Steve reflected on his decision to attend [The] University's Nursing School.

I wanted to finish out my first degree first because I know that nursing school was hard to get into. There's a lot of competition to get in schools. So, I finished out my public health degree and then on to nursing school.

Findings for Research Question 3

How do male nursing students and recent male graduates describe the factors that influenced their retention and persistence toward the attainment of a baccalaureate nursing degree?

Research question three allowed current students and recent graduates to describe significant distractions to their educational pursuit and challenges they had to overcome

to be retained by and persist in the nursing programs to completion. The culminating event of the programs in which the participants were engaged was the conferral of their baccalaureate degree in nursing. Next, participants reflected on the ways in which they were motivated to remain engaged through and increase their persistence through supports outside of school, as well as the ways in which the programs designed anchors for retention. The themes, patterns, and discrepancies that emerged from the analysis of the factors of engagement are shown in Table 5.

Table 5 Themes, Patterns, and Discrepancies: Factors of Engagement

Themes	Patterns	Discrepancies
Significant Distractions	Pull Factors	
	Push Factors	
Motivations for Persistence	Desire to Make a Better Life for Family	
	Goal Orientation	
	Academic and Social-Emotional Growth	
	Creative Time Management	
	Supportive Interpersonal Relationships	
Anchors of Retention	Clinical Experience	
	Resources on Campus	Resources Offered but Not Utilized
		Resources Not Offered but Desired
	Meaningful Connections with Faculty and Staff	
	Mentorship	Mentorship Offered but Not Utilized
	Opportunities to Give and Receive Feedback	Did not Receive Feedback from Nursing School Faculty

Factors of Engagement

The factors of engagement were the ways in which the participants faced potentially significant distractions that conflicted with their ability to focus on school, as

their priorities were often challenged and how those distractions were mediated through strategies and coping skills. Further, participants identified areas through which the motivations for persistence mediated and school-based anchors of retention keep the participants engaged through completion of their program.

Significant Distractions

Participants identified many distractions that had the potential to adversely affect their persistence toward graduation. These distractions were categorized as pull and push factors. The pull factors were the challenges that participants faced outside of school. These included child-care issues, maintaining the ability to provide for their family, and balancing the demands of adult life. Push factors were the obstacles that participants faced as part of the unintended consequences of the instructional systems in which they were part of. Some of the push factors that emerged included difficulty with professors, lack of supportive learning environments, and not attending to diverse learning styles. Each of these pull and push factors had the potential to deter the participants from their desired outcomes.

Pull Factors

As adult learners, each of the participants described several ways in which going to school directly competed with priorities in their home life. Maintaining a job, in addition to attending nursing school and attempting to find the time to focus on family were the primary competitors for the attention and focus of the participants.

Jack, a current student, reflected on how starting a new family, working full-time, and going to school were challenges that he faced.

So, becoming a new father, you know, starting a family while actually starting a full-time nursing program, while being a full-time employee... that choice was a little weird, but it was actually a lot of work initially.

Jack further elaborated on how outside of school factors made nursing school difficult for him.

A lot of time you have to neglect your personal wants, your personal needs, or even your lifestyle. Things that you're used to, as far as... you know, communicating with friends on a daily basis or making more time for yourself, those things go out the window. Well, those things went out the window for me once I went to nursing school. Whereas, I used to be able to go out with my friends every now and then, whether we go to a restaurant or go to a party, or just to travel. I love to travel. So, I would travel like every couple of weeks, every couple of months. And once I got into nursing school, that completely stopped. It was like a shock to me. It was a little difficult to adjust to it in the beginning, but I did. Then when you start throwing in all the other obligations and things that are constantly going on with family... your life doesn't stop just because you're in nursing school. You still have your family members that are having issues. You still have people, loved ones that are either getting sick or that are passing. You know, relationships, friendships, either forming or dismantling. All of that takes a toll on your emotional state. For me, it was a lot.

Ryan, a current student, described the difficulties in maintaining a work-life balance as an adult learner. Frustration was evident in his tone of voice as he stated

Ah, well, the hardest challenges were, well, since I'm older, you know, with a family; it was tough to balance family life, school, work, and studying. That was difficult because you want to be there as a dad with your kids. But you also want to make sure you do what you're supposed to, to get through class. So that was tough, especially during capstone. I think that was the most physically exhausting part, doing those shifts. You know, doing the twelve-hour shifts, three days a week, plus I had my job and I also had to work and study. So, that was probably the hardest part.

During John's first attempt in nursing school, he struggled with completing assignments and meeting deadlines due to the competing priorities of taking care of sick family members. John exhibited a despondent tone as he stated "My son was like two years old. Everybody in the house was sick, including me. I was unable to catch up with some of the assignments."

Like the current students, each of the recent graduates described how balancing the conflicting priorities and obligations of school, work, and family responsibilities made it difficult for them to persist.

Henry discussed that his greatest challenges to persistence were time management and being older, with a family. Making time for all of his responsibilities was important to Henry. Henry had a serious tone and demeanor when he stated

My greatest hindrance I would say, was the fact that I was older... [I] was struggling with trying to raise a family, work, and going to school. So, I was juggling three things at once. Time management has to be of the utmost importance. I had to really figure out how my day was gonna go. So that was definitely my biggest challenge, I think, with going to school.

Bob explained that some of his greatest challenges were finding the time to fit all of his responsibilities into his schedule. Bob laughed nervously while discussing his responsibilities.

I'm a father of four kids, a husband; a husband with a wife. I have a house with a mortgage. I have cars. I have a lot of other responsibilities other than going through nursing school. So, there were many challenges getting through nursing school. Balancing school with work, family, my wife and her schedule and trying to juggle all of that was definitely not easy.

Steve shared that he also had to navigate similar conflicting priorities. "Another challenge would definitely be managing personal life, school work, and work."

Push Factors

Participants described several factors within the school setting that made retention difficult to maintain. Some of the factors pushing participants to become less likely to be retained included issues with faculty members and exclusion from learning opportunities.

John, a current student, recalled his first attempt in a nursing school. This was in an associate's degree program from which he was not retained. One of the contributing

factors to his not being retained was his perceived detrimental relationship with a particular professor. Earlier, John spoke of a time when he was faced with the conflicting priority of taking care of sick family members and he could not catch up with his assignments. When he attempted to reconcile that conflict with his professor, they could not find common ground. John's tone conveyed his aggravation with the situation he had with the nursing professor from his first nursing program.

My first time around, I was in an associate's program, where in my final year, I encountered some difficulties with a professor. Due to frustrations, I decided to withdraw from the program. It was really a challenging semester for me...

John thought back to the start of the issues with his professor.

I remember my first day of class, it started off really badly, you know, first impressions count, you know. And I believe in that. I just, I encountered crazy traffic from my house to the college and I actually came to the first class... I think I was 15 minutes late or something, but when I came in, everybody...everybody was already situated. After the class, I went up to the professor and I apologized. I said, "Oh I'm sorry." She made a comment and she said, "Yes, this will be the last time, right? Okay?" So, I really took that to be like, "Wow, this is crazy."

John continued to perceive that the relationship he had developed with his professor was negative. John reflected on another interaction he had with the same professor.

I actually went to clinical sick, and you know, I had to go home. One of the assignments needed to be done and my clinical professor said, "Alright, make sure I have it by Monday." The clinical was actually on a Friday. She [the nursing professor] interrupted her and said, "No, no, no, he'll give it to you, he'll send it to you in the afternoon." So, I was sick! I went home.

John discussed the final conversation that he had with the same nursing professor before he made the final decision to leave the nursing program. John was deeply influenced by the nursing instructor's statements. John was so distraught over the instructor's words, that he attributed his withdrawal from the program to those

interactions. It was about a year before John attempted to reengage his pursuit to become a nurse.

Before I left that clinical, she said, “You’re not ready to be a nurse.” I really took that to heart. I didn’t do anything for a year. I just worked my job. I really took those words to heart. Those words really had an impact on me.

Participants noted they were excluded from learning opportunities during some of their clinical rotations. Being excluded from learning opportunities affected the participants primarily during their rotation through obstetrics (OB). During this particular rotation, they were often denied learning experiences afforded to their female peers. The participants discussed not being allowed to provide care to female patients because the patients requested to have a female and declined the care provided by men. At times, the participants noted that patients asked them to leave when the patient realized that they were students. Additionally, participants were asked to leave the setting in some circumstances due to different cultures or religions of the patients. The participants did confirm that these missed learning opportunities were directly at the request of patients; not from their instructors.

Ryan, a current student, reflected on his experiences during his OB rotation. Ryan was forced to miss experiences because he was a male nursing student. This loss of opportunities occurred so often that he became desensitized to the occurrence. There was a tone of resignation in Ryan’s voice as he spoke of his experience.

You know, older female patients wouldn’t want a male in the room, especially during OB. During the OB rotation, that was a big one, right? I had to sit out of a lot of things because I was a male student. They didn’t want a male in the room during the birth or during different assessments. They didn’t feel comfortable. That happened in capstone a couple of times, too. So, I got used to it.

Henry, a recent graduate, explained how being a male nurse in a female-dominated field was a barrier. He discussed how the stigma of being a male nurse affected his learning opportunities during his labor and delivery clinical rotation. He also reflected on how his experiences with women from different cultures affected his education. Henry's frustration was conveyed through his tone of voice.

Being a male nurse was a barrier, because it's predominately a female field, and the stigma. Stigma is a bad word. The stereotype of nurses from patients... I had countless female patients, usually older women, who would not want a male nurse in the room. Being a male nurse was a big hindrance in my labor and delivery clinical. Yeah, some of the Muslim cultures refuse to have any men in the room. These women don't want any man; they only want women. So, that was definitely an obstacle.

Bob, a recent graduate, was also excluded from learning opportunities because he was a male and a nursing student. Bob did not think that there was anything wrong with missing these experiences because he did not want to be in those particular situations any more than did the patient. Bob discussed how he used his time during the OB rotation to do other tasks outside those related to obstetrics. Bob laughed nervously when discussing his obstetrics experience.

I spent my entire OB rotation finding other things to do. They didn't want me there feeling their fundus. And quite frankly, I didn't want to be there, either. So, we were all on the same page. There were other times that we were always introduced as students. There were patients that said, "You know what, I don't want a student. Please just do what you need to do and get out," to the nurse, or the professor, or whomever was introducing us. They were like, "Yeah, no, no, no students for me, please."

Steve described an encounter where a patient requested a more veteran nurse and not a student to perform tasks. Steve's words and tone conveyed acceptance as he stated

Patients are, for the most part, they're pretty open to having a student work on them. I did have a couple of times where they were like, "You know, I'd rather the nurse do that." And that's ok! You know we can't expect everybody to be open to having a student nurse. But for the most part, everybody was open to it."

