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The Experience of Being a Full-Time Nursing Faculty Member in a Baccalaureate Nursing Education Program

Elizabeth A. Gazza

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THE EXPERIENCE OF BEING A FULL-TIME NURSING FACULTY MEMBER IN
A BACCALAUREATE NURSING EDUCATION PROGRAM

by

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Submitted to the Doctoral Faculty
of the School of Nursing in partial fulfillment
Of the requirements for
Doctorate of Philosophy

Duquesne University

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**APPROVAL OF FINAL DEFENSE OF DISSERTATION**

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DISSERTATION TITLE: The Experience of Being a Full Time Nursing Faculty Member in a Baccalaureate Nursing Education Program

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THE EXPERIENCE OF BEING A FULL-TIME NURSING FACULTY MEMBER IN
A BACCALAUREATE NURSING EDUCATION PROGRAM

Elizabeth A. Gazza, PhD

Duquesne University, 2006

The purpose of this hermeneutic phenomenological study was to understand the experience of being a full-time nursing faculty member in a baccalaureate nursing program, from the perspective of those having the experience. Upon receiving approval from the Duquesne University Institutional Review Board, informants were recruited using purposive and snowball sampling techniques. Sample size was guided by data saturation. Eight female informants, with an average of 6.1 years of experience in a full-time faculty position, shared their experiences through in-depth personal interviews. Each informant participated in a second interview to clarify data from the initial interview and to verify themes identified during data analysis. Field notes and a demographic questionnaire also served as data sources for the study. Data were analyzed using a hermeneutic phenomenological approach based on the Urecht School of phenomenology. Trustworthiness of the study was established through critical reflection and opening up the inquiry. Five themes were uncovered through data analysis including (a) making a difference in the student, profession, and the world; (b) being a gatekeeper to the profession; (c) trying ways to balance multiple roles; (d) support is vital: can't do it alone; and (e) workplace relationships: the good, the bad, and the ugly. Findings have implications for the development of research-based recruitment and retention strategies aimed at increasing the number of nursing faculty, and suggest the advancement of nursing science may be jeopardized as a result of faculty age and current practices in

higher education. Implications for the practice of nursing education focus on current nursing faculty, administrators in nursing education, and those responsible for developing higher education policies. Such implications relate to the development of healthy work environments, realignment of workload requirements, and the establishment of policies that facilitate balance between work and home life. Future research is recommended for the purpose of exploring the rewards of making a difference, the rationale for incivility in the workplace, and the level of faculty mentoring occurring in nursing education.

Dissertation Advisor: Joan Such Lockhart PhD, RN, CORLN, AOCN®, CNE, FAAN

DEDICATION

I dedicate this dissertation to my children, Evan and Jordan, who always seemed to understand why their mother was the only spectator at the baseball or basketball game reading or writing while watching the game. Work on this dissertation became a way of life and they understood why I was reading and writing, or asking them questions about what something meant. Because of their understanding, and the experiences I have shared with each of my children, I was able to complete this work.

I also dedicate this work to my husband Bill, who often began his night's rest in another room in the house because I had taken all available space in the bedroom. He supported me in many ways along this journey and for this, I am grateful.

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I would like to take this opportunity to acknowledge the members of my dissertation committee including Dr. Joan Such Lockhart (chairperson), Dr. Rick Zoucha, and Dr. Teresa Shellenbarger. They provided me with invaluable guidance throughout the completion of this work. Their support helped me to look at the world through a qualitative, rather than strictly quantitative, lens. For this, I will be forever grateful.

Work of this nature would not be possible without the help of the nursing faculty members who participated in this study. I acknowledge them for taking time from their busy schedules to share with me their experiences as nursing faculty. Sharing of themselves in this capacity was invaluable in helping me to understand the experience of being nursing faculty.

Lastly, I would like to acknowledge those who inspired me to reach this point in my career. My parents, who never let me give up, even when my high school guidance counselor told me I could never be a nurse. Andrea Cocovich, who offered me my first teaching position in the licensed practical nursing program where I was once a student. Those experiences served as the foundation for my career, including the completion of this dissertation.

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CHAPTER 1

INTRODUCTION

Background

The United States is in the midst of a nursing shortage that is expected to intensify. In 2004, the U.S. Bureau of Labor Statistics (BLS) projected long term statistics regarding the supply of nurses. These projections included a need for more than one million new and replacement nurses by the year 2012. A 27.3% increase in the number of nurses needed nationwide was projected for the period of 2002-2012 compared to a 14.8% increase for all occupations (Hecker, 2004).

Various strategies have been implemented with the goal of attracting additional individuals to a career in nursing. These approaches potentially can increase the number of nursing school graduates and subsequently assist in resolving the general nursing shortage (American Nurses Association [ANA], 2002; Joint Commission on Accreditation of Hospital Organizations [JCAHO], 2002). However, in order to educate additional nurses, there must be an adequate number of nursing schools and a sufficient supply of qualified nursing faculty members. The latter is problematic since nursing education programs are experiencing a shortage nursing faculty members.

The following is a look at background information about the nursing faculty shortage including contributing factors and suggestions to alleviate. This background information begins with a historical review of the evolution of the nursing professorate in the context of higher education.

Evolution of the Nursing Professorate

In order to understand the experiences of nursing faculty, it is necessary to review the inception of the professorate within the realm of higher education. The following is such a review and a look at the impact of recent trends in higher education that continue to shape the faculty experience, including that of nursing faculty.

Finkelstein (1984) succinctly described the emergence of the faculty role in higher education since its inception. Higher education had its beginnings in the United States between the years of 1750-1820. Faculty members, referred to as tutors, were males, approximately 20-years-old, who had earned a baccalaureate degree for the purpose of entering the ministry. Tutors followed students through all four years of their education and were responsible for the intellectual, moral, and spiritual development of their students. Tutors only held teaching positions on a temporary basis. Permanent faculty positions only resulted from philanthropic bequests. These individuals were appointed to teach discipline-specific content since they had some post-baccalaureate professional training in the area of law, theology, or medicine. While faculty members continued to be responsible for the intellectual and moral development of their students, they also assumed responsibility for student discipline (Finkelstein, 1984).

As the number and size of communities continued to grow, so did the number of permanent faculty. The professorate became a long-term career option that was especially appealing to members of the ministry who were experiencing job insecurity. Clergymen began building colleges and engaging in the professorate as a way of enhancing their careers. As professors, they participated in various community activities. At times of war, they were called upon for their expertise. They also served on boards of

education, national honor societies, art and historical societies, and state and federal government commissions. Once participation in service activities became visible, the general public supported the work of faculty (Finkelstein, 1984).

The rise of science facilitated the development of academic disciplines, research, and graduate education, which allowed for the development of specialists and discipline-specific scholarly publication. As faculty members specialized in a particular discipline, new roles and career sequences emerged. Junior faculty positions became entry level for the professorate. Instructor and assistant professor designations also were identified. By the end of World War II, the faculty role included teaching, research, student advisement, administration, and institutional and public service (Finkelstein, 1984).

Ruby (1999) described the evolution of the nursing professorate, although specific role expectations associated with the position were not presented. Initially, physicians served as faculty members who prepared nurses in the hospital setting. Program content was unstructured and not specific to the role of the nurse. It has been theorized that this educational structure was utilized as a way to ensure staffing of hospitals by using students to provide care.

In the early 1900s, nearly 100 years after the inception of higher education in the United States, nurse leaders began to move nursing education from the male-dominated hospital setting to colleges and universities where training could include liberal education. Hospital administrators resisted the proposed change. However, just as in higher education, scientific advancement and periods of unrest supported changes in nursing education and external funding sources provided the means for implementing the

needed changes. As the move of nurse preparation programs to higher education proved successful, graduate programs in nursing were implemented. This facilitated emergence of the nursing professorate. Mary Adelaide Nutting was appointed as the first professor in nursing in 1907, approximately the same time that specialization was occurring in higher education (Ruby, 1999).

Trends Impacting the Professorate

Nursing faculty joined the professorate at the time when the faculty role included participation in teaching, research, student advisement, administration, and institutional and public service. While these role expectations continued into the 21st century, changes in higher education began to influence the faculty work environment and the roles and responsibilities associated with being a teacher in higher education.

Several trends in higher education that impacted the faculty role were identified in a report on the Consortium for the Advancement of Private Higher Education's *Faculty Roles, Faculty Rewards, and Institutional Priorities* grant program offered between 1996 and 1998. In the final report on the grant program, Zahorski, Cognard, and Gilliard (1999) listed the most important issues challenging grantee institutions. These included an increase in the availability and use of instructional technology; the increased employment of adjunct, part-time, temporary, and non-tenure faculty; changes in attributes and needs of the student population including their dysfunctional backgrounds, increased work and family responsibilities, and a greater need for remediation; and the onset of new approaches to education such as the movement from teacher-centered to learner-centered instructional approaches. Collectively, these changes impacted the faculty experience.

Finkelstein and Schuster addressed trends impacting the faculty role that they identified through years of research on the topic (Rice, 2004). These included faculty retirements, an increase in instructional technology, a rise in the number of faculty who were non-U.S. citizens, economic forces that encouraged outsourcing of academic courseware and packaged degree programs, the infusion of female faculty, and unbundling of the faculty role as specialization increased. It is quite apparent that multiple factors continue to shape the faculty experience. In response, institutions of higher education have altered employment practices including faculty appointments.

A major change in higher education staffing occurred as a result of increased faculty retirements. Institutions of higher education began to replace retired faculty members with more part-time faculty and tenure-ineligible full-time faculty. This change was economically driven and had the potential to prevent talented individuals from choosing faculty careers due to the lack of job security. In addition, off-track appointments across all disciplines tended to be functionally specialized as either teaching-only or research-only. This meant that current trends increased specialization of the faculty role. Schuster stated, “That leaves us with a shrinking proportion of faculty who are truly core, “full-service” faculty members, performing all of the functions-teaching, research, and service-that became traditional during the 20th century” (Rice, 2004, p. 30).

Anderson (1998) highlighted another age-related issue that potentially impacts the supply of nursing faculty members. In an editorial, she discussed the age of doctoral recipients and the time required to complete degree requirements and stated that the median number of years between obtaining a bachelor’s degree and earning a doctoral

degree in several fields is less than 10 years. However, the norm of encouraging nurses to work between degrees lengthens the time required to become fully prepared for academic and/or research roles. In addition, Anderson indicated the mean age of assistant professors in nursing was 46 years-of-age whereas the median age of those earning a PhD in other disciplines was 31 to 39 years-of-age. According to Anderson, this translates to less time in an academic career for nursing faculty and ultimately impacts development of the scientific base of the discipline.

It is apparent that the professorate, which includes nursing faculty, evolved in response to various trends and the identified needs of students, communities, and disciplines. While the aging professorate is impacting the faculty complement in higher education, it is of particular concern in nursing where supply of new faculty is limited.

The Nursing Faculty Shortage

As institutions of higher education began offering nursing programs, having an adequate supply of faculty became essential. While the profession currently is experiencing difficulties in meeting the demand for qualified faculty, this is not the first shortage experienced in the realm of nursing education. There are many similarities between the previous and current shortage, which warrants a brief review of the former.

Heidgerken (1956) published a review of several unpublished manuscripts from the early to mid-1950s which presented reasons for and strategies to counteract a nursing faculty shortage. Few nurses choosing careers as teachers and an increase in the number of students enrolling in formal education programs were cited as reasons for this earlier shortage. These reasons are the same as for the current shortage.

Recommendations to counteract the earlier shortage included the recruitment of more nurses into programs that prepare them for teaching and making better use of teachers currently in the workplace by improving working conditions and personnel policies. Suggestions were made to encourage teachers to highlight the rewards and satisfaction of a faculty position. However, this was troublesome since there were few attributes to convey aside from the development of instructional skills. Improving working conditions included the use of teaching assistants, additional secretarial support, teacher orientation and guidance, and offering in-service education to facilitate continued professional development of the nursing professorate (Heidgerken, 1956).

The strategies suggested for alleviating the previous shortage are similar to those being inferred for the current shortage. The following is a look at the recruitment and retention strategies that have been suggested for alleviating the current shortage.

Recruitment and Retention of Nursing Faculty

Recruitment and retention strategies can be inferred or research-based. Currently, the literature reflects a majority of the former resulting in the implementation of stop-gap measures to alleviate the shortage. For example, professional organizations, government agencies, nursing leaders, and health care organizations have suggested a variety of faculty recruitment and retention strategies. Some have based these strategies on descriptive statistics reported by the National League for Nursing (NLN) and the American Association for Collegiate Nursing (AACN), but few were the result of research focusing on the experiences of current nursing faculty members.

The NLN and the AACN are two organizations that monitor faculty vacancy rates in nursing education programs. The NLN surveys member and non-member diploma,

associate degree, and baccalaureate and higher degree nursing education programs. The AACN surveys the same types of programs but focuses on member schools. Collectively, the descriptive statistics reported by both the NLN and AACN illustrate the scope of the faculty shortage and have been used as the basis for several inferred recruitment and retention strategies.