Motivations for Persistence

Despite facing adversities and challenges, each participant had overcome the difficulties through mediating factors, which directly supported their continued persistence to completion. Themes that motivated current students and recent graduates toward overcoming distractions and maintaining persistence included their desire to make a better life for family, goal orientation, academic and social emotional growth, creative time management, and supportive interpersonal relationships.

Desire to Make a Better Life for Family

Participants spoke of their desires to make a better life for their families as a reason for their persistence. Participants also discussed their families seeing their example of working hard as another reason for their persistence.

Jack, a current student, described his motivation for persistence in terms of being a positive influence on his children. Jack's excitement about being a positive influence for his family was evident through his inflection of voice.

The incentive of actually doing this is for my daughter. Then on top of that, I ended up having another daughter while in the program. So, starting a family was probably my biggest thing. My children have been my biggest incentive to actually getting this done.

Henry's motivations for persisting expanded beyond making a better life, but also included modeling the tools for building a successful career for his family. Henry's voice and demeanor expressed his pride in his work ethic.

A lot of it for me was that I was doing this as a second career and my family was seeing me do this. I want to make it for my kids that it's never too late to do what you want to do and let them see dad with good study habits, going to class, working hard at something, and achieving something through hard work.

John, a current student, discussed similar motivations for his persistence. John stated, “My drive has been for a better life for myself, and my wife, and for my boy.

Goal Orientation

Goal orientation was a motivating factor for many of the participants.

Jack, a current student, described the mediators that allowed him to overcome the challenges he experienced in balancing the responsibilities in and outside of school. Staying focused on his goals helped him to make difficult decisions when facing conflicting priorities. Jack had a serious tone and demeanor as he stated

I guess with the support of my family, and of course, with the incentive of actually doing this for my daughter... So, I personally had to neglect things that I felt were very, very important to me at one time, in order to get through the nursing program. It wasn't always easy. Even after I graduated, I just could not help but to think or look back on everything that I went through, throughout the nursing program. Certain things that I couldn't deal with or couldn't cope with because I was in the midst of studying for a major exam or I would just focus on getting through a class and making sure that I pass or stay above my 3.0 GPA. Those things really, really were important to me. Not that my other personal things that I had going on outside weren't important to me, but I know that if I allowed those things to affect my schoolwork, it would not turn out good.

Ryan, a current student, described his motivation for persistence was achieving his goal of completing the program. “Just the end game. I knew as long as I got through it, I would go and achieve my goal. Plus, I really enjoyed it, as hard as school was.”

Similarly, Bob, a recent graduate, was motivated to persist by the thought of graduating with a bachelor's degree. Bob laughed nervously while he explained his motivation in this way. “I would say the fulfilling reward of realizing that, as a father of four, with all this c**p going on, that I was able to complete a bachelor's program from starting with zero credits.”

John, a current student, recalled that during his first attempt in nursing school, he was unfocused. He credits his need to succeed as being a critical influence in his ability to persist during his most recent attempt at completing nursing school.

I guess it's more of a need to succeed this time around. The first time around I didn't have the focus that I had really wanted. I guess everything snowballed one semester. This time around, it has been positive. I've been very successful in all of my classes.

John elaborated on how his family and personal mission to achieve professional goals were also influential in his ability to persist through the challenges he faced while in his nursing school. John had a prideful tone when speaking of achieving the goal of becoming a registered nurse.

Of course, my family is a priority, you know. I want to be able to have some type of self-fulfillment for me, knowing that I achieved... you know, this is what I set out to do, and I could look back and I could say, "Oh, I'm a registered nurse; I have a career now." So, I am, I mean, a patient care assistant is nothing to say, alright, it sucks or anything bad, but it's a vast difference, in my opinion. Like, you know, to be a nurse... that's a career right there because the sky's the limit.

In addition to creating a better life for his family, John aspired to excel within the career of nursing. "I just really want to make a profound change in the nursing field, also."

Steve, a recent graduate, described his motivation through shorter-term goals. His motivation came from looking forward to the grade that he would earn at the end of each semester. Steve had an excited tone of voice as he stated

During nursing school, you always look forward to that grade at the end of the semester. I think that's very rewarding to see your hard work paid off. You work hard, you study, and you get that A. I think that's a really big reward.

Steve also struggled with balancing the pressures of work and life during his time in school. He focused on making time for his interests and looking toward accomplishing his goals for inspiration. "It was a lot of time management and the best way to overcome

that was to focus on the finish line. Work hard throughout that time and rely on hobbies and fun times to look forward to, I guess.” Steve further elaborated on his beliefs that his self-motivation was how he was able to persist.

Just not relationships so much. No, it was more like internal; straight to the finish line. Like I think you need a lot of self-motivation to get through it. You know, like I said, everybody in the class was supportive; all my peers in the class. Nobody was there to put each other down. But I think you do have to have a lot of self-motivation to make it through because it gets exhausting at times.

Academic and Social-Emotional Growth

Throughout their time in nursing school, participants grew both academic and social-emotional skills that they were able to use both within the school setting and brought into their professional and personal lives. Skills including critical thinking, coping skills, collaboration, and perseverance were developed as the participants worked through the challenges they faced.

Jack, a current student, was able to overcome failing a class during his first year at school through self-motivation. Jack discussed how he overcame that challenge.

Overcoming those challenges were probably one of the hardest because it was something that I had to do on my own, you know, wasn't anything that anybody else could help me with, as far as my determination, and just getting over certain hurdles; certain setbacks and be able to work through that.

Ryan, a current student, found the critical thinking skills he developed to be very rewarding. Ryan had an appreciative quality to his voice while he shared his thoughts on the skills he developed during nursing school.

The critical thinking aspect was really drilled into me as a student, which really helped propel me through school. I think that I'm able to apply that to life in general, not just in work. So, I think all the different types of critical thinking skills really, really helped out a lot.

Ryan also discussed how his experience helped him to build confidence.

“Definitely building more confidence, working with patients, learning how to deal with challenging situations, and finding ways to get through them.”

Bob developed coping skills through the lost educational opportunities by relying on his past experiences in managing the expectations of others. He reflected on times when he was asked to step out of the clinical rotation, as discussed in the earlier push factors.

That was absolutely fine with me! That didn't hurt my feelings any. Considering my experience with my previous occupation, I was quite familiar with people and their own wants, needs, desires and building a customer-service relationship. You can't please everybody; can't like everybody. Everybody's not going to like you, and that's ok.

John's motivation of persistence was found through the process of his evolution as a student. John, a current student, explained the value of growing as a team player and how that role helped him to keep pushing forward. John had an appreciative quality to his voice as he explained

I was able to evolve into being a team player and I guess all the positives that came out of my experience for the past three years have really had an impact in me being positive and building on each other. I would say that it is what propelled me to continue and you know, just to keep going.

Creative Time Management

The participants described the ways that they managed their time so they could do school work and still have time for their other obligations. Recent graduates described conditions in which they studied when able and worked long hours at their places of employment so they could have time to attend school.

Bob had previously shared that balancing his familial responsibilities and his other commitments were a challenge during nursing school. Bob discussed how he was

able to overcome those challenges. “I worked 16-hour work days. I was up 20 hours at a time, doing school work. I condensed most of my classes into two days a week so that I could work.”

Henry described the mediators to time management conflicts that he employed.

Henry’s intonation conveyed his seriousness about time management.

Well, when it came to school work, I opted for quality over quantity. So, if I had to study, I didn’t put in four or five hours. If I could only squeeze 45 minutes in, I’d make sure it was quality time. I chose to study wherever, whenever I could. If I was taking the kids to school, and I had ten minutes in the car before they came out, I had my notes with me. I always, always had my notes on me. So, when I was at work on a break, if I had ten or twenty minutes of downtime throughout the day, I made sure I studied where and when I could. That was my focus. Nothing I did was done haphazardly or mindlessly. I made sure that I was focused on that. It was all prioritization and making sure I had time for everybody. I was fortunate that I worked per diem. So, my work schedule was kind of flexible. So, that was helpful. If I had a family event or something that I had to do with the kids, I had to stay up late or get up early and take care of school work where and when I could. At times, I did have to explain to the family or work that, “Listen, I’m in school. I have an important test coming up or a paper due. I can’t come in today, or Daddy needs time to get this done.” So, it was helpful that the family and my job at the time were supportive of me.

Supportive Interpersonal Relationships

Interpersonal relationships were essential for some of the participants as they were navigating competing priorities. The participants shared the importance of developing, maintaining, and leaning on relationships with their friends, family, and peers throughout nursing school. Family played a crucial role in the lives of the participants. Many of the participants credited their wives, children, and other family members as reasons that they were able to persist through their programs.

Jack, a current student, acknowledged that he was able to overcome challenges with the “support of [his] family.” He also described his relationships with his peers. He perceived his role in his peer group as a leader. Jack calmly stated

I was a little older than a lot of my other peers in my class. So, I think that they look to me for either to be the voice of the class, or kind of latch on to, to kind of gain more experience as they know that I have a lot of background in working in the healthcare setting. So, I like to use all of my knowledge and experience to kind of help guide my peers, and sometimes help guide the class, in a direction that we need to go in order to get a task accomplished. So, I think my peers and I built very good relationships.

Henry, a recent graduate, had a few close friends that he was able to work with during his clinicals in nursing school. Henry's tone of voice was bright and cheerful while he discussed how his peers were influential in him being able to persist and stay engaged in school.

We had our clique. We started getting in some classes together and we got into a couple clinicals together... I did develop some friendships with two students who were closer in age to me. I was still a few years older, but they were more in my age group. We still stay in touch to this day. We go out every now and then. We had our classes together and definitely got into a couple of clinicals together.

Henry, a recent graduate, believed the younger students in his nursing school viewed him as a father figure. Henry elaborated on his relationship with these students.

I think being an older student they kind of saw me as a father-figure, in a sense... So I guess being the older person in the group, and then kind of taking that father-figure role, I kind had to be the bad guy, and it was on more than one occasion where I had to be the person to say, "Listen, you're not doing your share of the work, you got to come to these group meetings, you gotta do this, you gotta do that."

Ryan's friends and family were there for him when he needed support in persisting through the nursing school program. Ryan, a current student, had an appreciative tone in his voice as he discussed the supports that allowed him to continue through school.

I had made friends in nursing school, who, you know, who are going through the same thing. They have families at home, which really helps, you know. I had some good support...I was fortunate that I had basically the same people in all my classes for all of my core nursing classes...Obviously, my wife really was a big support, which helped me get through it.

Steve, a recent graduate, shared Ryan's sentiments in having a supportive peer collaboration. "Our classmates from the start to finish... we were one class and you made good connections with people. Like I said, everybody was supportive, all our peers in the class. Nobody was there to put each other down."

Bob, a recent graduate, discussed his perceptions of his relationships with peers. He had described one particular relationship that extended beyond the classroom and into service in the community.

I had a good relationship with my peers... Jim and I were in a class together, where we were doing some community outreach, working with the elderly in a day program in one of the local churches in [town]. That was a good experience, as well.

John, a current student, reflected back to a time in nursing school when he and his family were sick. John's wife tried to help support him through practical ways, including assisting with a school project and caring for their child.

My wife was sick, my son was sick, and you know, my wife... she was trying to help me with the project. I told her, "Forget about it," because she was getting stressed, too... My wife, she helps tremendously... Well, you know, strangely enough, my wife has been a real rock for me.

John shared that he was able to overcome any issues that he experienced in his nursing school program because of the friends that he had made while in the nursing school. John laughed as he stated

"I am like a dad figure around them. They have been a really big support for me through this Journey."

John's tone was appreciative and hopeful as he further elaborated on his relationship with his peers.

I guess along the way, my journey with my classmates has really evolved. A lot of my classmates and myself, we are really close. I made some close, really close relationships, like where some of my classmates, we did projects together and stuff...I've developed really good relationships along the way with them. I don't know if I'll keep in contact with them after this journey. I hope to, you know.

Anchors of Retention

Each nursing school intentionally created learning environments and the necessary supports that participants identified as significant in their ability to overcome any adversity as they pursued their academic goals. The patterns that emerged for the current students and recent graduates were in the clinical experiences, resources on campus, and the development of meaningful relationships with faculty members. The supports offered on each campus varied, as did the individuals who made use of the supports offered.

Clinical Experience

Jack and Ryan, current students, and Steve and Bob, recent graduates, described ways in which their experiences in a clinical setting helped them to be retained by their nursing schools. For Jack, the experience helped him to connect the theory with practical aspects of nursing. For Ryan, the clinical experience aligned well with his preferred learning style. Steve was able to connect the clinical setting with his desire to help people.

Jack described his clinical experience as being a way in which his school supported his motivation through nursing school. Jack sounded appreciative as he described how his clinical experience was unlike the more traditional programs that he had learned about.

[This program was] unlike traditional nursing programs where your clinical settings are you and like eight to ten people just following a preceptor around.

And every now and then, you might get a patient to write on or you may be responsible for that day. However, I was given an opportunity to take part in a Dedicated Educational Unit program that my school provided to us. It pretty much entailed us... working one-on-one with the nurse rather than being in a traditional clinical setting with more than one student being assigned to a patient or whatever... So that gave me more opportunity to actually be hands-on with patients rather than kind of competing with other students for asking questions or just trying to accomplish a task. I was allowed to prioritize the patient as my obligation for the day. I was able to do that for about two years. So, it gave me a more hands-on experience than I feel like I would have gotten with any other program. So, I was very appreciative of that.

Similarly, one factor of retention for Ryan was also based on his enjoyment of the clinical aspects of school. Ryan's tone of voice was appreciative as he stated "I really enjoyed it as hard as school was. I love the clinical aspect of school. So, I look forward to that part of it." Ryan and Jack shared a similar experience during their preparation into the field by taking part in the Dedicated Educational Unit (D.E.U.) program that their school had offered.

I think I was very fortunate to get accepted into the D.E.U. cohort at [Town] Hospital because the way that they ran their D.E.U was superb. We got to our community clinical, where we spent half the time in a clinic and then the other half the time, we were in an ambulatory surgery unit, where we got to see surgeries. We saw a patient come in; we followed them into surgery. We got to be part of their surgery and then being a part of their recovery and discharge, all in one day, which was really great. I don't know how many people got to get that experience. I saw so many different types of surgeries and different types of patient education. Then we also got a critical care rotation. So, we went through all the different critical care units, neuro, ICU, cardiac ICU, medical ICU, and then step down, which was a phenomenal experience. Then, of course, the emergency room experience...

Steve was motivated because he was able to use his clinical experiences to influence the lives of others. He connected the clinical opportunities with his personal service orientation.

The clinical experiences were really valuable just to see how you can influence people's lives in a positive way. As students, you don't know so much and you

always have somebody by you, but just being that person in that time of need, I think that's very rewarding.

Bob reflected about how going through the different clinical rotations allowed him to find the type of nursing that he wanted to pursue.

I think going through med surge, going through critical care, going through community; you're going through psych, you're doing all these rotations clinically and in the classroom. I think for each student, somewhere along the line of your education, you find areas that say something to you. I happen to have really enjoyed the community class that I had taken. That was an area that spoke to me. That was something that made me actually feel something for nursing.

Resources on Campus

The college campuses offered a variety of resources beyond the classroom to help build skills and offer support to students in need. Participants reflect about the many different resources that they used.

Jack, a current student, discussed the benefit of having access to a simulation laboratory on campus. He described that opportunity as another factor from the school that supported his retention. Jack's tone was grateful as he discussed

So, sim lab actually helped me out a lot because during health assessment, I would routinely practice head-to-toe assessments on the dummies or the mannequins, whatever you want to call them. And, kind of helped create this routine of how a head-to-toe assessment is supposed to go, and I became more familiarized with it.

Beyond the sim lab, Jack spoke about several different services on campus that he found to be useful. Jack's voice conveyed pride as he explained the different services the campus offered.

Well, my school offers a wide range of services, like the Writing Center, the Math Center, extra help, tutoring, extended library hours. So, there were times when I was at the library until three, four, or five o'clock in the morning. And this just wasn't during finals week. So, I think all of those things, because the school actually gave me an opportunity to step outside of the house for studying or you know, sneak out.

Jack's school also offered a Career Development Department to its students. Jack elaborated on the services offered through this department.

Career development, as far as they have a department that helps fix up your resume; fix up your cover letter. So, that when you do graduate, you actually have all of these materials ready to hand out or pass out on your job search. So, you know, that was actually pretty cool... I definitely took advantage of that.

One of the resources that Henry, a recent graduate, used while in nursing school was the Writing Lab on his campus. Henry discussed the development of his writing skills.

I really think I became a better writer in working with the Writing Lab, because that was something I struggled with early on... This was huge, they had a writing center and they would, you'd bring a paper to them something that you already wrote, and they would help you with your sentence structure, grammar, clarity. So that was good. I really think I became a better writer in working with the Writing Lab, because that was something I struggled with early on as an adult student going back to college. You know, trying to write a paper I hadn't done that in over 20 years. You kind of forget, not that you forget how to write, but you just forget how to write at that education level. So that was useful.

Henry also reflected back to when he used the tutoring services during the first two semesters of his nursing school program. Henry discussed his realization that he no longer needed the service, but was grateful that it was there when he did need it. Henry's words and tone demonstrated his gratitude.

So, they offered a tutoring program for various classes that was free of charge. I went there for help early in the program on one or two of the more intensive classes. But I didn't utilize it throughout the entire program. I kind of early on in meeting with the tutors, I kind of realized that the information was in the textbook, I just need to read it and comprehend it. So, I think I used it for one or two semesters, and I didn't go back to use it again. I kind of got what I needed in those first two semesters.

Steve, a recent graduate, spoke about the class that his program offered to help students create a cover letter, resume, and practice interviewing skills. Steve's intonation was appreciative as he reported that he found the class helpful.

We had a transitions class...they did one nice thing. It was a mock interview, and we prepared a good majority of the semester for it. They would help us with our resume, our cover letter and all that. At the end of it taking off to the mock interview with several different stages. They did a group interview, they did one on one and then they would rate you, and give you pointers on how to present yourself, how to answer different questions. I thought that was very, very helpful.

Discrepancy: Resources Offered but Not Utilized

Participants described resources and services on campus that they chose not to use but knew that were still available.

Jack, a current student, described the services that were offered by his school that he did not utilize.

If you have test anxiety, which a lot of people do, especially a lot of people in nursing school, they give you an opportunity to actually take the test outside of the classroom, or to schedule it separately, where you're able to concentrate more versus being in a class full of other people who are constantly getting up, and down, because that affects people.

Henry, a recent graduate, expressed that there were many other services provided by the school that he did not make use of.

I mean, they had a lot of additional support that I didn't even take. They had everything. They offered mental health counseling. They offered other therapies, if you are struggling with drugs and alcohol. They had Puppy Days, things like that, where the students can gather and relieve stress. Yeah, they were pretty good. My school was good! They pretty much covered all those bases.

Bob's focus was to be on campus for the least amount of time possible. For that reason, Bob, a recent graduate, chose not to use services. He knew of some of the resources that were offered. Bob's tone was aloof as he stated

I didn't utilize any services from the school. I went; I showed up as least as I could. I was there for as short of a time as I could and putting as much time in a condensed time as I could. I'm not sure what they.... I'm not sure how much or what they offered. I certainly didn't utilize very much other than you know, I think there was a time or two that we had used a classroom for study time. They did have a writing lab; they had tutors that were available. They did have those types of services. I did not utilize any of them.

John, a current student, reflected on the services offered in the associate's degree program from which he disengaged. "In that other program, oh my gosh. I didn't even pursue any of the resources or whatever, you know."

Discrepancy: Resources Not Offered but Desired

Participants described resources and services that were not available on campus, but that they would have desired to use had they been available.

After reflecting on the services that were offered through their nursing school, the participants spoke about services or programs that they thought would have been helpful to offer students.

Jack, a current student, suggested having a program to help students reacclimate to school. "I would probably say a transition program for either students who had just recently graduated high school and are getting into the program, or for people who are returning to school after an extended period of time."

Henry, a recent graduate, had two suggestions for changes to his nursing school program that he believed would have been beneficial. Henry elaborated on his first suggestion.

My school promoted that they had a state-of-the-art nursing lab, but that nursing lab was too small for the amount of students that they had. It was almost impossible to get time in the lab. So, it would have been useful to have some more simulations in the course.

Henry had an excited tone of voice as he discussed his second suggestion.

Med surg kind of radiates through all other classes that you take. It would have been nice if they kind of took the elements you learned in med surg, and just reintroduced it when you took telemetry and when you got into psychiatry. It always seems to come back to med surg and never really comes away from it. I felt like I learned med surg and they never tested your knowledge of it again. Then when you get out into the field, you're always confronted with med surg issues every day. So, it would have been nice to always comeback revisiting, revisiting.

While Bob, a recent graduate, did not think his idea would be useful to him, he offered a suggestion for a new program. Bob suggested, "A mentor program. I don't know that would have really done me any good and again, I don't know if they do or don't have it. But that might be a useful program."

Steve discussed the service he suggested.

I think maybe mentors would be good, you know, someone who maybe was a nurse in the hospital or maybe they can come down and talk to you and kind of give you their experiences but at the same time, all of our teachers were nurses and they helped a lot, but maybe, you know, some sort of teaching assistant who's a nurse who would guide you through things that would be nice to especially in the transition becoming a nurse because there could be some disconnect there.