To date, inferred strategies focused on attracting nurses to the professorate, preparing nursing faculty, funding to support advanced education, and retaining those already in nursing faculty positions. For example, statistics describing the aging professoriate have led to the development of recruitment strategies geared towards attracting a younger population to teacher preparation programs. Various authors suggested targeting baccalaureate graduates who show potential for teaching roles. (Anderson, 1998; Berlin & Sechrist, 2002; Brendtro & Hegge, 2000; DeBasio, Jensen, Kippenbrock, Sharts-Hopko et al., 2003; Hinshaw, 2001; Trossman, 2002). Recruiting a younger population requires current educators to consider the image they convey to students (Anderson, 1998). The NLN (2002) and AACN (2003b) called upon professional nursing organizations to assist in promoting a positive image of nurse educators and careers in the field of nursing education.

Attention also has been focused on the limited number of faculty preparation programs resulting in calls to increase the number of graduate level education courses and programs that prepare nurses for faculty roles (Brendtro & Hegge, 2000; DeYoung & Bliss, 1995; NLN, 2002). Accessibility, flexibility, convenience, and timeliness of programs also were identified as factors that could increase enrollment in graduate level programs that prepare future nurse educators (AACN, 2003b; Brendtro & Hegge, 2000;

DeYoung & Bliss, 1995; JCAHO, 2002; NLN, 2003; Tri-Council for Nursing, 2002; Trossman, 2002). Individuals and organizations called for education standards for use in the preparation of nursing faculty (ANA, 2002; Kelly, 2002; NLN, 2002), restructuring of curricula to provide seamless basic and advanced education (AACN 2003b), and specialized training to prepare clinical nurses for the faculty role (Lewallen, 2002). The NLN (2005) responded with the development of educator competencies and a professional certification process for nurse educators.

The cost of preparing for a faculty position also has gained attention. McNeal (1990) expressed concern about the costs involved in preparing for a career in nursing education. She stated, “High school graduates seeking to make viable career options are very interested in combining intellectually satisfying careers with significant financial rewards, realized over time” (p. 2). McNeal pointed out the poor return on an investment of nearly six figures to obtain a doctoral degree and the need for controls on rising costs associated with advanced education.

Recommendations for the funding of advanced education have included loan repayment programs (Hinshaw, 2001) and a call for funding through national efforts (Zungolo, 2002). Nurses were asked to contact members of the state legislature in order to attract attention to the nursing faculty shortage and subsequently secure funding for nursing education (Hodges, Williams, & Carman, 2002). The NLN (2003) and AACN (2003b) also recommended increases in financial aid and support for those pursuing advanced degrees in nursing education. In an NLN newsletter, Rizzolo (2002) presented the NLN Foundation for Nursing Education, a nonprofit subsidiary of the NLN, which was established in March 2002. The purpose of the Foundation is to secure funding for

scholarships to support those preparing for the faculty role and the completion of their education. In addition to funding support for education, others called upon federal and state government, private industry, and foundations to provide funding for nursing faculty positions (JCAHO, 2002).

In addition to recruiting more nurses to the faculty role, suggestions to increase the supply of faculty also have focused on the retention of those already teaching in nursing education. Recommendations to increase salary and compensation for nursing faculty have been plentiful in the published literature (Brendtro & Hegge, 2000; DeYoung & Bliss, 1995; NLN, 2003; Trossman, 2002). Offering convenient professional development opportunities to current nurse educators (Rizzolo, 2002), facilitating completion of doctoral studies (NLN, 2003), and revising retirement (AACN, 2003b; Hinshaw, 2001; NLN, 2003), and tenure and promotion requirements to include credit for continued clinical practice (AACN, 2003b) also have been recommended through position statements, white papers, and inferred from reviews of the literature.

The current nursing faculty shortage is not the first experienced by the profession. Many of the recruitment and retention strategies suggested in the 1950s have been recommended to alleviate the current shortage and numerous professional organizations, nurse leaders, and nurse educators have inferred additional strategies from descriptive statistics about the faculty population. A point of importance is that these strategies were suggested by those familiar with nursing education and were not identified through empiric approaches.

Summary

The purpose of the background information presented was two-fold. The first was to convey a description of how the nursing professorate evolved in the realm of higher education. This information aids in understanding how various faculty roles and responsibilities were assumed by nursing faculty as they joined the professorate. The second was to highlight the shortage of qualified nursing faculty currently impacting nursing education and the recruitment and retention strategies that have been suggested to alleviate the shortage. Collectively, this information conveys that the faculty role is dynamic in nature and a plethora of strategies to increase the supply of qualified nursing faculty members have been inferred.

Purpose

The purpose of the current study was to understand how full-time nursing faculty members in a baccalaureate nursing programs interpret their lives and make meaning of their experiences. Understanding the experiences of nursing faculty members provides insight for educational administrators, nurse educators, nursing students, and nurse clinicians into what it is like to be a nursing faculty member. Discovering the lived experiences of nursing faculty in higher education has the potential to aid in the development of research-based recruitment and retention strategies leading to an increased supply of qualified nursing faculty members.

Significance of Study

By describing and interpreting the meaning of their experiences, faculty in the study provided valuable information about what it is like to be a nursing faculty member

in a nursing education program that prepares entry-level registered nurses for the workforce. Results of the study serve as the foundation for establishing research based recruitment and retention strategies aimed at increasing the number of qualified nursing faculty.

On-going assessment of the effectiveness of each approach in recruiting additional nurses to the faculty role and retaining those already in teaching positions could lead to the development of an empiric body of knowledge about how to recruit and retain qualified faculty. This could lead to the establishment of an organized and effective approach to increasing the number of qualified nursing faculty preparing entry-level registered nurses for the workforce.

Research Question

The research question that guided inquiry into the phenomenon of interest was: “What is the lived experience of being a full-time faculty member in a baccalaureate nursing education program?”

Definition of Terms

For this study, the following terms were defined:

Baccalaureate level nursing education program: A nursing education program that leads to an entry-level baccalaureate degree in nursing.

Entry-level: The pre-licensure level of nursing education that prepares individuals for initial entry into professional practice as a registered nurse.

Full-time nursing faculty member: A registered nurse with graduate level preparation who is classified as “full-time” according to the criteria of the employing institution of higher education.

Institution of higher education: A college or university that provides educational programs at the minimum of a baccalaureate level.

Assumptions

1. Human beings shape and create their own experiences and informants and the researcher bring their own knowledge, values, and beliefs to the study. Therefore, there can be multiple realities that evolve or change over time (Polit & Beck, 2004).
2. Informants in the study will be willing to discuss their experiences and will do so in a truthful manner.

Limitations

1. Purposive sampling is a non-probability sampling technique. Therefore, generalizing findings to a larger population is not appropriate. Results of a phenomenological inquiry are transferred rather than generalized.
2. During the interview process, study participants might highlight what they feel is an expected response rather than accurately share the views on the experience of interest.

CHAPTER II

REVIEW OF THE LITERATURE

A literature review serves to increase familiarity with research published and omitted on a particular topic. The purpose of this section is to provide an in-depth review of the research published on the nursing faculty population, the nursing faculty shortage, recruitment and retention strategies for alleviating the shortage, and what is known about the role of nursing faculty members teaching in nursing programs in higher education. Gaps in the published literature also are identified.

Research

Characteristics of the Nursing Faculty Population

In 2002, the National League for Nursing (NLN, 2003) conducted a survey of all member and non-member baccalaureate and higher degree, associate degree, and diploma nursing programs in the United States and its territories. Findings are useful in describing the basic demographic characteristics of the nursing faculty population.

The baccalaureate and higher degree nursing programs who participated in the survey (n=460) indicated that as of February 2002, they employed an estimated 10,636 full-time faculty members. A majority of those faculty members were female (95.8%), white (91.8%), and 45-60 years of age (67.3%). Approximately one-half (49.4%) of the full-time faculty members held a doctoral degree as their highest earned credential. Nearly forty percent (38.9%) were at the rank of assistant professor and earned a median salary of \$45,427. About one quarter (25.6%) were associate professors who earned

\$53,440, 11.9% were full professors with a median salary of \$64,984, and 18.1% were instructors earning \$39,000 (NLN, 2003).

The findings related to the age of nursing faculty members parallel those reported by Buerhaus, Staiger, and Auerbach (2002) about the general nursing population. In a retrospective cohort analysis of employment trends of registered nurse (RN) cohorts, age-related data was collected for RNs aged 23-64 years (n=60,386). The average age of working RNs increased by 4.5 years between 1983 and 1998. The average age of RNs was forecasted to be 45.4 by the year 2010. The researchers concluded that the primary factor leading to the aging nursing workforce appeared to be a decline in the number of women choosing nursing as a career during the last 2 decades. Since the population of RNs serves as the pool for future nursing faculty, the aging nursing workforce is obviously a factor contributing to the inadequate supply of qualified nursing faculty.

Berlin and Sechrist (2002) utilized American Association of Colleges of Nursing (AACN) faculty survey data collected between 1993 and 2001 to determine the impact of age and retirement on the future availability of doctorally prepared nursing faculty. Linear regression was utilized to assess average age change and retirement year of full-time doctorally prepared nursing faculty. In 2001, 4,451 doctorally prepared faculty members responded to an annual faculty survey of AACN member schools. The median age of participants was 53.2 years, with a median of 53 years and a range of 28-78 years. When comparing faculty cohorts from 1993 to 2001, it was noted that the proportion of faculty older than 50 years-of-age had increased from 50.7% in 1993 to 70.3% in 2001. A 0.8% decrease in the age group of 35 years and younger was noted. Additionally, a 17.3% decrease occurred in the 36-45 age group. Findings also revealed that the modal

year of retirements for nursing faculty cohorts surveyed between 1993 and 2001 will be 2009 which will contribute greatly to the shortage of qualified faculty.

These descriptive statistics indicate that a majority of nursing faculty are white, female, and between the ages of 45-60 years-of-age. Most of the nursing faculty members are assistant professors and about one-half have earned a doctoral degree. The age range of current nursing faculty confirms the suggestion that in the near future, the profession will lose qualified faculty to retirement.

Faculty Vacancy Rates and Their Impact on Program Enrollment

The scope of the current nursing faculty shortage was exemplified through a review of faculty vacancy rates and its impact on the general nursing shortage. The NLN (2003) reported vacancy rates of 6.0%, 5.1%, and 3.6% for budgeted positions in baccalaureate and higher degree programs, associate degree nursing (ADN), and diploma programs respectively. Similar rates were reported in the year 2002 when the Southern Regional Board of Education (SREB), which represents 16 SREB states and the District of Columbia, revealed a serious shortage of nursing faculty in all member states and the District of Columbia at the beginning of the 2000-01 academic year (Williams & Hodges, 2002). The reported vacancy rate for unfilled full-time faculty positions was 5.7% for baccalaureate and higher degree programs (Commission on Collegiate Nursing Education [CCNE], 2002). In July 2004, the AACN (2005b) reported a national nurse faculty vacancy rate of 8.1% or 2.9 faculty vacancies per school. This included faculty positions that were newly-created to accommodate additional students. Over half (54.3%) of the positions required a doctoral-prepared faculty member.

The absence of an adequate supply of nursing faculty impacts enrollment in nursing education programs. In the year 2000, the AACN surveyed 671 member schools offering baccalaureate and higher degree programs. Of those schools, 486 reported receiving 48,430 applications for admission from qualified applicants. Of those applicants, 5,832 were not offered admission despite the fact that they were considered qualified applicants. Nearly one-third (32.8%) of the responding schools cited insufficient faculty as the rationale for not accepting all qualified applicants (Berlin & Sechrist, 2002). The percentage of nursing schools who cited insufficient faculty as the reason for not accepting all qualified applicants increased to almost two-thirds (62%) in the year 2002 (AACN, 2003a). In 2003, the survey revealed that over 11,000 qualified applicants were refused admission due to the limited number of nursing faculty, clinical sites, and classroom space (AACN 2003c). And in Fall 2004, the AACN (2005a) reported that more than 32,000 qualified applicants were denied admission to nursing education programs with 29,425 of these individuals being denied admission to baccalaureate programs. Also of concern is that 2,748 were denied access to master's programs and 202 to doctoral programs, which prepare future faculty.

The shortage of nursing faculty obviously limits the profession's ability to respond to the general nursing shortage. While descriptive statistics reflect the characteristics of the nursing faculty population, they also exemplify the scope of the nursing faculty shortage. However, it is important to understand reasons why the shortage is occurring. Some of the reasons are related to the inability to recruit nursing faculty members and other reasons inhibit the retention of those already in faculty positions.

Factors Contributing to the Nursing Faculty Shortage

Berlin and Sechrist (2002) indicated that attention was first directed to the potential for the current shortage of qualified nursing faculty in 1990. In a review of the literature they cited several recurring themes related to the developing nursing faculty shortage including: 1) the aging professoriate, 2) the movement of doctorally prepared nurses to clinical and private settings for employment, 3) workload and workplace concerns, 4) unrealistic role expectations, and 5) diminished pipeline of students preparing for faculty positions. The AACN (2003b) cited additional contributing factors such as: “1) departure from academic life, 2) salary differentials between faculty and clinical positions, 3) tuition and loan burden for graduate study, 4) age of doctoral recipients and time to degree, and 5) alternative career choices” (p. 2-23).