Meaningful Connections with Faculty and Staff

Current students and recent graduates shared their personal experiences of developing relationships with members of the faculty and staff. Henry appreciated how the clinical professors were able to bridge the gap he experienced from learning to applying the material, as well as helping him to stay focused and encouraged. Bob highlighted the extra support he received from a pharmacology teacher during a particularly difficult time in his academic pursuit. Jack found support through the transactional relationship with his dean's secretary when the dean of his school fell ill. Ryan shared how the relationship with a health assessment professor developed into an

informal mentorship for him. John and Steve both had professors who demonstrated supportive traits.

Jack, a current student, shared that he was able to overcome the challenges he faced when the dean fell ill. His advisor had taken on additional responsibilities and had the support of a good secretary. Jack's tone was appreciative while he spoke of the secretary.

So, a lot of times, I was passed off to her secretary... Her secretary kind of helped me formulate my schedule, helped me respond to certain obligations that I needed to do. She showed me how to troubleshoot and navigate through the program in the most effective way. I'm appreciative of that, you know. I'm lucky and fortunate that she had such a good secretary, because I probably would have been up the creek.

Ryan, a current student, developed an informal mentorship with one of his professors. Ryan had a reverential tone of voice as he discussed his professor.

I also had a health assessment professor, his name was, I mean, his name is not important. But he was the first male nurse that I met in school. He's been in the field for I think 13 or 14 years. He works for [Name of the] Hospital in the city. He kind of helped me because it was the first semester of nursing school that I met him, so he gave me the confidence as a male nurse. He also told me about the male nursing association or association of male nurses and encouraged me to get involved right away, which I did.

Henry, a recent graduate, attributed a factor of retention for him was developing meaningful relationships with his professors and clinical instructor.

I guess my clinical professors specifically. They were influential in that they were able to kind of put together what you were learning in the classroom, that I was capable of doing the job, and I did have what it takes to make it all happen. When you're in the classroom setting, they're throwing so much information at you. You think to yourself, "God, I'm never going to be able to handle this." But then, when you get into the clinical setting and your professors are kind of showing you that you already know this stuff... You know, here's the problem. You have the information and you know what's the solution. So, I say they would kind of enable me to push along.

Well, he was a guy [clinical instructor]; he was probably about six or seven years older than me. He had been in nursing a hell of a lot longer and he was just like a regular guy. When I first met him, he was just a regular Joe. He wasn't this snobby clinical instructor, even though he had a Ph.D. He didn't want anybody calling him doctor; professor was fine. I guess I saw a lot of myself in him... And that he was older, so he was at a different stage of his life. But he had kids; I had kids. We were both married a long time, with similar backgrounds. I guess I just saw him as this type of guy that I would be friends with in any other situation, but we met as student and professor. That kind of set the standard of what the relationship was going to be.

Bob's professors were a force of motivation for him to persist through nursing school. Bob, a recent graduate, reflected on his experience. Bob sounded appreciative while discussing his professors.

Well, I guess once I started the nursing program, I kind of knew that's what I wanted to do. I had a couple of good professors at [The College] that were helpful and encouraging [me] to continue and stay steady through the nursing program. It was one of my pharmacology teachers that was very encouraging when I had some personal issues going on with my family and she helped me through some of those things.

Bob had a tone of admiration while he elaborated on a professor that he had met during nursing school.

I would say that my critical care clinical professor would have been [a mentor]; he was also a male. I would say that he was a good mentor. He was absolutely a realistic, down-to-earth professor, who was extremely knowledgeable, willing to share everything he knew. He gave you the opportunity, as a student, to think for yourself and guided you where you needed to be. He used his experience and knowledge to help the students move in the right direction without being overly pushy or degrading, or anything like that.

John, a current student, had a tone of veneration as he described an instructor he viewed as being very supportive. The professor demonstrated traits that he aspired to obtain.

The professors, of course, in my school, have been phenomenal. They have been really helpful, in fact. In the one semester where the professor fell ill, she's actually one of my best professors because I guess she taught me to be strong and grow a tough skin. Actually, like be stronger, you know.

Steve, a recent graduate, shared how his preceptors made clinical settings welcoming to the students. He continued by sharing how he believed that his teachers demonstrated supportive traits through their use of anecdotal stories of their careers. Steve's appreciation for his professors was evident from the intonation of his voice.

Everybody was very welcoming. I think that had a big part to do with the clinical preceptors. We had a group of six or seven students and they would kind of make sure that all the other preceptors were in line and welcoming to us being there. Yeah, they just had a really big part in everybody being welcoming... I think it was seeing how all the teachers were happy in their career paths. They will tell us a lot of the different stories from being out in the actual field because they were all bedside nurses at the time they were teaching or before they were teaching.

Steve also discussed some of the ways in which his professors maintained open lines of communication with their students. He described the professors as being supportive in responding promptly to outreach and questions.

Well, there was definitely like I said before all the professors were very open to helping us in any way, shape or form. You know, they didn't have set office hours, but you can always email them. And most of the time, they would respond very promptly. They were very supportive in that.

Mentorship

Mentorship programs are formal ways in which the educational institutions create opportunities for the participants to connect experienced members of the professional community with people who are just entering the field. The purpose of mentorship is to provide a structured opportunity for people to share their lived experiences and bridge the gap between school and the workplace.

Jack, a current student, spoke about the preceptor with whom he was placed during one of his clinical rotations. Jack had a tone of gratitude in his voice while he spoke.

I was given the opportunity to be a member of the Dedicated Education Unit. Of the students, eight of us were chosen. So, when we first arrived for our first day of fundamentals clinical, I was placed with a preceptor. She kind of took me under her wing and every Thursday, we would spend 12 hours in the hospital unit. It was a neurosurgical unit. So, I saw a lot... So, I was quickly thrown into intensive care, although it wasn't an ICU unit. It was kind of intensive care and time was a priority. I was able to build that relationship with my preceptor. She allowed me autonomy to kind of do everything on my own. Of course, she was watching me; making sure that I didn't make a mistake or hurt a patient. She actually just allowed me to do everything that needed to be done for the patient on my own. If I needed help with something, she was always there. When she was that I kind of just needed a retraining or redirection, she jumped in very quickly, and helped me. You know, our relationship grew. Then probably a year, or a year and a half later, after completing about three rotations, she offered me a job on the unit that I actually did my clinical on. Which was really good, considering it was the hospital, it was the unit in the hospital that I knew for a fact that I wanted to work in once I graduated. So, it kind of gave me a foot in the door before I even received my degree, or even passed my boards. So, I was very appreciative for that.

Ryan, a current student, explained that his mentor was at the hospital where he did his clinicals. Similar to Jack, Ryan was chosen to participate in the Dedicated Education Unit and matched with a mentor in the hospital setting where he did his clinicals. Ryan's appreciation of his mentor was evident in his words and vocal tone.

I was chosen for what's called a Dedicated Educational Unit at school. I did all my clinicals through [The Local] Hospital and worked closely with [The Local] Hospital for my clinical experiences. So, I was mentored with the Assistant Director of Education at [The Local] Hospital. She helped guide me through all of the clinical experiences and has become a friend now. She's helping me move on in my career, which is even more amazing, because she doesn't have to do that. I'm not her student. So, it's really, I think that was really good.

John, a current student, laughed nervously as he described the mentorship program that his school implemented for students. He explained that the mentor with whom he was connected was helpful during his first semester, but was not available to maintain the relationship after that semester.

In this program... they have mentorships and other stuff. I utilized that for, I think, one class, or something like that... She helped me during my first semester

to know what to do, what to study, and stuff. But after that semester, I shoot her an email and I reached out to her, and she never got back to me.

Discrepancy: Mentorship offered but not utilized

Henry, a recent graduate, was familiar with the mentorship program; however, he chose not to take part in the program. Henry had a disbelieving tone of voice as he discussed the mentorship program.

They did offer a nursing association where they would have meetings and they would say, “Seniors in the nursing program will be here to answer questions for the freshmen and sophomore students.” But I never took part in any of that largely because I felt with my age, it’s kind of a hard time seeing a younger person as my mentor.

Steve’s school provided a mentorship similar to the program that John described. Steve, a recent graduate, elaborated on his connection with the mentorship program. He was familiar with the program, although he chose not to use the services offered. Steve did not explain why he decided against using the mentorship.

Actually, they had people from the classes that had graduated before us or people who were in their second year. They had a program where, if you were struggling in the class, they could kind of hook you up with one of those people and they would help you through giving you study techniques and all that. I never utilized any of that, though.

Opportunities to Give and Receive Feedback

One of the ways in which the nursing schools promoted retention by cultivating an engaging learning environment was by providing opportunities to give and receive feedback. Professors and instructors gave valuable feedback to participants on projects, in their clinical settings, and throughout their courses. The college invited students to provide feedback upon their experiences within the campus and nursing school program, both through individual instructors and on a broader scale.

Jack, a current student, discussed how clinical evaluations and feedback on tests were performed in his nursing school program. Jack stated that as a student, he would sometimes over-study the wrong things. The feedback from Jack's nursing professors helped him to focus on what he should be studying instead of what he perceived as the wrong things. Jack had a tone of appreciation in his voice as he spoke of how feedback assisted him with his studies.

Well during clinical rotation, we had the mid semester, and final evaluations were due at the end of each clinical rotation. So, at that point your preceptor, our preceptor who was overseeing us in the hospitals. They would provide us with feedback based off of their judgments in certain things that we have to improve, or certain things that we were excelling in. I think that really worked out for me, because, it kind of helped me focus on what other people saw, not just what I felt. So, a lot of times, I feel like we're a little hard on ourselves, you know, especially as students. So, we sometimes tend to focus or over study on the wrong thing, so being able to get that feedback kind of gave me more of an idea of where I need to really put my focus on. Then of course our grading system was done online now, as most things are. Once my grades were in, you know, we really were not allowed to get our test back. We can go and review them, but realistically we won't have a copy in front of our face to say exactly what we need to focus on. So, there's always a comment section, which most of our professors use to communicate with us as to what they feel that our biggest focus needs to be based off of our grades or evaluations from our exams.

Henry, a recent graduate, discussed the ways he received feedback from his professors and the school. Henry had a serious tone as he discussed feedback from his instructors.

Well, you know, I always kept a good relationship with my professors. They often just in casual conversation spoke with me after class or something. They would always give me some positive feedback. I was recognized once or twice for the Dean's list and things like that. But there was nothing I mean, it was just like a little letter you get in the mail that you're on the Dean's List, saying congratulations. But I guess it was more for me hearing it from the professors and the clinical instructors. Yeah just in conversation, debriefing at the end of the day. They'd give you positive feedback so that was, that was the main driver.

Participants discussed the various ways that their schools collected feedback. Some of the participants discussed the use of incentives to persuade students to fill out evaluations.

Jack's program provided students the opportunity to give feedback on their professor and experiences in the class. Jack, a current student, had an excited quality to his voice as he discussed that feedback from students was collected at the end of the semester. Since it was not mandatory, students did not always provide feedback to the program.