When considering the retention of nursing faculty members, the NLN (2003) reported that an average of 1.7 full-time faculty members per program departed from their jobs in baccalaureate and higher degree programs. Over 23% of faculty departures were due to the desire for a career change. Family obligations (16.3%), salary issues (10.3%), and workload concerns (3.2%) also were cited as reasons faculty vacated their positions in baccalaureate and higher degree programs. These findings raise questions about why nursing faculty members must leave their jobs to manage family obligations, and how salary and workload issues fail to meet expectations held at the time of hire.

Historical Comparison

The current faculty shortage is not the first to impact nursing education. Logan (1966) conducted a study (n=84) in one of five regions in Scotland to determine what deters potential educators from enrolling in courses that prepare faculty and why nursing

faculty choose to leave their teaching positions. Potential educators encompassed all registered nurses including those working as charge nurses because experience in this position was required for nursing faculty.

Of the potential nursing faculty members, more males (47%) than females (8%) expressed interest in becoming nurse tutors or faculty. A genuine liking for teaching was the reason why nurses chose to pursue a faculty position. Reduced contact with patients, lack of general education requirements, dislike of public speaking, preference for other work positions, and dislike of the relationship between classroom teaching and clinical situation were cited by potential faculty as reasons why they would not pursue the educator role. Retirement was cited as the main reason for a nurse to vacate a teaching position. Six of the current educators indicated the status of and salary for nursing faculty was less-favorable than that of their current administrative position and unless changes were made in these areas, more nurses will not pursue faculty work. Two males actually left education for higher paying administrative positions even though they expressed satisfaction with their faculty work.

Study results led to recommendations about how to increase the number of nursing faculty. These included improving publicity about the role to attract senior level nursing students and younger nurses, attracting married nurses who were entering the workforce and had a desire to teach, and increasing salaries and the career structure for nurse educators (Logan, 1966). The suggestion to target undergraduate nursing students who show potential also was a finding of a study on faculty views on recruiting college teachers published at a time of an earlier general faculty shortage (Eckert, 1960).

Strategies to Recruit and Retain Nursing Faculty

Background information on the faculty shortage revealed that many individuals and organizations have suggested recruitment and retention strategies. However, little of the research published on this topic is empiric in nature. How is it possible to appropriately respond to a serious personnel shortage in the absence of research on the effectiveness of various strategies?

Brendtro and Hegge (2000) conducted one of the few reviewed studies aimed at identifying research-based strategies for recruiting more nurses to faculty positions. In a statewide survey of 288 nurses with graduate degrees, they utilized a qualitative approach to identify incentives used to entice practicing nurses into faculty roles and strategies to increase the pool of qualified nursing faculty. Responses to the open-ended questions that appeared on the researcher-developed instrument were evaluated for recurring themes. Participants identified: 1) closer proximity to work, 2) improved compensation, 3) more realistic professional expectations, and 4) increased opportunity to continue clinical practice while teaching as the incentive to entice practicing nurses into faculty positions (p. 101). Four themes emerged as suggestions for increasing the pool of qualified applicants including: 1) ground educators in clinical practice, 2) provide scholarships for those pursuing advanced degrees, 3) increase access to master's and doctoral education, and 4) improve faculty salaries and benefits (p. 101). This was the only study retrieved that utilized a qualitative approach and included current graduate-prepared nurses yet it is limited by the fact that nurses in just one state were included in the sample. It is possible that results are unique to this particular state and region.

Seldomridge (2004) published the only reviewed study on the effectiveness of a faculty recruitment strategy. The study focused on 54 undergraduate nursing students enrolled in a leadership course to determine their perceptions of the faculty role. The goal was to increase interest in the nursing professorate as a career choice. Complexity of the role, level of responsibility, liability, patience required to do the job, and the belief that the job was never finished were identified as deterrents to considering the professorate as a career option. Role attributes that attracted participants to the faculty role included the desire to contribute to the nursing profession and to share their love of learning with others.

While many professionals have offered suggestions on how to resolve the faculty shortage, research on the recruitment and retention of nursing faculty is relatively non-existent in the published literature. This is cause for concern since having an organized body of knowledge on strategy effectiveness could improve the profession's response to the faculty shortage. In addition, research in this area indicates that students' perceived image of the faculty role is a deterrent to attracting nurses to the faculty positions. Therefore, attention to the nursing faculty role is warranted.

Roles and Responsibilities of Higher Education Faculty

Since literature on the nursing faculty role is relatively sparse, it is necessary to first consider research on the roles and responsibilities of faculty in all disciplines in higher education and proceed to that published on nursing faculty.

Finkelstein (1984), Bowen and Schuster (1986), and Finkelstein, Seal, and Schuster (1998) have followed the development of the American professorate during the latter half of the 20th century. As part of his study, Finkelstein reviewed research

focusing on the allocation of faculty effort across components of the academic role. Teaching, research, publication, administration, student contact, and community service were the components included in the study. While this study is of importance, pre-determined faculty roles were utilized rather than allowing faculty to report the duties associated with their work.

Bowen and Schuster (1986) examined trends in compensation and working conditions by interviewing 500 faculty members from 38 different universities and colleges. A pre-determined set of tasks associated with the faculty role also were used for this study. As a framework for presenting the work of college and university faculties, the researchers divided faculty work into four overlapping tasks including instruction, research, public service, and institutional governance and operation. Each task was clearly defined but the job functions were not identified by faculty in higher education. Results of the study indicated that faculty were satisfied with their intellectual lives, dedicated to their work but are dispirited, fragmented, and devalued.

While Finkelstein (1984), Bowen and Schuster (1986), and Finkelstein, Seal, and Schuster (1998) completed classic research on faculty in higher education, most of the research was completed prior to the onset of recent changes in higher education, such as those identified by Kezar (2000). Kezar completed a quantitative analysis of higher education literature in the Education Resources Information Center (ERIC) database for the purpose of comparing the number of documents published on particular topics between 1999 and 2000 to those published as early as 1986. A qualitative analysis of content included in ERIC abstracts was also conducted in order to identify recurrent themes. Nine newer trends of concern to higher education were identified including the

aging of faculty who entered the profession in the early 1960s, an increase in internationalized faculty, growth of part-time/contractual faculty, fall of tenure and increase in productivity/workload, collective bargaining, rewarding the scholarship of teaching and service, aligning rewards and mission, and restructuring doctoral programs. Kezar concluded that institutions must consider these trends when defining faculty roles and responsibilities.

Austin (2002) conducted one of the few studies focusing on perceptions about the faculty career and observations about faculty roles and responsibilities. In a qualitative, 4-year longitudinal study of 79 graduate students and teaching assistants, it was discovered that faculty seem to experience constant pressure, stress, and conflicting demands. They work in an environment where teaching is emphasized but rewards are based on research productivity. Participants were unable to communicate a comprehensive statement of what faculty life involved and expressed a limited understanding of the roles that faculty must fulfill in addition to teaching and research. They did cite advising, institutional service, and public service as components of the faculty role.

Ambiguity about the faculty role also was exemplified in a study of 350 early career faculty and graduate students preparing for faculty work (Rice, Sorcinelli, & Austin, 2002). Findings revealed a gap between expectations and realities of an academic career. Participants indicated that graduate education did not prepare aspiring faculty for the full range of experiences they would encounter in the professorate including teaching, student advising, public service and outreach, research, and institutional citizenship.

Tenure and evaluation of faculty have not kept pace with recent trends in higher education that are impacting workload. This results in faculty feeling uncertain about where to put the emphasis in their own work. Research implications also have included the need to evaluate faculty performance in research, teaching, and service and the worth of these activities in relation to institutional missions and goals (Kezar, 2000). Pressure to meet demands limits the availability of time for collegiality, community, and collaboration and impacted balance between work and personal life. A need to further understand the work life of faculty was recommended.

The most comprehensive project on the faculty role focused on college teaching as a meta-profession (Arreola, Theall, & Aleamoni, n.d.). While the approach used to develop a list of faculty roles and responsibilities is unclear, a conceptualization of college teaching as a meta-profession, a profession built upon the foundation of a base profession was developed. The nursing faculty role exemplifies this conceptualization since individuals must be credentialed as registered nurses before they can pursue faculty positions. Four broad categories of skills are included in the meta-profession model including those related to the base profession and those needed for instructional design, instructional delivery, and leadership. The skill list does incorporate those required of faculty in light of recent trends in higher education.

Research involving the faculty role indicates that current trends impacting higher education are shaping the faculty experience and attempts have been made to conceptualize the complex faculty role. The current state of the published research on this topic indicates the faculty experience is multifaceted in nature and not clearly understood. Faculty performance is being evaluated according to criteria than may no

longer accurately reflect all aspects of the job and newer faculty members are experiencing conflict between their preparation for faculty work and the realities of the position.

Roles and Responsibilities of Nursing Faculty

Several studies focused specifically on the roles and responsibilities of nursing faculty. Of interest is that nursing faculty members often are expected to participate in faculty practice in addition to completing traditional tasks expected of all higher education faculties (Sawyer, Alexander, Gordon, Juszczak, & Gilliss, 2000). This seems to indicate that the nursing faculty role may have additional dimensions when compared with those of all higher education faculty.

Gormley (2003) completed a meta-analysis examining the factors that influence job satisfaction of nursing faculty. Role conflict and role ambiguity were identified as variables that predicted the job satisfaction of nursing faculty. As role conflict and role ambiguity increased, job satisfaction decreased. These findings suggest that clear identification and communication of faculty roles and responsibilities could potentially improve satisfaction of nursing faculty. This is important at a time when recruitment and retention of nursing faculty is paramount.

Unclear role expectations were identified in a study of 226 nursing faculty from 20 randomly selected ADN and baccalaureate degree nursing programs in the Midwestern portion of the United States (Oermann, 1998). The study focused on work-related stress of clinical nursing faculty. A list of 23 statements describing possible work-related stressors was used for data collection. Using a 5-point Likert scale, respondents rated the extent to which they experienced each potential stressor in their

current clinical faculty role. Content validity of the tool was established through a pilot study. The Alpha coefficient was reported as .93. Results indicated that difficulty coping with job expectations, feeling physically and emotionally drained at the end of a clinical day, and having demands of their roles interfere with other activities of personal importance were just a few of the job-related stressors. A need for further understanding of the faculty role was identified. Results could be used to better prepare faculty for demands associated with the job leading to lower levels of work-related stress.

The need for improved preparation of nursing faculty also has been studied. Riner and Billings (1999) asked 352 faculty teaching in a Midwestern state to complete a researcher developed survey containing 11 items focusing on the faculty role and how prepared they were to fulfill the roles. Numerous topics were identified in areas where additional preparation was deemed necessary. This seems to indicate that current programs geared towards preparing nursing faculty are not addressing all aspects of the faculty role. Findings indicated that faculty preparation and ongoing professional development programs must incorporate the changing roles and responsibilities of nursing faculty. Similarly, Siler and Kleiner (2001) sought to uncover the meaning of the new faculty experience. They utilized a purposive sample of nursing faculty who were in their first year in a new faculty position. Saturation occurred after conducting personal or telephone interviews with six experienced and six novice nursing faculty (n=12). Findings revealed that new nursing faculty experience feelings of isolation as a result of inadequate preparation for the faculty role.

Nursing faculty members have job responsibilities that exceed those of their peers in higher education. This compounds the role conflict and ambiguity they experience. Nursing faculty members express feelings of not being adequately prepared for their work leading to stress, decreased job satisfaction, and feelings of isolation. These issues are all of concern at a time when the profession is experiencing an inadequate supply of qualified nursing faculty.

Conclusion

The nursing faculty shortage served as the general topic area of interest for the proposed study. Nearly 200 reports, editorials, research studies, white papers, policy statements, and position statements relating to the nursing faculty shortage were reviewed. Findings indicated that in addition to the descriptive statistics from the NLN and the AACN, numerous literature reviews, editorials, positions statements and policy statements have been issued regarding the nursing faculty shortage.

There is a great deal of speculation on why there is a faculty shortage and how it can be resolved. There is agreement between the published documents. However, there is little actual research published on the recruitment and retention of qualified nursing faculty members. This seems to indicate that the profession lacks an organized body of knowledge necessary to respond to and resolve the faculty shortage. Instead, the use of stop-gap measures is taking precedent.

When considering what is empirically known about the faculty role, it is apparent that role ambiguity and role conflict exist. This seems to be due to changes in the faculty experience as a result of trends in higher education and subsequent inadequate preparation of those entering the professorate. While there is consensus in the literature

about how much the faculty experience has changed since its inception, the current status of the role remains unclear. This represents a serious gap in the literature.

If the nursing profession is to respond to the faculty shortage in a timely and effective manner, it is necessary to address the identified gaps in the literature. Only then will it be possible for the profession to establish research-based approaches to recruiting and retaining nursing faculty who prepare entry-level registered nurses for the workforce.

CHAPTER III

METHODOLOGY

This chapter addresses the design of the study including the philosophical underpinnings of phenomenology. Information about the sample, sampling techniques, and setting is followed by a description of data collection and analysis protocols. Methods for protecting of human rights and establishing trustworthiness conclude this chapter.

Design

Phenomenology is both a philosophy and a research methodology. The phenomenological movement consisted of three distinct phases including the preparatory phase, the German phase, and the French phase. Multiple leaders emerged during this movement, each with a new or revised philosophical approach that served as a framework for inquiry. While they all focused on the life-world and believed people could only be understood in the context of their world, they proposed various strategies and techniques for conducting phenomenological inquiry (Cohen, Kahn, & Steeves, 2000).

Hermeneutic phenomenology as a methodology is based on the philosophical underpinnings of Dutch phenomenology of the Utrecht School, which combines characteristics of descriptive and interpretive phenomenology (Cohen et al., 2000; Polit & Beck, 2004). The purpose of descriptive phenomenology, founded by Husserl, is to obtain fundamental knowledge of a phenomenon. This methodology helps elicit a description about a particular experience from the perception of the individual having the experience (Polit & Beck, 2004). Heideggerian hermeneutics focuses on interpretation

and is a method that involves uncovering hidden meanings in order to bridge the gap between familiar and familiar (Dowling, 2004).

The purpose of the current study was to understand the lived experience of being a full-time nursing faculty member in a baccalaureate level nursing education program. To fully understand the experience, the researcher developed in-depth relationships with those working in faculty positions for the purpose of uncovering descriptions of the experience and the meanings attributed to the experience by the faculty member. Therefore, a hermeneutic phenomenological approach, consisting of descriptive and interpretive phenomenology, was used for the study.

Setting

A setting that provided for the best expression of rich data was utilized for the study. Speziale and Carpenter (2003) reported that participants are more likely to provide the information sought when they are comfortable. Therefore, the initial personal, face-to-face interviews were conducted at private locations mutually agreed upon by the researcher and informant. Primary locations for data collection included informant's private offices and a vacant classroom on a university campus. Follow-up interviews were conducted by telephone with all of the informants, which allowed the informant to select a comfortable and private location. Informants participated in telephone interviews from locations such as a private office at their workplace or at their homes. To maintain confidentiality, the researcher conducted the telephone interviews from a private office.

Sample

According to an American Association of Colleges of Nursing (AACN) survey of member and non-member schools, in 2004-2005 there were 5,577 full-time nurse faculty members who taught only at the baccalaureate level (Berlin, Wilsey, & Bednash, 2005). This population served as the potential pool of informants for the study.

When considering sample size, phenomenologists often rely on small sample sizes consisting of 10 or fewer informants (Polit & Beck, 2004). It is important to ensure that all informants have experienced the phenomenon being studied and are willing and capable of articulating what it is like to have the lived experience. This aids in establishing credibility of the study. Therefore, the inclusion criteria for the sample consisted of full-time nursing faculty members who had a majority, or 51%, of their current workload assignment in an entry-level baccalaureate nursing program, taught both theory and clinical courses, and who were willing to share their experiences.

Focusing on full-time baccalaureate level faculty controlled for job-related variables since institutions offering this level of nursing education consistently have teaching, service, and scholarship requirements for full-time faculty that are not usually required for part-time faculty members or faculty teaching in Associate Degree Nursing (ADN) or diploma programs. While these requirements do apply to faculty teaching in higher degree nursing programs, only nursing faculty who taught a majority of their assignment at the baccalaureate level were included because they prepared entry-level registered nurses to enter the practice arena. It is important that informants taught both theory and clinical courses since these are integral requirements of programs that prepare

entry-level nursing professionals for the workforce. Part-time nursing faculty members, nursing faculty with less than 51% of their workload assignment at the baccalaureate level were excluded from the study.

Both purposive and snowball sampling techniques were utilized for the study. “Purposive sampling is a non-probability sampling method in which researchers select participants based on personal judgment about the ones that will be most representative or informative” (Polit & Beck, 2004, p. 729). Since informants meeting specific inclusion criteria were the focus of the study, a purposive sampling technique was appropriate. Snowball sampling allows for the selection of additional informants through referrals from those who participated in or are familiar with the study (Polit & Beck, 2004). For this study, colleagues and informants were asked to refer the researcher to informants who met the inclusion criteria and could potentially be interested in participating in the study.

An initial sample pool of 8-10 informants was targeted for the study. In phenomenology, the sample size is not determined by the number of participants, but by data saturation, or when the repetition of salient points is achieved. This is the point when the data become redundant and no new information is gained from informants (Speziale & Carpenter, 2003).

Sample Recruitment

The researcher began the process of recruiting informants by personally notifying colleagues about the study and asking for volunteers and referrals to potential informants. Once a potential informant expressed interest in participating, the researcher made a personal contact via phone or e-mail to that individual for the purpose of describing the

study, assessing if the individual meets inclusion criteria, reviewing study protocols, and eliciting the individual's interest in participating in the study. During this contact, the initial interview was scheduled for individuals who expressed interest in being an informant for the study.

Instruments

Instruments for data collection included a researcher-designed demographic questionnaire (Appendix A) and an interview guide (Appendix B). Field notes, as written by the researcher, also were utilized as a data source.

A 10-item demographic questionnaire focusing on personal demographics, employment status, and professional experience was utilized for data collection. Items were selected for inclusion based on the nursing education and higher education literature and personal experience of the researcher in nursing education. Items were evaluated for clarity by four nursing faculty members and refined. The informant completed the questionnaire prior to the start of the face-to-face interview and took nearly 5 minutes to complete.

An interview guide that consisted of five semi-structured open-ended questions was available for use during data collection. Items on the guide were selected for inclusion based on the literature and refined following a pilot study involving four informants. The questions were designed to elicit an in-depth discussion about the experience of being full-time nursing faculty in a baccalaureate nursing education program. Probes such as, "Tell me more," and "Please share an example," were used to facilitate a richer discussion on a particular topic

Field notes, in the form of a personal journal, were written by the researcher and served as a second data source for the study. The notes included information such as written descriptions of nonverbal behaviors displayed by informants during the interview, characteristics of the environment during a face-to-face interview, the researcher's assumptions, thoughts and feelings about the interview, and the researcher's personal responses to the interview. According to Munhall (2001), this type of documentation serves as a layer of data and positions the researcher in the life-world of the study. The journal also provided a listing of study events that served as an audit trail, which aids in reducing bias (Cohen et al., 2000).

Procedures for Data Collection

When an individual who met the inclusion criteria expressed interest in participating in the study, the researcher communicated with the potential informant by telephone or e-mail to arrange a date, time, and location for the initial personal face-to-face interview. A copy of the cover letter explaining the study (Appendix C) and the consent form explaining the purpose and procedures of the study (Appendix D) was either mailed or e-mailed to the individual for review. A message confirming the scheduled interview was delivered via e-mail to the informant two days prior to the actual interview.

Personal, face-to-face interviews with each informant were conducted by the researcher for the purpose of data collection. All of the initial interviews were conducted over a three month period. Each initial interview lasted approximately 60-70 minutes. All interviews were audiotaped and transcribed verbatim. To allow for a rich in-depth

discussion, no limits on the interview length were imposed. The researcher began the interview session by reviewing the consent form with the informant and addressing questions about the study protocol. The informant signed two copies of the consent form, one copy for the informant and the other retained by the researcher. Next the informant completed the demographic questionnaire and the researcher began the interview. The informant was notified when the tape recorder was in use. A broad opening statement asking the informant to talk about what it is like to be a full-time faculty member teaching in a baccalaureate level nursing education program was used to begin the actual interview.

The researcher conducted a follow-up telephone interview with each informant, approximately three months after the initial interview. The purpose of the second interview was for the researcher to seek clarification of the informant's initial responses, verify data analysis with the informant, gather additional information from the informant, and answer any questions posed by the informant. Each follow-up interview lasted approximately 15-45 minutes. To allow for a rich expression of the experience, no time limits were imposed on the length of the second interview. All follow-up interviews were audio taped and transcribed and added to data obtained from the initial interview.

Procedures for Protection of Human Rights

Prior to beginning the study, approval was secured from the Institutional Review Board at Duquesne University (Appendix E). Informants were notified in writing of their rights in regards to the study and signed a consent form indicating their understanding of the study and willingness to participate. There were no risks associated with participation in the study. There were no personal benefits to participating in the study other than the

possibility of gaining a clearer understanding of their experience as a nursing faculty member. Informants did not receive any form of compensation and they did not incur any expenses while participating in the study. Informants were under no obligation to participate and were free to withdraw their consent to participate without penalty, for any reason, and at any time, including during the actual interview.

To maintain confidentiality of the informant's identity, a pseudonym was used on the demographic questionnaire and in the transcribed interview documents and possible identifiers were removed from the transcribed interview text. Signed consent forms were kept separately from the interview data and demographic questionnaires and in a secure location at the researcher's home. Only the researcher had access to the signed consent forms. Interviews were private sessions between the informant and researcher. Interviews were transcribed by a trained transcriptionist who had signed a confidentiality statement (Appendix F). All materials will be destroyed by the researcher when all activities related to the research are completed.

Procedure for Data Analysis

Due to the large volume of data generated through qualitative inquiry, it was necessary to identify techniques for managing the data. The audiotaped interviews and field notes were transcribed verbatim into digital form by a trained transcriptionist using word processing software. The digital text was formatted along the left portion of the paper and a 3-inch margin on the right. Line numbering was utilized and each informant's transcript was colored coded to facilitate analysis. This formatting facilitated

the identification of participant expressions and themes and aided in data analysis. The researcher compared all of the transcribed data with the audiotapes to ensure accuracy of the transcription.

Barritt, Beekman, Bleeker, & Mulderij (1984) described the process for data analysis in hermeneutic phenomenology that was used for this study. The process was congruent with the utilized methodology and was based on Dutch phenomenology of the Urecht School, which combines characteristics of descriptive and interpretive phenomenology (Cohen et al., 2000; Polit & Beck, 2004). The goal of the data analysis was to identify common themes and language that captures the theme. The following data analysis process was consistently utilized throughout the study to establish trustworthiness of the results.

1. The narrative was read and important elements or moments were identified by underlining or highlighting language used by the informant (Barritt et al., 1984). According to Cohen et al. (2000) analysis of qualitative data begins during the interview when the researcher actively listens and thinks about what is said. It continues as the analyst reads and re-reads the text, becoming immersed in the data for the purpose of initially interpreting the information.

2. Once the overall text was understood, thematic analysis followed and included a line-by-line examination of the data and underlining of the key phrases. These phrases are what seemed to be at the center of the event for the informant (Barritt et al., 1984). This step involved making decisions about what was relevant and what was not. Care was taken to avoid over-reduction and subsequent loss of the meaning of the entire encounter. Tentative theme names or labels were assigned to experiences. Exemplars were

identified, which are portions of textual data that captured the essential meaning of a particular theme (Cohen et al., 2000). Common themes were grouped and variations were identified.

3. Themes that emerged from the data were shared with the participants during the second interview for the purpose of clarification and validation (Barritt et al., 1984). Informants also were asked to share additional comments about their experiences and ask questions of the researcher. This step aided in enhancing trustworthiness of the data (Polit & Beck, 2004).

4. Elements of one narrative were compared with those of another narrative to identify shared and unique themes (Barritt et al., 1984). Once a narrative was analyzed, it was compared and contrasted with narratives of other study informants. The purpose of this step was to identify common themes, variations or unique themes, and statements across narratives that exemplify the theme.

5. Literature was explored for information about the experience and data was discussed discuss the data in relation to the published literature (Barritt et al., 1984).

Lastly, data from the demographic questionnaires was analyzed and yielded descriptive statistics about the sample of informants including personal demographics, educational background, employment status, and professional experience.

Trustworthiness

In a hermeneutic phenomenological approach, the intent is to describe and interpret a particular experience from the perspective of the informants rather than that of the researcher. To accomplish this goal and reduce bias, Cohen et al. (2000) stated the researcher must utilize critical reflection and open up the inquiry to others. Polit and

Beck (2004) stated that these methods add rigor and were part of establishing trustworthiness. Practices consistent with critical reflection, opening the inquiry, and establishing trustworthiness were utilized during the study.

Critical Reflection

For this study, critical reflection occurred through the use of a personal reflective journal and field notes (Cohen et al., 2000). Prior to beginning data collection, the researcher identified personal assumptions about the nursing faculty experience and documented them in an electronic journal. This is a form of bracketing. Cohen et al. defined bracketing as “a method for examining personal commitments and prejudices prior to beginning data collection” (p.38). The researcher also documented field notes as part of the interview process. These included written descriptions of nonverbal behaviors displayed by informants during the interview, characteristics of the environment noted during the face-to-face interview, the researcher’s assumptions, thoughts, prejudice and feelings about the interview, and the researcher’s responses to the interview.