Oh, yes, at the end of each semester, or at the end of each class, we're also asked to do a survey on our professors and our experiences within the class. Then we're given the opportunity to provide written feedback as to what we think went well; what we think should be changed; what we think should be improved. Most of the time, we're just so excited to be done with the class that's like one extra something that we don't really want to do because it's always so lengthy for each professor. It's not really mandatory. So, I mean, I guess that's where it really messes up. But I'd be lying if I say, given the opportunity, I provided feedback.

Ryan's school used free printing at the school library to incentivize the students to complete online forms. Ryan, a current student, was enthusiastic as he recounted his experience with the evaluations.

Yeah, course evaluations. They were pretty intense. The course evaluations, you filled out this form online. First, you filled it out about the professor, and then you filled it out about the course and it was pretty lengthy. Yes, okay, and you did get free prints. If you did one, though, every time you did one, I think you got like 100 free prints at the library.

Henry, a recent graduate, was given the opportunity to share his feedback through his program, as well.

Oh yeah, they gave us course surveys. That was the standard. And you'd give them the feedback and yeah, we'd also give them the verbal feedback one to one but in a casual setting. As students, you'd always let the professors know when we thought they were better than the others... Yeah, there was like one, it was two semesters, I guess, the clinical instructor was new to the school and they would

send a senior faculty in to meet with the students without the instructor there to get our feedback on how the program was going. You know, what did we like, what didn't we like about the instructor.

Bob, a recent graduate, shared that his program also gathered information and feedback from students regarding both the clinical and classroom experiences.

I think that, I believe that at the end of every semester, you had an opportunity to review, or comment on your teacher both clinical and classroom. If you wanted to add any comments regarding their abilities or disabilities, you could do that. I believe every semester you have that opportunity.

As Bob reflected on the opportunities for students to share their feedback, he also noted that he did not believe that the school actually cared to implement the suggestions that were made. Bob's disbelief was conveyed through the expression in his voice. "I honestly don't think they care. I think they have a program that they follow and they're going to follow that program. I don't think that their students have any effect on that."

John's program also collected feedback via online survey. He described how at the end of each semester the school would send surveys to the students. John, a current student, discussed that the feedback he provided on the surveys was positive.

At the end of each semester, they have surveys they utilize. You know, where they send it online and you have to answer these surveys on your experience and stuff. So, I've been positive with most them.

John also noted that the school may use the students' feedback to improve courses. "We give our feedback on certain courses. So, if they want to improve it or whatever."

Steve, a recent graduate, recalled ways in which his teachers would informally gather feedback based upon their teaching styles.

We had, throughout classes, our teachers would always say, you know, "Are you guys happy learning this way through PowerPoints?" Or we had one teacher in our professional development and in our research classrooms; she was the same teacher and every week she would kind of try new things or, you know, games to keep us engaged and learning; and she would ask every week, "Do you guys find

this helpful? Anything that I could change?" So, they were trying to get feedback for new things that they were incorporating.

Steve's voice was animated as he described the ways in which his school employed an incentive program for course evaluations. Steve's school also used peer evaluations to evaluate student participation in group projects.

And, they really encouraged us to fill it out. They would kind of give us incentives at the end of the semester. "You know, if 80% of the class does this, I'll give you five points on your tests," as a bonus kind of thing. So, everybody filled out the evaluations and they had one for every professor, every class, and every clinical preceptor. So, you know, even if you had two clinical preceptors that semester, you would fill out the evaluation; the one after the class as a whole and then fill one out for the professors. And we also, we worked in groups. They would do peer evaluations. So, they would make us fill those out, you know, weekly or at the end of the semester. They wanted to make sure that everybody was kind of contributing to the project, and nobody was sitting behind. So, they wouldn't necessarily praise you if you contributed, but they wanted to make sure that there wasn't somebody that was sitting down and not doing anything. So, those were discrete. You would fill them out at the end of the project, or at the end of the semester, if you were in a group for the whole semester. It was just a way to make sure that everybody was accountable for what they were doing.

Discrepancy: Did Not Receive Feedback from Nursing School Faculty

Ryan, a current student, alluded to not receiving feedback from the nursing school faculty. While he did remark about his positive grades, he did not recognize his grades as a form of feedback.

I mean, they would send emails, I mean, as far as I know, I just kept my nose in the book, just did what I had to do to get good grades and get through the semester. I really didn't pay a whole lot of attention to what was going on at school as far as the other stuff. So, I mean, I never really got good or bad feedback. So, I don't know if that's a good, or I know, it's not a bad thing.

Conclusion

The study explored the lived experiences of male nursing students and recent graduates from nursing school as related to their attraction to the profession, recruitment

into a nursing school, retention and persistence toward attainment of a baccalaureate nursing degree.

CHAPTER 5

DISCUSSION

Introduction

The following chapter is a discussion that connects the theoretical framework: an intersection of the Kuhn Cycle of paradigm shift, student retention and persistence (Tinto, 2017), Expectancy–Value Theory of Achievement Motivation (Wigfield & Eccles, 2000), and Attribution Theory (Weiner, 2010), with the perceptions of male nursing students and recent graduates. The relationships to prior research were delineated and examined for factors that support, extend, question, and refute prior research. Additionally, recommendations for future practice and research were presented.

Implications of Findings

Participants of this study shared their attraction to the field of nursing. As they described their lived experiences, Attributes of the Field were evident as a theme across both students and graduates. Two of the patterns emerged: Diversity of Clinical Settings and Providing Care for Others. The participants discussed the diversity of the clinical settings that nurses can be employed in, and the flexibility of the career as being factors that attracted them to the field. The findings of this study were aligned with the research of Christensen and Knight, (2014); McKenna et al., (2016); Moore and Dienemann (2014) which suggested diverse clinical settings and specialties were important in motivating the participants to consider nursing.

Providing care to others was a motivating factor in choosing nursing as a career for participants of this study. Some reflected on caring for patients, while others discussed caring for family members as being influential in their decision making. The

participants stated that wanting a profession in which they could care for other people was motivating in choosing nursing. The findings were aligned with those of McKenna et al., (2016) and McKenna et al., (2017) which both suggested that care was central to a nursing career, and that the participants wanted a profession where they provide care to others. Additionally, the finding of providing care to others from this study supported the finding in Meadus and Twomey (2011) which suggested the opportunity to provide care was a reason in which men choose nursing. The present study reinforced the finding from O'Connor (2015) that helping to care for sick relatives in their homes was influential in helping the men choose the nursing profession.

Another way in which the participants described their attraction to the field of nursing was through the Encouragement of Personal Relationships. Within this theme, both students and recent graduates, Connecting with Observed Traits resonated as a pattern. Participants were encouraged by family, friends, and coworkers because of traits those others recognized in them. One of the participants, Steve, was told by his mother "You have to do something to take care of people; you'd be so good at this." This finding supports the finding in Rajacich et al., (2013) that men entered the nursing field through family encouragement. The implications of these findings suggest that regardless of the intentionality of pursuing a career in nursing, males were attracted to the field due to the unique attributes that nursing lends itself to as a career. Males expressed their interest in the diversity of working environments, as well as the opportunities to provide care. The findings suggested that males relied upon the perspectives of others as their personal and professional traits were highlighted and encouraged. The findings of this study were supported by the research of Moore (2008) and Simpson (2005), suggesting that the

predominant entry mechanisms into the field are *finders*, *seekers*, and *settlers*. As participants described ways that they either came across the field as they explored opportunities; actively sought the field; or intended to pursue an alternate career but ended up in nursing, they had also described what attracted them to nursing in terms of attributes of the field itself and the encouragement of others.

Participants were asked to describe their lived experiences of recruitment into a nursing school. The themes of Intentional Recruitment Efforts and Deciding Factors of Enrollment emerged. Participants discussed specific Institutional Learning Experiences Leading to Employment as a significant way they were recruited into their nursing school. For one participant, the hands-on experience and direct instruction through the Dedicated Educational Unit was a deciding factor. For another, the increased likelihood of post-graduation employment based upon the college's reputation with local employers, drew him to the program. Participants also described their Deciding Factors of Enrollment. Acceptance into the Program was a significant pattern that emerged from the responses. At times the participants decided to attend the first school that sent them back a letter of acceptance into that school's nursing program. The implications of these findings are related to the focus on the *Model Revolution* of the Kuhn Cycle (1962), as males were directly responding to Intentional Recruitment Efforts, as well as making informed decisions as to their enrollment into a program.

This study examined ways in which the participants both identified the factors of their persistence, as well as their perceptions of the intentional retention strategies of the nursing schools in which they were engaged. Tinto (2017) explained the duality between goals of the student and of the school in terms of persistence and retention.

Prior to understanding ways in which participants remained engaged, Significant Distractions in terms of Pull and Push Factors was explored. Every participant in this study articulated one or more factors that had the potential to pull or push them out of their pursuit of attaining their degree. The implication of understanding these factors is bringing often subtle, underlying causes of disengagement into the discourse. By allowing the struggles to emerge into the conversation and not remain hidden, participants were able to also verbalize the ways in which those significant distractions were mediated.

Participants were asked to reflect on their decision to enter the field of nursing and reflect upon the supports that influenced their retention. All participants described Motivations for Persistence. Patterns including Goal Orientation, Academic and Social-Emotional Growth, as well as Supportive Interpersonal Relationships emerged from their descriptions. Every participant identified at least one supportive relationship that increased their motivation to persist through distractions. Some of these relationships were inside of their nursing school programs, while others were supportive friends and family. Wigfield and Eccles' (2000) Expectancy-Value Theory of Motivation constructed a framework through which to understand the levers of expectations of success in terms of the value assigned by beliefs around goals and tasks. Expectations of success and values were influential in terms of performance, effort, and persistence.

These findings on persistence were also aligned with Weiner's (2010) Attribution Theory. The Attribution Theory focused on exploring the cause of success or failure based upon perceptions rather than true causes. Perceptions are influenced by situational

context. Aptitude and ability, along with effort, ease or difficulty of a task, motivation, and other factors are related to success or failure (Weiner, 2010). The implication of these findings suggest that factors of retention rely on a complex matrix of factors and the factors that are most important to the participant are the ones that yield the greatest influence on their persistence.

The theme, Anchors of Retention, emerged as participants reflected on the opportunities that they were given as a result of attending their particular nursing school. Some of the factors of retention included Clinical Experiences and Resources on Campus, Meaningful Connections with Faculty and Staff, and the Opportunities to Give and Receive Feedback. Tinto (2017) articulated that the goal of the student was degree attainment through persistence, while the goal of the school was student retention.

Relationship to Prior Research

Research Question 1

How do male nursing students and recent male graduates describe their attraction to the nursing field?

Attributes of the field

Reputation of the profession

One of the reasons that the participants were attracted to nursing was because of the reputation of the nursing field. The participants espoused having a high regard for the dignity, professionalism, and the caring nature of those who are in the profession.