Opening up the Inquiry

Opening up the inquiry demonstrates that the inquiry proceeded systematically and aids in reducing bias (Cohen et al., 2000). Several techniques for opening up the inquiry were utilized during the study. Three of the transcribed interview transcripts were reviewed by a experienced phenomenologist. Approximately two months after the initial interview the researcher returned to the informant during data analysis for confirmation and clarification of the interpretations and emerging themes. Cohen et al. (2000) referred to this practice as member checking. An audit trail was established in an electronic personal journal, as written notes documented on the actual transcripts, and through

several written drafts of the analysis. This allowed for tracing the interpretations back to the data and is a form of opening up the inquiry to reduce bias.

Credibility and Confirmability

Lincoln and Guba (1985) identified criteria for establishing trustworthiness including credibility and confirmability. Credibility is the truth of the data and subsequent interpretation whereas confirmability is the objectivity of the data (Lincoln & Guba, 1985). Techniques used to establish credibility of the current study included data triangulation, peer debriefing, and member checking. Data triangulation included the use of multiple data sources to reach conclusions (Polit & Beck, 2004). In addition to data collected during the personal interviews, field notes, as written by the researcher, served as another layer of data for the study. As mentioned previously, the text from three transcribed interviews was reviewed by and discussed with an experienced phenomenologist. Interview techniques used by the researcher also were reviewed by the phenomenologist. While these practices are consistent with opening up the inquiry (Cohen et al., 2000), they are also referred to as peer debriefing. This is when peers review aspects of the inquiry (Polit & Beck, 2004).

Additional approaches to establishing credibility included selecting only informants that met the inclusion criteria to ensure they have experiences that are of interest for the study, collecting data through personal in-depth interviews, and using non-leading questions during the interviews to facilitate the expression of rich data by the informant. Audio-taping the interviews, using one interviewer to collect the data and one trained transcriptionist for transcribing the audiotapes, and comparing transcribed data with the audio tapes to ensure accuracy also aided in establishing credibility.

Lastly, objectivity was established through several techniques. Bracketing, maintaining a reflective journal, and establishing an audit trail were utilized to establish confirmability and were discussed in conjunction with critical reflection and opening the inquiry.

Summary

The purpose of the study was to understand the lived experience of being a full-time nursing faculty member in a baccalaureate level nursing education program. Therefore, a hermeneutic phenomenological approach consisting of descriptive and interpretive phenomenology was used for the study. Through purposive and snowball sampling techniques, the researcher established in-depth relationships with faculty members in order to understand their experiences as full-time nursing faculty in baccalaureate level nursing education programs. Data were collected through in-depth personal, face-to-face interviews and follow-up phone interviews, which were audio taped and transcribed, and then analyzed in a manner consistent with the Utrecht school of phenomenology (Barritt et al., 1984). Field notes, as written by the researcher, served as another layer of data for the study. Throughout the study, the researcher utilized critical reflection and opening up of the inquiry to minimize bias and established trustworthiness through confirmability and credibility.

CHAPTER IV

FINDINGS

This chapter includes a description of the sample of full-time nursing faculty members who served as informants for the study. Descriptive statistics about the sample were calculated using data provided by informants on the demographic questionnaire. The chapter also includes the thematic findings, which were identified through the analysis of transcribed data and field notes collected during personal interviews.

Description of Sample

Eight informants who were full-time nursing faculty members met the inclusion criteria and participated in the study. The following is a summary of the sample's characteristics as reported by each informant on the demographic questionnaire. Pseudonyms selected by the researcher are used to protect the identity of informants. Throughout the text, informants are referred to as Maxine, Gretchen, Eden, Libby, Jane, Louise, Jen, and Victoria.

Table 1 reflects the characteristics of the sample of informants who participated in the study. All of the informants in the study were female. The age of a majority (n=5) of the informants was between 41 and 60 years of age. All of the informants had completed advanced nursing education programs and earned both Bachelor of Science in Nursing (BSN) and Master of Science in Nursing (MSN) credentials. Victoria, Eden, Louise, and Jen cited nursing education as the focus of their Master of Science degree in nursing. Eden was the only informant who had earned a Doctor of Philosophy (PhD) in nursing as a terminal degree. One informant had completed all coursework required for a

Table 1

Characteristics of Sample (N=8)

Characteristic	N	%
Age		
31-35	1	12.5
36-40	2	25.0
41-45	4	50.0
46-50	0	0.0
51-60	1	12.5
Highest earned degree		
MSN	7	87.5
PhD	1	12.5
Faculty appointment		
Tenure track	5	62.5
Non-tenure track	3	37.5
Academic rank		
Senior lecturer	1	12.5
Instructor	3	37.5
Assistant professor	2	25.0
Associate professor	2	25.0
Professor	0	0.0
BSN teaching assignment		
51-75% of workload	1	12.5
76-100% of workload	7	87.5

PhD in nursing with the exception of dissertation credits. She stated she did not plan to complete the dissertation portion of the degree requirements. Six of the informants indicated they currently were doctoral students. Five were enrolled in PhD programs in nursing and one in an adult education leadership program.

In addition to advanced education, four of the informants had earned professional certification in a clinical specialty area including critical care nursing, emergency room nursing, or pediatric nursing. Collectively, the informants worked in clinical nursing positions an average of 13.4 years before securing appointments as full-time nursing faculty.

At the time of the initial interview, Jen, Eden, Maxine, Gretchen, and Victoria were employed in tenure track nursing faculty positions. In terms of academic rank, Victoria, Louise, and Jen were instructors, Libby and Maxine were assistant professors, Eden and Gretchen were associate professors, and Jane was a senior lecturer. None of the informants were a full professor.

The informant's length of experience in a full-time nursing faculty position ranged from 2 to 16 years with a mean of 6.1 years. When including part-time faculty work experience, the mean increased to 7.8 years. Gretchen, Eden, Louise, and Jen had worked as part-time or adjunct faculty prior to becoming full-time nursing faculty. When considering all of the informants, their length of employment in a full-time nursing faculty position at their current institution ranged from 1-12 years with a mean of 4.8 years.

All of informants taught nursing theory and clinical courses to students enrolled in entry-level baccalaureate level nursing programs. A majority (n=7) of informants completed 76-100% of their workload assignment in a baccalaureate nursing program. The remaining informant completed 51-75% of her workload at the BSN level and also provided instruction to students in the associate degree nursing program. This informant worked at an institution where both associate degree and baccalaureate degree nursing programs were offered.

Thematic Findings

In addition to the data reported on the demographic questionnaire, data for the study included the transcribed text from eight initial face-to-face personal interviews that lasted 60-70 minutes, eight follow up telephone interviews that lasted 15-45 minutes, and the researcher's field notes. Data collected during an interview were compared with those of the other interviews in the current study to identify commonalities and differences. Data collection continued until redundancy, or the repetition of main points, was noted. Identified themes were discussed with informants during a second interview for the purpose of verification and clarification and to confirm saturation of data.

A five-step process for data analysis identified by Barritt, Beekman, Bleeker, and Mulderij (1984) was utilized for data analysis. The steps consisted of the following: 1) reading the narrative and identifying important elements, 2) assigning tentative theme names, 3) sharing tentative themes with informants for the purpose of clarification and validation, 4) comparing narratives of all informants to identify commonalities and unique themes or variations, and 5) exploring the literature for information about the experience of interest.

Following each interview, the researcher listened to each audio-taped interview a minimum of two times. Once an interview was transcribed, the researcher compared the audio-tape with the verbatim text to ensure accuracy. Field notes were incorporated into the transcribed text and served as an additional layer of data. The transcribed text of each informant's interview was color coded using word processing capabilities. The full text was again read by the researcher who underlined or highlighted important elements. Similar elements were grouped and tentative theme names were assigned. As tentative themes were identified, the researcher began to conduct second interviews with each informant to clarify portions of the data, verify accuracy of the researcher's interpretations and emergent themes, and provide them with an opportunity to share additional information.

Next, the narratives from all of the interviews were compared and similar texts were grouped together. As groups containing similar elements were formed, the color coding system allowed the researcher to determine the number of informants who had expressed similar comments. This prevented the researcher from identifying a theme from repeated comments made by one informant. Variations were labeled and grouped with the appropriate text.

As data analysis progressed, like themes were combined resulting in an overarching theme. Table 2 includes the five themes identified through data analysis.

Table 2

Identified Themes

Theme 1: Making a Difference in the Student, Profession, and the World

Theme 2: Being a Gatekeeper to the Profession

Theme 3: Trying Ways to Balance Multiple Roles

Theme 4: Support is Vital: Can't Do It Alone

Theme 5: Workplace Relationships: The Good, the Bad, and the Ugly

Descriptions and Interpretations

In this section, each theme is presented. Exemplars and variations in the forms of direct quotations and summarized text are used to illustrate the data. Field notes, which were incorporated into the transcribed text, provided additional details about the behaviors of the informant during the interview. For interviews conducted in the informant's office, notations about the environment also were made by the researcher. Demographic data reported by informants on the demographic questionnaire are included in the following descriptions and interpretations. As mentioned earlier, pseudonyms were used to protect the identity of informants.

Theme 1: Making a Difference in the Student, Profession, and the World

According to all of the informants, being a nursing faculty member meant making a difference in the student, profession, and the world. Making a difference was the

rewarding aspect of their work. Informant experiences ranged from making a difference in one student through a successful teacher-student interaction to impacting large numbers of people through their role in preparing nurses who entered the workforce and provided care to others.

As Libby, Eden, and Jane spoke about making a difference they all used the phrase “the lights go on” to describe what they observed when they made a difference in a student during a successful student-teacher interaction. Witnessing a change in the student’s performance as a result of this interaction validated the informant’s performance as a teacher. Eden, who had 12 years of experience as a nursing faculty member, illustrated this best when she said, “Seeing the lights go on...tells me I’m doing something right...It builds my confidence.” Jane, who displayed enthusiasm about her faculty experience as evidenced through her animated movements throughout the interview, also spoke about seeing the light bulb turn on. She said, “Seeing the rewards gives you a sense of pride and is a reminder that I can make a difference.”

As the informants experienced feelings of making a difference, they felt the rewards of their work. Louise, Libby, Gretchen, Maxine, and Victoria addressed the rewarding aspects of the faculty role at the start of the interview. Victoria, a relatively new nursing faculty member with two years of experience in the role stated, “There’s just nothing greater than to hear that you’ve made a difference in somebody’s education.”

Four of the informants discussed how seeing their students at graduation, witnessing a former student practicing as a professional nurse, or learning that a graduate was successful on the licensure examination also were rewards associated with making a difference in the student. Eden described the feeling associated with making a difference

as a “maternal thing” and said that when she reflected on milestones such as graduation and successful passing of the licensure examination and came to realize the growth experienced by the student, she knew she “was part of the chained link that got them there.” Gretchen said this as she smiled, “Just knowing that I have a part in getting a registered nurse out there in the work force has been a great experience for me.” Gretchen often worked with international students who spoke English as a second language. She explained how her work as nursing faculty assisted students in transitioning to a different lifestyle. She said, “My [faculty] position took students out of a position [lifestyle] that they may not have gotten out of and that’s rewarding.”

Making a difference in the student surfaced repeatedly during Libby’s discussion of the faculty experience. During the discussion she focused on making a difference in her student’s professional and personal life. Libby had worked as a full-time nursing faculty member for the past 16 years. Several times during the interview she pointed to photographs of current and former students that decorated her office desk. She told detailed stories of each student’s successes while they were enrolled in school and in their personal and professional lives following graduation. After sharing these stories, Libby said this about the rewards of teaching, “When you reach for the star...this is my star.” For nearly 20 minutes at the conclusion of the interview, Libby proceeded to share additional stories about current and former students including details of their personal and professional accomplishments.

As their students achieved success in the classroom, graduated, and entered the profession, nursing faculty members continued to feel they were making a difference because they believed their former students touched an infinite number of people in the

world. Louise, an instructor with a total of six years experience in the faculty role best illustrated this:

As a nurse you can only touch a finite number of patients. But when you have students that you can really impact and they go out and they each touch so many people in their careers; it's really rewarding to influence the care that is given to so many people....It's the ripple effect.

While all the informants spoke about making a difference as the reward associated with their work as nursing faculty, Jen and Libby underscored the importance of actually experiencing such rewards. Jen had been in a full-time nursing faculty position for two years. She said, "If you're seeing some good come out of it, I think that's a motivator to keep you in." She questioned the amount of good that was coming from her teacher-student interactions. She defined "good" as seeing her students display a positive change in behavior and do a good job. She indicated she was not seeing enough rewards in her faculty position and as a result, may leave her current position and return to clinical nursing. She concluded by saying that seeing more examples of how she made a difference would help her experience what she felt was good about being nursing faculty.

Conversely, Libby, the most senior of the informants who also had the most years of experience in the faculty role, described how experiencing the rewards associated with making a difference had impacted her decision to remain in a faculty position. She said, "I have my days when I'm ready to say I've had enough and put my feet up...but over all I think the best thing about it is when you see the light go on. When the kids [students] go 'oh yea I got it.'"

In summary, the informants felt their work made a difference in the student, profession, and the world. Making a difference was the rewarding aspect of the nursing faculty experience. All of the informants spoke to some extent about the rewards of teaching and five of them addressed this topic first when asked about the experience of being faculty. The rewards experienced by the informants were the result of making a difference as evidenced by seeing changes in the student that resulted from learning.

Theme 2: Being a Gatekeeper to the Profession

All informants discussed the responsibility associated with preparing nursing students to enter the nursing profession. They discussed a range of approaches they utilized to ensure that only safe, qualified students progressed in the nursing education program and entered the profession.

According to Maxine, being a nursing faculty member who educated entry-level nurses in a baccalaureate level nursing program meant she had a responsibility to prepare students for various aspects of the nursing role. She stated:

“I feel a tremendous responsibility...I want to make sure that I’m preparing the students to be clinicians. Not just from a technical standpoint but from the human side...[To be] caring, nurturing, to view people as people regardless of what they look like, how old they are. So, I guess it’s extremely important.

Aside from feeling they were responsible for adequately preparing future nurses, study informants recognized the magnitude of the responsibility. This was best exemplified by Victoria, a nursing faculty member who just concluded her second year of employment in a full-time faculty position. She equated the responsibility with that of being a gatekeeper. She stated:

We [nursing faculty] are the gatekeepers... We are the people who have control over who enters the profession.... We have the burden and the privilege of being certain that the people that graduate from our program are not only good representatives of our program but that they're safe and going to make an impact, a positive impact, on patients.

Jane offered a different interpretation of the important responsibility she had as a nursing faculty member. She spoke about students caring for her and her family as a way of conveying her feelings about the importance of preparing qualified nurses. She told her students, "When you leave my class, when you leave my clinical, I know that if you show up at my stretcher or my kid's stretcher or my mom's bed or where ever, I'm going to say, 'Oh thank God it's you.'"

Because of the level of responsibility associated with being nursing faculty, all of the informants felt they had high standards and expectations in regards to student performance. They were responsible for adequately preparing students for the nursing role. Libby stated, "I insist they know." Jane was adamant when she stated, "We have pretty high standards and I hold them to those standards." When asked how she developed such performance standards she replied, "It relates back to values of the profession." She also said that passing on a student who is not safe "would be ethically wrong." Libby, Eden, Louise, and Maxine said their high standards expectations regarding student performance were based on the importance of meeting licensure requirements in order to practice nursing. In order for a student to enter the profession, the informants had to adequately prepare students so they would be successful on the licensure examination.

Since they had high standards and expectations, Libby, Eden, and Jane felt they were viewed by students as being “tough teachers”. Even though failing a student was time-intensive and difficult, they had to fail students who did not meet their performance expectations. Eden stated, “My reputation is ‘she’s tough but you’ll learn’”. She continued by saying, “It is difficult to fail a student...and it’s not for wimps.” Jane added, “It takes time to fail a student... but if they’re not safe, they’re not going on.”

Libby indicated that she was responsible for ensuring that students were safe practitioners the entire time they were enrolled in a nursing education program. She shared an experience involving a student who was nearing graduation. She stated, “[I had to] fail a senior because he was dangerous.” She explained how the student’s spouse threatened legal action on the grounds of discrimination because a male student received a failing grade in a senior level nursing course that Libby taught. While her story included details of the time-intensive and stressful nature of the situation, she insisted the student was unsafe and she was willing to engage in a legal battle if one surfaced. Jen also felt strongly that principles should not be compromised when educating future nurses. “You have your principles and I’m not compromising them,” she said.

While all of the informants in the study spoke of maintaining high performance standards for students, two of them shared experiences where other members of their nursing department failed to do so. One informant stated:

We would just say well we are going to overlook our standards for this and we would pass them and I felt that was really demeaning to the faculty member who made the class vigorous. I thought that it really invalidated her as a professor.

Jane also encountered a colleague who she thought allowed an unqualified student to progress in the program. She shared how she managed this situation: "I know one person who doesn't like getting involved in that....So I do a lot of 'thinning of the herd'....This last time I told her I was not doing her dirty work any more." Jane is the same faculty member who would be thankful to see her students show up to care for her family members because she made certain they had the necessary skills to provide safe nursing care.

In some cases, maintaining high standards of performance resulted in threats to the personal safety of the informants. Two informants shared stories about dealing with students who displayed aggressive behaviors as a result of being told they were not meeting performance expectations. One informant explained that on a day off from work, she received a telephone call from an administrator at her college warning her of a potentially dangerous situation involving the student. She explained:

I got a phone call from my [administrator] that said, 'Where are you? Look in front of your house is there any body there? Get away from your windows.

Where are your children?'...This is a guy with a violent history....I was scared. I was really angry that I was at home on a cold February day not walking in front of windows. Called my kids elementary school and my daughter's preschool and said 'look no one is to come and ask questions about my kids.'

The informant continued to explain how the danger associated with the situation caused her to re-evaluate being in a faculty position. However, she said her love of teaching prevented her from leaving the job.

Remaining on the job was not an option for another informant who had a similar experience involving a student who failed to perform at the expected level. Because the informant perceived personal danger, she vacated her faculty position and relocated to another nursing education program. She explained:

There was a student who was unhappy with his grade...Three faculty members were in the office on the floor with the lights out waiting for security to arrive because this student was coming with a gun...I thought I am getting out of here....This is crazy because you certainly don't need to take the risk of putting your life in jeopardy. So that was pretty much the deciding factor why I was leaving that institution after a year.

In addition to encountering students who did not meet performance requirements, three informants discussed characteristics of the population of students they had to prepare for the nursing role. Louise, who taught fundamental level nursing courses, described the nursing student population at the institution where she worked. She stated:

[The students are] typically very needy, very anxious...We have mixed accelerated and traditional students within the same class. So from a demographic point of view there's just a tremendously diverse population.... So the dynamics can really be interesting....It really requires flexibility and creativity in planning content and certainly in navigating through some of their experiences.

Libby also spoke about attributes of the students she prepared to become nurses. During her career, she worked with students who had diagnoses of depression, personality disorders, and substance abuse. She also felt that some students lacked basic skills on admission into the nursing program. She mentioned a particular deficiency and

how she helped her students develop the skills needed for success in the nursing education program. She commented:

These kids can't write. They are not prepared for college coming out of high school....I lost track of the amount of hours that I have spent correcting and re-correcting these proposals that they send to me and I send back and they send and I send back.

While Libby addressed academic needs of the students she prepared for the professional nursing role, two other informants shared experiences of working with students who they thought failed to demonstrate professional behavior they expected of future nurses. Jen shared a summary of her experiences in communicating with students and when students interact with staff at the clinical sites. She commented:

Their [students] definition of professional and mine...is very different....They're demanding of the staff. They forget we [faculty and students] are guests in the institution...You wind up putting fires out between students and staff....They think they wrote the most professional e-mail of their life...to nursing, it's [the content of their e-mail communications] offensive, demanding, and demeaning and they don't see that.

Regardless of characteristics of the student population they taught, all of the informants in the study spoke of providing support to students in order to help them meet performance standards they had established. Jane, Libby, Jen, Maxine, and Gretchen addressed how they were accessible and available to students needing assistance. However, their approaches to providing support varied and often extended beyond the classroom. For example, Gretchen stated, "They [students] have 24-hour access to me

via the Internet,” She explained that students frequently e-mailed her to seek clarification of nursing content addressed in class. Sometimes, Gretchen got messages from students enrolled in another faculty member’s class. Gretchen stated she did not mind getting messages from these students and she was willing to serve as a resource for them.

While Gretchen and Libby utilized e-mail as a route for providing additional support needed by their students, one informant addressed the challenge of utilizing the approach. She stated, “You are accountable 24 hours-a-day, 7 days-a-week because of e-mail....The time I spent with e-mail on Blackboard is voluminous.” Jen was relatively new to the faculty experience and stated that when she accepted the faculty position, she did not expect to be available to students outside of class or during the summer months.

Another approach used to provide support to students involved tutoring. Gretchen, Maxine, Libby, and Jane all mentioned working with students on a one-to-one basis in the form of tutoring. Jane said the purpose of the tutoring sessions was to “get them to focus in on the area that they’re having a hard time with.” Libby tutored a student following graduation and explained, “She didn’t pass boards the first time so I tutored her to try to get her through the second time....Which she did.”

Lastly, three informants also mentioned that students could access them for support by visiting their campus office. Libby stated, “They know I have office hours but I usually tell them if my door’s open, come on in.” Actually, at the time Libby was scheduled to meet with the researcher for the interview, she was in her office with a student and the door was closed. A staff member in the nursing department approached the researcher and suggested that the researcher knock on Libby’s office door because at times Libby got involved with students and was with them for a long time.

One informant also spoke about assisting students during office hours but said that when students visited her outside of scheduled office hours it impacted her ability to complete her work. She was the only informant to express difficulties in providing support to students outside her traditional work hours. She stated:

When you have your office time...you're assuming people are going to come and visit you....That's what you have that time for....But after that and through lunch I mean if you don't have your door closed, it's just like a constant flow of traffic....And you have accomplished nothing and you go home and you have to do your work at home....We started closing our doors and taking...ten minutes to eat your lunch in peace instead of someone trying to talk to you...while you have your sandwich in your mouth.

In summary, this theme captured the informant's interpretation of the responsibility associated with being a nursing faculty member. They felt they were responsible for preparing safe practitioners who were qualified to enter the profession of nursing. Because of this responsibility, the informants had high standards and expectations in regards to student performance. They taught a population of students who had diverse needs and assisted them in meeting performance standards. The type of assistance provided included being accessible and available through e-mail, office hours, and one-to-one tutoring sessions.

Theme 3: Trying Ways to Balance Multiple Roles

All informants in the study discussed the various roles associated with being nursing faculty. Their work as faculty included both required and elective work activities.

Throughout their careers, they tried various ways to balance all the role requirements associated with their work and between their work and personal lives.

Because of the multiple roles associated with their work, all of the informants interpreted their work life as being busy, time-intensive, work-intensive, or overwhelming. Louise felt the workload was heavy and when asked to describe a typical work day stated, “There is no typical day...There’s just no typical day,” She felt the workload in nursing was different than other disciplines such as the liberal arts college at her institution. She stated, “We have the clinical aspect of nursing education that really changes the workload.” Louise was an instructor who accepted a faculty appointment after working in a clinical nursing position for ten years. She said that because workload associated with teaching a clinical course required her to be off campus she and other nursing faculty were automatically excluded from college wide activities.

The experience of having a heavy workload was addressed by Maxine, a nursing faculty member with two years of experience in the role. She stated, “There just never seems to be enough hours in the day to get done what you need to do.” At several points during the interview, she referred to components of her role as “just one more thing” that she had to do as part of her work. She used the same statement when talking about being a doctoral student. She said that previously, she did not aspire to earn a doctoral degree but was now doing so to meet requirements for her faculty position.

The difficulties associated with having a heavy workload were addressed by Libby, Jen, and Victoria. Jen’s comments best exemplified her interpretations about faculty workload:

The faculty is to the point where they're so exhausted...They're just surviving the day. I don't think there's any more to give. You cannot wear all the hats. You can't be the disciplinarian, the master planner, the educator....I think they just want educators to wear too many hats. There's not time.

While talking about the workload, the informants discussed multiple roles they had as part of the nursing faculty experience. All spoke about working with students as part of their teaching role. Seven of the informants spoke about participating in committee work as a role required by their institution. Six of these informants stated that committee participation was driven by performance evaluations and tenure and promotion guidelines. Maxine contrasted committee work and the work she did with students. She stated, "Committee work is my least favorite part [of the faculty position]....Just one more thing you have to do....Sometimes you feel like you're spinning your wheels....You really don't see a positive effect from your efforts, like you do with your students." Jen echoed this by saying, "To be on fifty committees meant really nothing to me." While she was not really on fifty committees, she indicated that committee work was not something of interest to her. She spoke negatively about the process for being selected for a committee, saying the nursing department chair had to negotiate with other faculty in order to get a new faculty member on a particular committee. She said the process was ridiculous and that faculty had to bribe others to get votes in order to be elected to a committee.

Of those who mentioned committee work as part of the faculty experience, all but one described the work as a service role. Jane stated she did not consider committee work to be service. Instead, she felt that committee work was "something that is part of the

faculty job.” It was not something a faculty member engaged in as a service endeavor. When asked to provide an example of something she defined as a service activity, she stated, “doing a health fair, or helping the cub scouts earn a health badge.” She was the only informant who addressed participating in community-based service as part of the faculty role.

Another role mentioned by informants involved participation in scholarship. Gretchen, Maxine, and Eden spoke about participating in scholarship activities as a requirement of their faculty position. At the time of the interview, Gretchen was involved in an extensive grant program dealing with student recruitment and retention. She also said that being a doctoral student fulfilled scholarship requirements of the institution where she worked. Eden spoke about collaborating with local school districts and hospital personnel on various research projects. Maxine said she recently had completed her first professional presentation as a way of fulfilling institutional requirements relating to scholarship.