This finding was in line with a similar finding in (Yi & Keogh, 2016), as the study indicated that male nurses will, at times, chose nursing because of their perception of the reputation of nursing as being a professional career.

Diversity of clinical settings

The participants discussed the diverse types of clinical settings that nurses can be employed in, and the flexibility of the career as being factors that attracted them to the field. The findings of this study were aligned with the research of Christensen and Knight, (2014); McKenna et al., (2016); Moore and Dienemann (2014) which suggested diverse clinical settings and specialties were important in motivating the participants to consider nursing.

Providing care for others

Providing care to others was a motivating factor in choosing nursing as a career for participants of this study. Some reflected on caring for patients, while others discussed caring for family members as being influential in their decision making. The participants stated that wanting a profession in which they could care for other people was motivating in choosing nursing. The findings were aligned with those of McKenna et al., (2016) and McKenna et al., (2017) which both suggested that care was central to a nursing career, and that the participants wanted a profession where they provide care to others. Additionally, the finding of providing care to others from this study supported the finding in Meadus and Twomey (2011) which suggested the opportunity to provide care was a reason in which men choose nursing. The present study reinforced the finding from O'Connor (2015) that helping to care for sick relatives in their homes was influential in helping the men choose nursing.

Encouragement of Personal Relationships*Connected with observed traits*

Some of the participants in this study were encouraged by others because of traits those others saw in them. One of the participants, Steve, was told by his mother “You have to do something to take care of people; you’d be so good at this.” This finding supports the finding in Rajacich et al., (2013) that men entered the nursing field through family encouragement.

Consultation of others’ lived experiences.

Participants in this study consulted friends and family before making their decision to enter nursing school. These findings were aligned to those of McKenna et al., (2017) which suggest lived experiences either direct or indirectly through family was an influential factor in men pursuing a nursing career. According to McKenna et al., (2017) coming into contact with nurses may provide insight into the profession and attract newcomers to the profession. Additionally, findings by O’Connor (2015) that suggested family members, friends and acquaintances that are nurses were influential in men entering nursing was supported.

Research Question 2

How do male nursing students and recent male graduates describe their recruitment into nursing school?

Intentional recruitment efforts

Institutional Learning Experiences Leading to Employment

Unique features of the nursing programs that were highlighted in recruitment materials that were attractive to the participants were discussed in this study. The findings showed the Dedicated Educational Unit (DEU) program was an opportunity that attracted the participants of this study to their school of choice. The benefits of a DEU program

were discussed in the findings of Heidelberg (2017) that found that students were prepared to practice upon completion of the DEU program. Additionally, students became more confident clinically after completion of the DEU program.

Employment opportunities after graduation were also discussed as a reason for participants choosing which school to attend. The findings in this study suggested that people choose their schools based on the wide variety of employment opportunities after graduation from the nursing school. This finding is aligned with the findings of Agrey and Lampadan (2014). Agrey and Lampadan (2014) found that people choose schools based on future employment prospects.

Deciding Factors of Enrollment

Acceptance into the program

There were multiple factors of enrollment that were found in this study. Participants decided to enroll in their schools because the schools were the first to accept them or because they were allowed entry into the school with advance standing because of credits from a prior school. These findings did not support the findings in Agrey and Lampadan, (2014) which suggest students were influenced to enroll because of support systems, learning environment, job prospects, a strong student life program, activities, and a safe and friendly environment; or the findings of Stephenson et al. (2016) that suggest cost, choice of major, campus visits, location, perceptions of significant others, size of school, location, beautiful campus, and friendly staff and faculty were factors that influenced the choice of students to enroll in their school. Additionally, the findings of Joseph et al. (2012) were not supported by the findings in this study.

Prior academic experience with institution

Familiarity with the school through prior academic experience was a deciding factor in school choice for some in this study. The finding supported Stephenson et al. (2016) which had a similar finding that students who had a level of comfort and familiarity with their school chose to enroll due to the prior relationship.

Research Question 3

How do male nursing students and recent male graduates describe the factors that influenced their retention and persistence toward the attainment of a nursing degree?

Significant Distractions

Pull factors

The results of this study provided insight into the pull factors which take students out of school. The pull factors identified in this study were home life, family obligations, relationships with friends, and maintaining a job. The findings of this study support the research of Bradley and Renzulli (2011) that suggested pull factors are starting a new occupation, starting a family, had to support his/her family, had to care for a member of the family, got married/planned to get married, and could not work at the same time as going to school. The findings in this study also provided support to Sealy (2015), that found a shift in home life is a pull factor that pulls students away from school. This study supported Ellis et al. (2006) findings that the time requirement for nursing school was not conducive to work and family life. While not explicitly labeled a pull factor in Ellis et al. (2006) work and family life were suggested as pull factors in this study.

Push factors

Participants shared examples of factors that sought to push them from their schools. The push factors identified in this study were relationships with faculty, and exclusion from learning opportunities during clinical rotations. The participants clarified that being excluded from the learning opportunities was at the behest of patients not their instructors. These findings support the research of Bradley and Renzulli (2011) that suggests not getting along with teachers or students and, did not feel as if he/she belonged in the school were push factors. The findings of this study were consistent with the findings of Sealy (2015) that suggest push factors are negative interpersonal relationships. The findings in this study did not support the findings by Leone and Tian (2009).

Motivations for Persistence

Desire to make a better life for family

Participants described their desires to make a better life for their families, and their families seeing their example of working hard as reasons for their persistence. These findings suggest that the participants have an intrinsic motivation to persist. These findings are in contrast to findings in the research by Guiffrida et al. (2013) that indicated the desire to give back to people from home or make them proud as a motivation for attending college was not significantly related to persistence. Additionally, the findings in this study provide support for the findings of Shillingford and Karlin (2013) that suggested that intrinsic motivation is vital to the academic pursuits of nontraditional students.

Goal orientation

Participants described the need to succeed, family and, the personal mission to achieve professional goals as being influential in their ability to persist. When examining these findings Intrinsic motivation appears to be a factor in participants persistence. This finding was consistent with the research by Shillingford and Karlin (2013) that connected intrinsic motivation with the intention to persist. The findings in this study support those of Williams (2010). According to Williams (2010) the participants of that study were motivated by the thought of completing the nursing program.

Academic and social-emotional growth

Findings of this study suggested persistence was motivated through the participants gaining confidence through the experience of nursing school, development of skills including critical thinking, coping skills, collaboration, and perseverance. This finding was consistent with the results of Blum et al., (2010) suggesting student self-confidence and competence increased regardless of students being enrolled in traditional or simulation laboratory classes. The findings supported Evans et al. (2013) which suggested engagement was promoted through gaining lifelong and career skills such as learning to work in groups. Additionally, in this study determination, and self-motivation were perceived by participants as what got them over hurdles and setbacks. This finding suggests that since these participants were able to persevere through challenges throughout their school journey they possessed grit; which supports the findings of Duckworth et al., (2007) that suggest that older individuals tended to be higher in grit than younger individuals, suggesting that grit may increase over the life span.

Creative time management

The participants in this study would mediate time management conflicts by studying for their classes whenever they were able. Examples include participants studying a few minutes while picking up their children or while on break at their job. Additionally, they worked long hours at their places of employment so they could have time to attend school. These findings supported findings in Williams (2010) that suggest students were able to keep up with workload by using time management skills and using resources.

Supportive interpersonal relationships

Motivators of persistence in this study were found to be supportive relationships between the participants and their friends, family, and peers. The participants were able to lean on their relationships in times of need to help them persist. Spouses took on additional duties in the home, and peers collaborated on work and, were able to relate with participants through shared experiences. The findings supported O'Brien et al. (2009) which suggested mature students keep each other motivated to continue, and spousal support was important to success of students. The findings were aligned with those in Williams (2010) that suggest that connecting with peers is vital to persistence. An interesting finding of this study that was not present in prior research was some of the older participants perceived that the younger students viewed them as a father-figure or dad-figure. Participants discussed that this belief came from their younger peers approaching them for guidance due to the participants' life experiences. Due to these perceptions participants took on authoritative roles in their peer groups. Some participants perceived that they had to take on this role in order to keep the peer groups on task and focused. Peer relationships potentially may negatively impact GPA, but the

relationships may also support persistence through social integration (Guiffrida et al., 2013).

Anchors of Retention

Clinical experience

Anchors of retention are the findings in this study where clinical experience helped connect theory with practical aspects of nursing; aligned well with preferred learning styles; and fostered the connection between the clinical setting and the desire to help people. Additionally, participants expressed that their enjoyment of the clinical settings helped their retention in their program. The finding of clinical experience aligning with participants learning styles supports the finding of Kenner and Weinerman (2011) that learning strategies must be framed in a way that allows adult learners to see the purpose of the exercises. Findings from this study align with Stott (2007) that suggest the enjoyment of the technical aspects of nursing can promote retention.

Another anchor of retention that was found in this study was the D.E.U programs that some participants engaged in during their schooling. The D.E.U. programs allowed students to experience many different clinical specialties, which participants found enjoyable. The findings of this study reinforced the finding of Heidelberg (2017) that students became more confident clinically after completion of the DEU program which was mentioned previously.

Resources on campus

A variety of resources beyond the classroom that promoted retention were found in this study to help build skills and offer support to students in need. Findings included on campus simulation laboratory, the Writing Center, the Math Center, extra help,

tutoring, extended library hours, a Career Development Department, and a transitions class. The findings of this study reinforced those of Alfes (2011) which suggest students who used simulation were more confident than students who did not partake of simulation. Results of Zapko et al. (2018) were also supported. The findings of Zapko et al. (2018) suggested students felt satisfaction with simulation experiences, felt confident in their performance, and believed that simulations were beneficial for student learning. The finding of this study that simulation lab promoted retention did not support Blum et al. (2010) which suggest student self-confidence and competence increased regardless of students being enrolled in traditional or simulation laboratory classes. Findings in this study were aligned with similar findings in Evans et al. (2013) which found that a leisure skills program provided students with skills that were useful in academics outside of their given area of study, helped with other career skills, and provided students with a better understanding of the resources available to them at their institution that contribute to students' engagement.

Meaningful connections with faculty and staff

Anchors of retention found in this study were connections with faculty and staff. Clinical professors are influential in helping students relate what is learned in the classroom to what students will eventually do in the clinical setting. Clinical professors were also found to be helpful and encouraging to students. The results of this study are consistent with those of Shelton (2003; 2012) which indicated that students who perceived having greater faculty support were more likely to persist throughout a nursing program. Additionally, Shelton (2012) found perceived faculty support was related to both persistence and academic performance.