Jane, who was in a non-tenure track position, also mentioned scholarship. However, she discussed it from a perspective that was different than the other informants who spoke on this topic. She did not talk about engaging in scholarly work. Instead she discussed how she would be required to perform in the scholar role if she moved into a tenure track position. Because of this, she questioned whether moving to a tenure track position was of interest to her. Jane stated:

I don't know if I want to be a big [academic]....If I'm going to do the tenure track thing then I'm going to have to support my salary. In order to get tenure you have to be supporting half of your salary with grant monies, which is something

new that we started [at our institution]. By your third year in tenure track, I think it's half of indirects you have to cover for your salary. I don't know that that's a competitive world that I want get into because then the people who are doing that are so focused on I need to write this grant, I need meet this deadline...that their teaching suffers.

Aside from teaching, committee work, and scholarship activities, five of the informants said they maintained clinical practice in order to keep their nursing skills current. None of the informants spoke of this as a requirement associated with their faculty position. Those who worked clinical positions did so during evening hours, weekend days, or throughout the summer months. Jane, a nursing faculty member with 12 years experience in the faculty role, currently worked one day each week as a staff nurse in the emergency room. She provided additional insight into why she maintained clinical practice. She said:

I look at some of our faculty who haven't been in the hospital in years other than those couple hours a week they go with the students. The students don't respect them. Health care changes so much that if you're not in the hospital for a year, you're behind.

One informant who chose to maintain clinical practice in addition to her faculty position said that her colleagues were not in favor of her choice. They were concerned that clinical practice would be a role required of all nursing faculty at the institution. The informant stated:

It [her participation in clinical practice] was not well received [by other faculty or the administrator who evaluated her performance.]. In fact, it was reflected in my

evaluation that perhaps I should focus less on being a staff nurse and more on being an educator....People [faculty] make comments to me that you're setting a standard that we're all going to have to do.

In addition to the number of roles they had, all of the informants mentioned the various ways they had tried to balance their role responsibilities. None spoke of having balance at work, or between their work and personal lives. Five informants mentioned their personal lives, specifically their children, while discussing their search for balance. Jane explained how she was not willing to let her heavy workload at work impact her children. She stated, "I'm not willing to do this for 80 hours a week because I have small children who need a mom." She questioned how she could manage teaching in the classroom, working clinical nursing, and doing research. She concluded with, "I really need to find a balance."

Jen shared an approach she tried as part of her search for balance. "My daughter plays softball so I'm trying to grade papers while I'm watching her play...at least you're there watching." Having flexibility to complete work in locations outside the workplace was viewed as a positive attribute of the faculty position by Maxine, Jane, and Libby. "I do a lot more work at home and so to me, that's beneficial," said Maxine. She compared the flexibility of a faculty position with that of her former clinical administrative position and felt working at home allowed her to spend more time with her children. Her previous clinical administrative position required her to be at the hospital and away from her children for extended hours each week.

While Maxine, Eden, and Jane appreciated the flexibility associated with completing their work, one informant felt it was unfair to her family to do work at home.

She felt a faculty member's work responsibilities should be completed during scheduled work hours rather than taken home.

Eden shared a comprehensive approach that she used to try and balance her work roles and her work and family roles. She utilized tenure and promotion requirements as guidelines when selecting committee assignments, service activities, and research projects to complete. Then, she selected consultant projects, committee work, and research studies that were consistent with her family and work life and that were of interest to her. She said,

You kinda have to develop a selfish thing too. It's what the department needs, but it's also what'll enhance your own career growth and advance your personal interests. Because ultimately that's what's gonna make you happy....Try hard not to bite off more than I can chew cause I know that will lead to frustration...Given my life situation right now I had to look for the balance....So obviously being involved in schools is great. My kids are in schools and I'm there anyway and that helps and being involved in the hospital were I'm teaching clinical anyway. There is a nice reciprocal where you can give and take.

According to the informants, being nursing faculty involved participating in multiple roles including teacher, service provider, scholar, and clinician. They elected to participate in some of the roles and were mandated by their employer to participate in others. Because of their multiple role requirements, they felt their workload was heavy and they engaged in an ongoing process of trying to find ways to balance their work roles and their work and personal roles.

Theme 4: Support is Vital: Can't Do It Alone

All of the informants in the study needed support in order to perform in the faculty role. It simply was not possible for them to do the job alone. The level and quality of support they felt they needed and what they actually received varied greatly among the informants.

Jen spoke about needing support as a new faculty member at her current place of employment where she had worked as a full-time nursing faculty member for the past academic year. She had been an adjunct faculty member for five years prior to securing a full-time position. During the discussion, she repeatedly mentioned the perceived lack of support she experienced during her first year as a full-time faculty member:

Support is vital and it wasn't there....When you're the one dying, drowning...and they don't even see your head above the surface of the water...what good is that?...They talk about mentorship and we throw that word out and some people don't relate to it...There's gotta be support...there's got to be.

Libby, who over the course of her faculty career had worked with faculty at two different educational institutions, had a completely different perspective. She commented, "We are very close, very supportive of each other." Libby felt supported since her first day of work at the current institution where she was employed. Jane also spoke highly of the faculty and extended her comments to include an administrator with whom she worked. She said collectively, the faculty and administrator were a supportive group and they were always willing to help her. When asked how she felt about being supported by colleagues and administrators in this manner she smilingly said, "It's awesome!"

Victoria, Gretchen, Jen, Eden, and Louise referred to colleagues who offered support to them as *mentors*. Three of these informants said their mentor helped them learn how to perform the basic functions associated with the faculty role. For example, Louise felt supported by a mentor who addressed her questions about the process for scoring student exams and entering grades. Eden was the only faculty member who addressed how her mentor assisted with her growth in the faculty role including the pursuit of scholarly endeavors. “My mentor would say, ‘then make that work for you. Write a small article about using that strategy. Use it as a poster presentation.’” Eden was PhD-prepared and had been in a full-time faculty position for eight years at one institution.

Four informants stated they had to locate their own sources of support to assist them with routine secretarial tasks and basic functions of their work. Louise, who had worked at the same institution for the past two years stated, “There was always help available, you just had to ask.” While informants reported seeking out support, two informants felt they did not have access to qualified personnel who could provide the support, or did not know how to access available support services. This was exemplified in a statement by Jen who mentioned. “[They need to] hire in more support staff...so we don’t have to run our own copies. I mean that takes time....That’s crazy for a faculty member to be stapling hundreds of exams....It’s just insane.” Jen recently decided to copy her own examinations. Previously, she asked a secretary to copy the examination and a serious error was made during the copying process. As a result, Jen had to recopy the examinations and ultimately decided that doing her own copying would ensure work quality.

Eden said when she was a new faculty member at her current place of employment, she completed her own secretarial duties such as copying and typing. This was because she was not aware of the support services available to her. By asking questions of the department chairperson she learned the types of support available to faculty and how to utilize the services to reduce workload. She concluded that using these services required a faculty member to plan ahead.

Three informants felt it was not only important to receive support, but also to provide support to others. Jen and Victoria, both with two years of experience in the faculty role, spoke about their experiences in being a mentor to others such as a new faculty member, or a graduate student who was preparing for the faculty role. Louise, who had six years of experience as nursing faculty, stated she “loved” being a mentor to graduate students although it did increase her workload. Eden, whose mentor helped her focus on professional growth through scholarship, had this to say about being a mentor:

I think you always have [need] a mentor. I think you never out grow a mentor. I think we can always grow whether it's in your teaching, whether it's in your service or your scholarship area, there is always some to know. But then I think it's time to turn right around and be a mentor for someone else.

Three informants provided details of how their experiences with being mentored impacted how they mentored others. One informant shared how the new employee orientation presented to her by her mentor was, in her opinion, less than adequate. She felt her mentor did not provide her with enough details on how to perform tasks such as calculating grades. When she spoke with her mentor about her perceived inadequacies of the orientation program provided to her, her mentor stated,

Well that's how I had to [learn]....You should have been here when I was here....The first three years I had to learn everything on my own and I was made to look like a complete idiot because I didn't know the answer.

Because Jen had such a negative experience when she began her faculty position, she stated she was determined to be a better mentor to a new colleague. "Because my mentor had a bad experience doesn't mean that the next person should....I'm not gonna let her [the new colleague] have an awful time like I did. It shouldn't be that way."

This theme encompassed the informant's need to be supported in order to complete the duties associated with their work. While some informants expressed a need to be supported while learning the routine day-to-day tasks, others felt support was important as they pursued scholarly endeavors. Variation also existed in the amount of support the informants received. Some informants felt they readily received the support they needed. Other informants felt that support was available but they had to seek it out. Lastly, some described a perceived a lack of support from colleagues and support staff within the nursing program.

Theme 5: Workplace Relationships: The Good, the Bad, and the Ugly

All of the informants discussed the interpersonal relationships they had encountered with faculty and administrators with whom they worked in the same nursing education program. The relationships they experienced ranged from positive and supportive to negative and detrimental, with a majority being the later.

Two informants spoke positively of relationships they had with fellow faculty at their current place of employment. Libby, who had previously experienced and witnessed interpersonal conflicts involving faculty at another institution, said her current

colleagues were “the best faculty ever.” She attributed this to their close working relationship and related this to the fact that the faculty group was small in number. Libby said the faculty members at her institution “stick together” in situations involving students. She felt that their positive relationships were apparent as they completed committee work and other group projects. When speaking of the entire nursing department, Libby said, “We are like a family. When I had [surgery] they came to see me and sent flowers.”

Jane’s experiences in relating to her co-workers were similar to Libby’s and extended to the administrator of her department. With excitement Jane shared how the administrator of the nursing program planned to attend her doctoral graduation ceremony. She described this as “really neat” and something she never expected the dean would be interested in doing. She continued by saying the dean and the other members of the nursing faculty had told her, “You are the future of the school” as they encouraged her to pursue a doctoral degree.

While two of the informants spoke of positive interpersonal relationships in the workplace, six had personally experienced interpersonal conflicts in the workplace or witnessed discord between other faculty members. The conflicts included name calling, belittling, being disrespectful, or arguing. Two informants stated they left previous faculty positions because of the interpersonal conflicts among faculty. For example, one informant said she had experienced interpersonal conflicts with colleagues while working at a program where she previously attended courses as a student. She said this of her experience:

I decided to leave...I felt that I was not going to be able to get the respect.... I was always going to be “kido” and “honey” and they would call me “little girl” some times. I thought about writing an article about “Do aging faculty eat their young?” but I thought I’d have to write it under a pseudonym, otherwise I would be unemployable....The culture has to be open to see the next generation come through.

Jen, Gretchen, and Victoria shared experiences where there was conflict between new and senior faculty. Gretchen stated that at her institution, senior faculty would “not be there to support them in any way until they did something wrong and then...they were all over it. But at that point, that’s too late because you’re really turning that person off to the job.” Eden, who had worked at the same institution for her entire nursing faculty career, shared how she felt there was a lot of pull to belong to a certain group. “We need you to do this...We need you to do that...Don’t be with that group...or don’t get sucked into that.” She tried to manage this by being a good listener and not jumping in with strong opinions during her first year of employment and laughingly said, “I probably goofed up a few times.”

Two informants shared conflicts they had with an administrator. About four or five weeks into her faculty appointment at a new institution, one informant was invited to lunch by a program administrator. As she told this story during the interview, she avoided eye contact with the researcher. She said this about the interaction with an administrator during the lunch appointment,

“I was ecstatic....I got all dressed up...The meeting started very nice over lunch and then I was asked [by the administrator], ‘How is it to have a job that you’re

not even qualified for?’...She [the administrator] made me cry to the point where we couldn’t even stay for dessert, so we eventually just got up and left....I think it hurt my feelings so much that after that I was really soured by the fact.

Louise and her faculty also had a conflict with an administrator regarding role expectations. She shared a situation where an administrator interacted with entire faculty about the focus of their work. She said, “Our dean said we are wonderful teachers...but the university level is not looking for wonderful teachers. They’re looking for wonderful scholars and researchers.” She admitted feeling disheartened by the words of her supervisor.

Aside from actually experiencing conflicts with faculty and administrators, two informants stated they had witnessed conflicts between colleagues. One informant shared an experience where faculty talked about and argued with each other during an interview with a potentially new faculty member. Witnessing this type of behavior was described by the informant as being “very uncomfortable.” She stated,

There was a lot of back stabbing, back fighting, who is getting tenure, who is not, what committee you’re on....Two people in the department that do not get along and the one in particular throws out zingers to the other one just kinda to get her goat.

While interpersonal conflicts were mentioned to some degree in a majority of the interviews, it was apparent that two informants did not expect to experience this type of behavior in an academic setting. Both used the term *utopia* to describe how they expected the setting to be. One stated, “I had envisioned a utopia...That people at the doctoral level would be so far beyond that...I’ve also found they are just as catty as in the

hospital. I was expecting more professionalism when I came into this college setting world.” When asked to expand upon the idea of *utopia*, another informant described an environment where scholarly exchange took place in the form of discussion. Her father had been a faculty member in higher education. She recalled that he frequently met and collaborated with colleagues as part of his work. These recollections, along with her observations of nursing faculty while an undergraduate and graduate student, helped form her ideas about interpersonal relationships in academia.

This theme included findings specific to the workplace interpersonal relationships encountered by the informants. There was variation in the informant’s experiences in relating to others in the workplace. A majority of the informants shared stories of negative interactions between faculty members or faculty members and administrators. However, two spoke about the positive relationships they had with colleagues. This range of variation in experiences was similar to that conveyed by informants on the support they received to perform in their role.