Mentorship

Participants in this study identified people that were mentors or spoke about mentorship programs that their schools provided. The findings suggest the mentors were influential in providing support, guidance and opportunities that furthered the participants careers. According to findings in Sawatzky, and Enns (2009) caring, trustworthiness, respectability, willingness to share experiences, and being an approachable and effective listener, was essential in a mentor. Findings in Fullick et al. (2012) suggested that students are more likely to persist and have reduced stress levels when they have supportive mentors. Most participants in this study benefited from the faculty and staff mentors in the clinical settings. This study found mentorship programs that match students farther along in the programs with students who are closer to the beginning of the program such as the programs described in Smith (2006); Harmer (2011); Demir et al. (2014) do not provide the same benefit to students as faculty or staff mentors who were assigned at the clinical sites. This finding was demonstrated when a participant was not able to keep in communication with his peer mentor after his first semester.

Opportunities to Give and Receive Feedback

The participants' nursing schools promoted retention by cultivating an engaging learning environment by providing opportunities for students to receive feedback. The findings showed feedback was given to students in structured ways such as the comment section on their tests, which the professor used for communicating what the participants needed to focus on. Interestingly, not all participants equated grades with a form of feedback. The participants were also provided informal feedback through casual conversation after their classes. The findings are aligned with Williams (2010) that found

student persistence is promoted through positive feedback received from a clinical instructor. Additionally, the findings are consistent with Tinto (2010) which suggests that student retention can be promoted through frequent assessment and feedback about their performance.

The findings suggest that various ways were employed for the schools to collect feedback. The schools gave out peer evaluations, there were online surveys, teachers informally asked students for feedback on their effectiveness in teaching the class. The schools offered incentives to persuade students to fill out evaluations. Those incentives consisted of bonus points on tests, and free printing in the library. The findings in this study are consistent with Stott (2007) suggesting retention can be encouraged by providing students opportunities for discussion of issues.

Resources offered but not utilized

Findings showed participants did not utilize all of the services that their school offered. The offerings that were not utilized included mental health counseling, drugs and alcohol therapy, as well as *Puppy Days* that allow students to gather and relieve stress. The reasons participants provided for not utilizing the services were not wanting to spend extra time on campus, needing time for home and work responsibilities, and not needing to utilize the resources. The services that the participants did not utilize are aligned with the strategies outlined in Tinto (2010) which suggest retention is promoted by providing academic and social supports, and actively involve students with other students and faculty, in learning on campus and in the classroom.

Resources not offered but desired

Participants discussed resources that they would like to see at their schools. One was a program to help students reacclimate to school. Another student suggested a better screening process to more thoroughly vet applicants. Another suggestion was more simulation labs. A participant thought the curriculum should have more of a focus on the medical surgical aspects of nursing. The participant believed that medical surgical nursing is a topic that resonates throughout the other nursing fields. These suggestions are supported by Tinto (2010) because the suggestions would promote student integration and academic performance.

Mentorship offered but not utilized

Participants did not always utilize mentoring opportunities. One of the participants of the study did not utilize the mentorship opportunity he was provided. He stated his reason was “Because I felt with my age, it’s kind of a hard time seeing a younger person as my mentor.” This finding is in contrast to those findings in prior research that suggest mentorship is beneficial to student persistence (Demir et al., 2014; Harmer, 2011; Smith, 2006).

Work-life balance

Work life balance emerged as a central theme in the study. The participants attributions of work-life balance either promoted or inhibited their persistence in their nursing school. In response to research question one, participants articulated a strong desire to enter a career that supported multiple facets of work life balance. The findings of research question two further supported this theme as participants described their decision in selecting a program. The data in research question three pointed to the significance on which the participants focused on work life balance as they described in

great detail the challenges and disruptions to that balance, and yet persisted. Participants described their concerns about maintaining their work life balance. The participant Jack, who is a current student, spoke of wanting the flexibility that nursing could give him so that he can have balance in his life. The flexibility in nursing is evident in both the flexibility of schedule and the flexibility of nursing career paths. Rajacich et al. (2013) found that the flexibility of the profession in regard to work life balance helped men continue in nursing. Other participants who were both students and graduates spoke of the challenges of maintaining work-life balance.

Ryan, a current student, discussed the difficulties in maintaining a work-life balance while he was in nursing school.

Ah, well, the hardest challenges were, well, since I'm older, you know, with a family; it was tough to balance family life, school, work, and studying. That was difficult because you want to be there as a dad with your kids. But you also want to make sure you do what you're supposed to, to get through class. So that was tough, especially during capstone. I think that was the most physically exhausting part, doing those shifts. You know, doing the twelve-hour shifts, three days a week, plus I had my job and I also had to work and study. So, that was probably the hardest part.

The recent graduates Henry and Bob reiterated the theme when discussing how their work life balance was challenged during nursing school. Henry discussed his work life balance challenges.

My greatest hindrance I would say, was the fact that I was older... [I] was struggling with trying to raise a family, work, and going to school. So, I was juggling three things at once. Time management has to be of the utmost importance. I had to really figure out how my day was gonna go. So that was definitely my biggest challenge, I think, with going to school.

Bob's work life balance was challenged by finding the time to fit all of his responsibilities into his schedule.

I'm a father of four kids, a husband; a husband with a wife. I have a house with a mortgage. I have cars. I have a lot of other responsibilities other than going through nursing school. So, there were many challenges getting through nursing school. Balancing school with work, family, my wife and her schedule and trying to juggle all of that was definitely not easy.

The concern for establishing and balancing work life was a finding of this study that reinforced the research of Smith (2006), in which the participants were concerned with work-life balance, balancing family responsibilities, and balancing schoolwork responsibilities. The work life balance finding in the current study was aligned with Ellis et al. (2006) that suggested the time requirement for nursing school was not conducive to work and family life. The current study reinforced findings in (Rochlen et al., 2009) that suggested gender role conflict was associated with less work and life satisfaction.

Role models

Role models emerged as a central theme across questions one and three. The findings of research question one further supported this theme as participants both current students and recent graduates described the different attributes in their role models which they admired and wanted to emulate. Additionally, participants from both the current students and recent graduates wanted their families to see them as role models. The participant, Jack, a current student, whose grandmother was a nurse implied that she was a role model when he stated: "My grandmother was actually a nurse. For as long as I can remember, I admired her profession because she always carried herself with such dignity."

Additionally, Steve, a recent graduate, implied that his teachers were also role models because of the way he could connect with their lived experiences.

Everybody was very welcoming. I think that had a big part to do with the clinical preceptors. We had a group of six or seven students and they would kind of make

sure that all the other preceptors were in line and welcoming to us being there. Yeah, they just had a really big part in everybody being welcoming... I think it was seeing how all the teachers were happy in their career paths. They will tell us a lot of the different stories from being out in the actual field because they were all bedside nurses at the time they were teaching or before they were teaching.

The findings of research question three further supported this theme as some participants also discussed wanting their families to see them graduate from nursing school, which implied that they wanted to be a role model to their families. The participant named Henry stated:

A lot of it for me was that I was doing this as a second career and my family was seeing me do this. I want to make it for my kids that it's never too late to do what you want to do and let them see dad with good study habits, going to class, working hard at something, and achieving something through hard work.

This theme of the importance of role models is aligned with Meadus and Twomey (2011), men choose nursing because of role models; and Shelton (2012), nursing role models can either increase or decrease academic outcome expectations, depending on whether the interactions were perceived by the students as positive or negative.

Limitations

There were a few limitations of this study. The first limitation of the study was it was conducted in a small area in the northeast of the United States. Since all participants were from accredited nursing schools in this area the results cannot be generalized to nursing schools outside of the area. Outside of the northeast participants may have responded in differing ways. The second limitation was related to the qualitative nature of this study. Given the qualitative approach the small sample size of participants also did not meet the principle of generalizability. However, this approach did provide insight into the study participants' perceptions of their lived experiences. The third limitation was due to the researcher's experience with attending nursing school. The researcher's nursing

school experience may allow bias to be introduced into the interpretive part of the study. A fourth limitation was that only successful students and recent graduates were interviewed. There could be significant differences in those students that were successful in their programs and those that did not persist to program completion. The factors that contributed to the lack of success could be just as beneficial to know as those that contributed to success. The fifth limitation of the study was the degree level of the participants. While the purpose was to explore the lived experiences and the perceptions of male students in baccalaureate degree programs and recent graduates of baccalaureate degree programs, the results only reflect male participants at this level of education. If this study were replicated including male participants at all levels of nursing education, such as those enrolled in associate degree or graduate degree levels the findings would help to enlarge the knowledge base regarding male students at all levels of nursing education.

Recommendations for Future Practice

Recommendations for future practice are based on the findings and conclusions of this study. Recommendations are presented for those who hold a stake in the future of the nursing field.

To nursing school administrators: The first recommendation for future practice is to design nursing school programs that engage and celebrate the diversity of their students. By creating a welcoming environment, as well as a school culture that embraces diversity and learning for all students, the risk of student disengagement will be minimized. Next, increase the gender diversity of the faculty by focusing recruitment efforts on attracting male nursing professors to institutions of higher education. An

increase in the number of males in nursing faculty has the potential to increase the visibility and contribution of males to the nursing profession (Roth & Coleman, 2008). Additionally, first-year male nursing students should be offered a male faculty mentor and provided networking opportunities with males who have established careers in the nursing field, including former students. Ierardi et al., (2010) discussed that the lack of male mentors was a barrier for male nursing students. First year students are especially vulnerable to disengaging from school. According to Demir et al., (2014) a mentoring program should be used to help new nursing students adjust to university life, the nursing profession, and to help them cope with stress. To foster a more inclusive environment for male nursing students gender bias training and cultural responsiveness training should be provided for the staff and faculty. Further support for male nursing students can come in the form of a seminar or workshop for their family/significant others. The workshop/seminar should be developed and offered to guide their significant others on how to provide both practical and emotional support to the nursing student, as part of the nursing school program.

The Dedicated Educational Unit program should be incorporated into the curriculum of nursing schools to supplement the clinical experiences of male students. In addition, the DEU provides faculty the opportunity to more closely bond with students and to implement the students' diverse learning styles. Another way for students to receive more practice honing their skills is the addition of more simulation lab sessions. Simulation has been shown to help increase the confidence and skill level of students. In addition to more simulation sessions, schools could create a male-only cohort to nurture peer support and communication.

The first recommendation for Nursing School Recruiters is that local colleges and universities should send male nursing school seniors to high schools for recruitment initiatives. The nursing school seniors would serve as role models for the prospective students. Additionally, the schools should advertise and recruit prospective male students online and via social media to reach the largest possible audience.

In order for nursing faculty to promote greater interest in more of the projects during nursing school there should be more inclusion of student choice and voice. The focus on students should also extend to teaching to the students' learning styles.

Students should be provided with opportunities for continuous feedback. The give and take of feedback can help to support students' educational endeavors. Support can also be provided through routinely assessing progress through checkups every semester. Communication is important to the success of students therefore open lines of communication inside and outside of school should be provided to promote positive interactions.

Positive interactions can be promoted by avoiding gendered language when referring to a nurse. Gendered language should be balanced when referring to a nurse in all materials. Female gendered language can possibly alienate male nursing students. Female gendered language, as discussed earlier in the paper, reinforces gender stereotypes about nursing.

Recommendations for Curriculum and Resource Developers should incorporate a leisure skills curriculum into the nursing school program. The leisure skills curriculum would be beneficial for student integration. A second recommendation would be the incorporation of more medical surgical skills into all aspects of nursing curriculum.

Through the incorporation of more medical surgical nursing skills into the curriculum the students continuously practicing those skills. Medical surgical skills are useful in many of the nursing specialties. Additionally, there should be a stronger presence of obstetrics in the simulation lab. Men often do not receive as many opportunities in this specialty in the clinical setting. By having more time with this specialty in simulation lab the male students can receive a better experience. A male-only cohort model may further enhance this recommendation.

The imagery and language used in nursing recruitment media, textbooks, and curriculum resources should be more inclusive of males, ethnicities, and races. As previously discussed, imagery and language that shows a predominance of female nurses provides unintended signals to males that they are unwelcome in the field of nursing.

The recommendation for perspective nursing students is that they should consult professional nurses to gather information about the field. Through exposure to practicing nurses, students can gain a better understanding of the nursing field. A further recommendation is for perspective nursing students to research the nursing schools for alignment with personal goals before choosing a school or program.

The first recommendation for high school administrators is that guidance counselors should promote nursing as an acceptable field for males. They can do this by providing male students with information on the profession as well as inviting guest speakers into their school. Additionally, to foster nursing as a new career for male students, gender bias training and cultural responsiveness training should be provided for the staff and faculty.

Recommendations for Future Research

The recommendations for future research are provided to researchers who are interested in contributing to the current body of literature in support of nursing students and the nursing field. The students' perspectives can be a valuable source of information to inform future studies. Research that's inclusive of the voice of students in regard to their lived experiences provides insights into the field of research. A longitudinal study of the same students and graduates from the current study should be conducted to investigate their retention in the field after five years, ten years, and longer.

Based on the dimensions of attraction, recruitment, retention and persistence, interview male nurses through the lens of race and ethnicity. Additionally, the current study should be replicated in two-year programs, master's degree programs, BS to RN programs, LPN to RN programs, and BSN to MSN programs. A further recommendation for research is to replicate the current study to compare and contrast the lived experiences of males and females in the same programs. An additional recommendation for further research is to use the dimensions of the current study and expand inclusion criteria to study online versus tradition learning environments. Also, the current study should be replicated in other countries to compare and contrast findings.

Patient perspectives were a topic of discussion during the course of the study. Based on the role of male nurses in the healthcare field, a study interviewing patients of different sexes and genders should be conducted to gain insight into their perspectives. Those perspectives can provide an understanding of societal beliefs. Similarly, by interviewing male nursing professors, better insight and understanding on their lived

experience entering and persisting in the fields of nursing and higher education can be obtained.

Many male nurses have parents or family members who are nurses. To better understand that phenomena, an investigation of second-generation male nurses in families can be conducted to discover the professions of male nurses' offspring and their potential influence on gender non-traditional occupations. An additional research recommendation is to design and conduct a study exploring middle school, junior high school and high school students' gender-normative beliefs regarding traditional gender typical careers. The information that study provides may shed new perspectives on the students' belief systems.

The pipeline from nursing schools, through internship opportunities and ultimately into the hiring hospitals should be researched. The information gleaned from a study of the pipeline would help ascertain the needs of each of these different stages of the profession. Some other recommendations for further research include: Designing a mixed-methods study to triangulate the findings of the current study with performance on nursing registration exams, job recruitment rates, length of time in the career, number of job changes, and work-life balance satisfaction. To further examine work life balance in male nursing students a study should be conducted through the lens of Weiner's Attribution Theory.

The final recommendation for future research is to design an exploratory comparative analysis of curriculum and andrological practices based on nursing schools with higher male completion rates. The study could possibly illuminate curriculum and practices that promote male nursing students' completion.

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APPENDIX A



MEMO

Institutional Review Board
Federal Wide Assurance: FWA00009066

Date: November 19, 2018

To: Michael M. Sealy

CC: Dr. Stephanie Tatum
Dr. Rene Parmar
Dr. Mary Beth Schaefer

Dr. Sandra Reznik
Acting Chair, Institutional Review Board
Tel 718-990-2634
rezniks@stjohns.edu

Dr. Marie Nitopi
IRB Coordinator
Tel 718-990-1440
nitopim@stjohns.edu

Protocol # 1118-138

Approval Date November 19, 2018

Expiration Date: November 18, 2019

Protocol Title: What Made Them Stay? Male Nursing students' Perceptions on Entering and Completing Nursing School

Please be advised that your human subject protocol has been approved as expedited by the IRB. You may begin your study.

IRB approval of research projects is valid for **one year** only from the original date of approval. This study expires on **November 18, 2019**. Approval of the continuation of the research is possible on a yearly basis. A new proposal must be submitted upon request for renewal.

You will not be permitted to collect data more than twelve months from the date of approval without an extension granted by the IRB. Mark your calendar today for October 19, 2019. You should submit your request for continuation on that date and no later.

It is imperative that you keep this memo and the email on file where it can easily be accessed. You will need to provide copies of this document when involved in further correspondence with the IRB.

Best wishes for successful pursuit of this research.

APPENDIX B



MEMO

Institutional Review Board
Federal Wide Assurance: FWA00009066

Date: March 6, 2019

To: Michael M. Sealy

CC: Dr. Stephanie Tatum
Dr. Rene Parmar
Dr. Mary Beth Schaefer

Dr. Sandra Reznik
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Tel 718-990-2634
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Tel 718-990-1440
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Protocol # 1118-138

Original Approval Date November 19, 2018

Expiration Date: November 18, 2019

Protocol Title: What Made Them Stay? Male Nursing Students' Perceptions on Entering and Completing Nursing School

Please be advised that your human subject amendment application (dated 2/24/19) has been reviewed and approved by the Institutional Review Board (IRB). You are free to begin your project with these new revisions.

As a reminder, SJU-IRB approval of research projects is valid for one year only from the original date of approval. Beyond this period, a new proposal must be submitted.

If you have any questions, please do not hesitate to call me or Marie Nitopi, IRB Coordinator at 718-990-1440.

Best wishes for successful pursuit of this research.

APPENDIX C

Semi-Structured Interview Protocol

The questions for this protocol are as follows:

1. Tell me a little bit about yourself
 - 1.1. Tell me about your interest in nursing.
 - 1.2. When did you first become interested in nursing?
 - 1.3. Could you describe at what point did you decided to become a nurse?
 - 1.4. Do you have any nurses in your family? Close friends?
 - 1.5. Who and what was most influential in helping to motivate you to get into nursing?
2. What were your motivations to stay engaged?
 - 2.1. Thinking about your experiences during nursing school, what were the most influential experiences to help you persist through the program? Why those?
 - 2.2. What were the greatest challenges or hindrances that you faced? How did you overcome them?
 - 2.3. What were your greatest rewards?
 - 2.4. What were the services offered by your school or program to help you persist in your program? How did you utilize the services?
 - 2.5. What opportunities for feedback on your educational experiences have you been afforded? What information has the institution and/or your professors attempted to gather based on your experiences? (examples: course evaluations, comment

cards, focus groups, etc.) Have you been invited to share your lived experiences and perceptions with anyone from the institution (either formally or informally)?

- 2.6. If you could suggest any additional services or support systems, what would they be?
3. Are there any other experiences with this program that you would like to discuss?
 - 3.1. Please describe any formal and informal relationships inside and outside of school which were influential in helping you persist. How were they developed?
 - 3.2. How did you get along with teachers and peers?
 - 3.3. Thinking about your academic experiences in this nursing program, how could it be improved? Can you elaborate?
 - 3.4. Thinking about your social emotional experience, what recommendations do you have for improvement? Can you elaborate?
 - 3.5. What are your post-graduation academic and career plans?

Thank you, for your time. Are there any additional comments about your experiences entering and matriculating in the nursing program we have not spoken about that you would like to share?

APPENDIX D



You have been invited to participate in a research study to learn more about the lived experiences of male nursing students in pursuit of a nursing degree. This study will be conducted by Michael Sealy, as part of his doctoral dissertation in The School of Education, Department of Administrative and Educational Leadership at St. John's University. His faculty sponsor is Dr. Stephanie Tatum, in the Department of Administrative and Educational Leadership at St. John's University.

If you agree to be in this study, you will be asked to take part in an individual and or group interview that will last approximately one hour; the interviews will be audio recorded. You may review the transcript and request that all or any portion where you are included be destroyed. There is no perceived risks to you associated with your participation in this study.

Although you will receive no direct benefits, this research may inform schools of higher learning on strategies of how males can be recruited to nursing programs, increase retention once in the nursing programs, improve upon academic and career outcomes. As an incentive for your participation in an interview you will be given a \$10 gift card.

In order to maintain the confidentiality of your research records, you will select a pseudonym. Your name and the pseudonym will not be linked to the study in any way. Your responses to the interview questions will be kept confidential by the researcher, but the researcher cannot guarantee that others in the group will do the same; all participants will be asked to maintain confidentiality. There may be a need to follow up regarding clarifying information from the interviews; the follow up can occur via a phone call.

Your participation in this study is completely voluntary. If you change your mind at any time you may withdraw your participation without penalty. For interviews, you have the right to skip or not answer any questions you prefer not to answer. Nonparticipation or withdrawal will have no bearing on grades or academic standing.

If there is anything about the study or your participation that is unclear or that you do not understand, if you have questions or wish to report a research-related problem, you may contact Michael Sealy at 631-576-5214, michael.sealy16@stjohns.edu or Dr. Stephanie Tatum at 718-990-7788, tatums@stjohns.edu, 120 Commerce Drive in Hauppauge, NY. For questions about your rights as a research participant, you may contact Dr. Raymond DiGiuseppe, SJU Human Subjects Review Board Chair, St. John's University, 718-990-1440. Additionally, you will be provided with a copy of your signed consent form to keep.

Human Subjects Review Board Chair, St. John's University, 718-990-1440. Additionally, you will be provided with a copy of your signed consent form to keep.

Agreement to Participate

Participant's Signature

Date

Print Name

Interviewer Signature

Date

Vita

Name	<i>Michael M Sealy</i>
Baccalaureate Degree	<i>Bachelor of Science Northeastern University, Boston Major: Psychology</i>
Date Graduated	<i>May, 2001</i>
Other Degrees and Certificates*	<i>Master of Science, Walden University, Minneapolis Major: Nursing Education</i>
Date Graduated	<i>April, 2014</i>
Other Degrees and Certificates*	<i>Associate Degree Suffolk County Community College, Brentwood Major: Registered Nursing</i>
Date Graduated	<i>May, 2009</i>