Summary

The purpose of this study was to understand the experience of being a full-time nursing faculty member in a baccalaureate nursing program. To aid in accomplishing this purpose, data were collected through personal interviews with eight informants. The data were analyzed using a five-step approach consistent with the methodology. Five themes were identified in the informants’ descriptions and interpretations of their experiences

The eight informants shared their experiences of being a full-time nursing faculty member in a baccalaureate level nursing education program. They felt that through their work as nursing faculty, they made a difference in their students, the profession, and the

world. They viewed this as the rewarding aspect of the faculty experience. As faculty, they were responsible for adequately preparing students to enter the profession and provide nursing care to others. Aside from educating students, they fulfilled several other work-related roles in the areas of service, scholarship, and clinical nursing. Because of their multiple roles, they interpreted their workload as being heavy. Throughout their careers they engaged in a process of trying out various ways to balance all of their roles at work, as well as between their work and non-work roles. Having support to perform the duties associated with their role was vital to them. However, the level and type of support they needed and actually received varied among the group. Variations also existed in terms of workplace relationships they experienced with fellow faculty and program administrators. These relationships were both positive and negative with a majority being the later.

CHAPTER V

DISCUSSION, SUMMARY, IMPLICATIONS, AND RECOMMENDATIONS

This chapter contains a discussion of the five major themes identified through a hermeneutic phenomenological inquiry into the experience of being a full-time nursing faculty member in a baccalaureate level nursing education program. Study findings are discussed in the context of the published literature. Also included are implications for theory and nursing science, nursing education practice, policies in higher education, and recommendations for future research.

Discussion

Sample

Characteristics of the sample of study informants contained some similarities to the general population of baccalaureate and higher degree nursing faculty as identified through a survey of National League for Nursing (NLN) member and non-member baccalaureate and higher degree, associate degree, and diploma nursing programs in the United States and its territories (NLN, 2003). Commonalities between the study sample and the general population of baccalaureate and higher degree nursing faculty included gender and age, but differences involved academic rank and highest degree earned.

The NLN (2003) reported that 95.8% of baccalaureate and higher degree faculty were females and 67.3% were between the ages of 45-60 years of age. This was similar to the sample of study informants who all were female (100%) and over one-half (62.5%) were between the ages of 41 and 60 years of age. The age bracket of 45-60 years of age

been reported in the literature as a factor contributing to the nursing faculty shortage because faculty in this age group will vacate their employment positions due to retirement (Berlin & Sechrist, 2002).

The study sample is not reflective of the NLN's findings regarding academic rank and highest degree earned. When compared with the general population of baccalaureate and higher degree nursing faculty, more informants held the academic rank of instructor (37.5%) and fewer (25%) were assistant professors. The NLN reported findings of 18.1% and 38.9% respectively. In addition, fewer study informants were doctorally prepared (12.5%) when compared with the NLN population (49.4%).

Several of the sample's characteristics are of concern when considering the advancement of nursing science. Study informants held lower academic ranks and had earned fewer doctoral degrees when compared with the BSN and higher degree faculty population surveyed by the NLN (2003). Six of the informants were currently enrolled in PhD programs. In addition, the informants had practiced clinical nursing an average of 13.4 years prior to entering a nursing faculty position. According to Anderson, (1998) the norm of encouraging nurses to participate in clinical practice in the years between completing academic degrees translates to less time for faculty to contribute to developing the scientific base of the advancement of nursing science

The literature reflected another trend that could impact the advancement of nursing science. During an interview with Rice (2004), Schuster stated the increasing number of faculty retirements across higher education is resulting in an increase in the number of tenure-ineligible full-time faculty. This change is economically driven and has the potential to prevent talented individuals from choosing faculty careers because of the

lack of job security. When considering Jane's comment about not being required to participate in scholarly endeavors while in a non-tenure track position, it became apparent that fewer tenure track faculty could decrease the number of nursing faculty engaging in research activities that advance nursing science.

In summary, characteristics of the sample were similar to those of the general population of baccalaureate and higher degree nursing faculty as reported by the NLN (2003). Loss of nursing faculty through retirement, encouraging clinical practice in years between academic degrees, and an increase in non-tenure track faculty appointments have the potential to impede the advancement of nursing science.

Discussion by Theme

Nursing faculty who served as informants in the study shared the lived experience of being full-time nursing faculty in a baccalaureate nursing education program. Five themes were identified in the data they provided through personal interviews. The following is a discussion of each theme in the context of the published literature.

Theme 1: Making a Difference in the Student, Profession, and the World

Study informants felt they made a difference in their students, the profession, and the world. Making a difference was identified as the rewarding aspect of teaching.

Making a difference in their students was an intangible reward of faculty work discussed by all study informants. While this intangible reward was an important part of the faculty experience, it is relatively absent from research published by the disciplines of nursing and education. Ward and Wolf-Wendel (2004) noted this gap in the literature and published one of the few studies on the topic. In a qualitative study of 29 female faculty members from various disciplines at nine different research universities, participants

reported being quite satisfied in the teaching profession. The rewards of seeing students learn and grow contributed to their satisfaction. This suggested that when faculty members experienced these rewards, which were the satisfying return on their work, they felt satisfied in their profession.

The idea of making an impact on the profession was reported in the literature as a factor that could attract a nurse to the faculty role (Seldomridge, 2004). Students' perceptions about the faculty role were identified through a qualitative analysis of journal entries written by 54 undergraduate nursing students who completed a faculty shadowing experience as part of a nursing leadership course. Results indicated that a desire to contribute to the nursing profession and an interest in sharing their love of learning were aspects of the faculty role that stimulated the students' interest in a career in teaching.

In a national study of nursing faculty satisfaction, 5,561 full-time nursing faculty who taught in licensed practical nursing, diploma, associate degree, bachelor degree, or graduate degree nursing programs participated in an online survey (DeBasio, Jensen, Kippenbrock, Montgomery et al., 2005). The purpose of the study was to identify individual, institutional, and leadership factors that affected work satisfaction and productivity of nursing faculty. Findings indicated that working with students was the main factor that influenced faculty members to take on or remain in their faculty positions.

Some very early research addressed intangible aspects of work and their impact on worker motivation and job attitude. Herzberg, Mausner, and Snyderman (1959) studied employees working in industrial plants within a 30-mile radius of Pittsburgh, Pennsylvania for the purpose of understanding motivation and job attitude. The

researchers concluded that intrinsic factors served as motivators and included what people actually do on the job, such as their achievements, the recognition they receive for doing their work, the responsibility they have at their jobs, and advancement at work. A major finding of the study was that motivators must be present in order for job satisfaction rates and motivation levels to increase, but their presence does not guarantee satisfaction and high motivation. Conversely, inadequate hygiene factors such as low salary, negative interpersonal relationships, and poor working conditions can lead to work dissatisfaction. However, the presence of adequate hygiene factors does not necessarily translate to higher levels of motivation. The theory that resulted from the study is referred to as Herzberg's motivation-hygiene theory, or two-factor theory.

Iiacqua, Schumacher, and Li (1995) tested the validity of Herzberg's theory within the context of higher education. Through an exploratory study of 137 faculty members employed at an independent private business college, the researchers reported that intrinsic factors were contributors to job satisfaction. Study findings were in support of Herzberg's two-factor theory. Data from the current study, in conjunction with Herzberg's theory, and the findings of Iiacqua et al., seem to indicate that experiencing intrinsic factors, such as making a difference, may serve to motivate faculty in their work and may also impact job satisfaction.

Since published information on the intangible rewards of teaching was sparse, it was important to explore the literature for the types of faculty rewards that received attention. The exploration uncovered literature on the tangible rewards of teaching, specifically salaries. However, such rewards were not discussed by informants in the current study.

Referring again to the national study of nursing faculty satisfaction, inadequate rewards such as low salaries negatively impacted the job satisfaction of nursing faculty (DeBasio, Jensen, Kippenbrock, Montgomery et al., 2005). The National League for Nursing (NLN, 2003) and the American Association of Colleges of Nursing (AACN, 2003b) identified salary as an issue contributing to the nursing faculty shortage. As part of the faculty census report, the NLN (2003) reported that 10.2% of nursing faculty in baccalaureate and higher degree programs who vacated their faculty positions did so because of salary issues. The AACN (2003b) cited low salaries as a factor contributing to the nursing faculty shortage. Salary also surfaced as a factor impacting the recruitment of nurses to faculty positions. In a qualitative study of 288 graduate prepared nurses, increasing salary was identified as a strategy for attracting nurses to faculty positions (Brendtro & Hegge, 2000).

Informants in the study spoke about making a difference in their students, the profession, and the world. While this was an important part of the faculty experience, making a difference has received little attention in the published literature. Instead, the tangible reward of salary was the focus of the literature.

Theme 2: Being a Gatekeeper to the Profession

Informants felt they were gatekeepers to the nursing profession. They had the responsibility to prepare safe practitioners who were qualified to enter the profession of nursing. They used various approaches to help students move through the “gate” into professional nursing. None of the informants in the study viewed the level of responsibility as a negative aspect of the faculty experience. However, another finding of

the previously mentioned study of nursing students (n=54) in an undergraduate leadership course indicated that students perceived the high level of responsibility as a deterrent to pursuing a career as nursing faculty (Seldomridge, 2004).

To ensure students were prepared for the profession and capable of providing safe nursing care, the informants felt they had high standards and expectations in regards to student performance. They were accessible and available to provide support to all types of students. Jane related the development of high standards and expectations to the values of the nursing profession and four other informants cited the nursing licensure examination as the basis for developing their performance standards. These approaches to working with students seem to be consistent with professional nursing values. They also reflect measures of program effectiveness, which are commonly used as indicators of program quality. For example, the informants' actions conveyed concern for the well-being of their students and the patients cared for by their students. The informants seemed to respect the inherent worth of individuals because they prepared a diverse group of students for the professional nursing role. They acted in accordance with accepted standards of practice by ensuring students were safe practitioners. Lastly, they ensured equal treatment by providing any student with the support needed. These behaviors seem to reflect four of the five essential nursing values identified by AACN (1998), including altruism, human dignity, integrity, and social justice.

The essential nursing values guide professional nursing practice and seem to guide the informants in their educator role. Additionally, the CCNE (Commission on Colleges of Nursing Education) and the National League for Nursing Accrediting Commission (NLNAC), two organizations that accredit baccalaureate level nursing

education programs, utilize nursing licensure examination pass rates as an indicator of program effectiveness (AACN, 2005c; NLNAC, 2005). Informants in the study also utilized the licensure examination concept as a basis for establishing student performance standards.

Having high standards and expectations were essential for the study informants. For some informants, adhering to their standards jeopardized their personal safety. They were threatened by students who failed to perform at the expected level. The presence of aggressive students in nursing education has been reported in the published literature. However, the reason for such behavior was not addressed in the literature. In an article exploring the causes, manifestations, and consequences of nursing students' anger, Thomas (2003) reported that aggressive students in nursing education disrupted the teacher-student relationship and interfered with educational endeavors. Lashley and De Meneses (2001) surveyed 409 deans and directors of associate degree, baccalaureate degree, and diploma nursing education programs about the extent to which student incivility occurred in their programs. Results indicated nursing students displayed a variety of disruptive behaviors. Threats to the instructor were reported by 46.4% of the sample and were more common in public institutions and those with enrollments of 200 or higher.

When considering the impact that an unsafe work environment can have on nursing faculty, it is important to review the experiences of two study informants. Both considered vacating their faculty positions because they felt unsafe. After considering her options, one informant decided to remain in a teaching position but the other resigned

and relocated to a different institution that she perceived as being safe. This suggests that threats to personal safety in the workplace can impact faculty retention.

Helping their students prepare for the professional nursing role was a hallmark of the informants' faculty experience. The informants described various approaches they used to help students perform at the expected level. Students taught by informants had varied needs, with some displaying academic deficiencies and others who did not seem to understand the professional behaviors expected of nurses. The diverse make-up of the student nurse population identified by study informants are consistent with those reported by Zahorski, Cognard, and Gilliard (1999) about the general population of students in higher education. They reported on the most important issues challenging grantee institutions involved in the Consortium for the Advancement of Private Higher Education's *Faculty Roles, Faculty Rewards, and Institutional Priorities* grant program, which was offered between the years 1996 and 1998. Zahorski et al. concluded that some students enter higher education from dysfunctional backgrounds and have a greater need for remediation than higher education students of earlier years. Collectively, this seems to indicate that the population of students entering higher education has different needs than in students in previous years.

One type of student need identified by informants involved academic deficiencies. In order to assist students displaying academic deficiencies, informants provided academic remediation to their students. They utilized office hours and e-mail as approaches to providing support. To enhance student performance, some informants engaged in one-on-one tutoring and others repeatedly provided students with feedback on written assignments.

The literature indicated that higher education students need support as a result of academic deficiencies. The under-preparedness of college-age students was also addressed in an exploratory study by Thompson and Joshua-Shearer (2002) who studied college undergraduates to determine if the students felt secondary education adequately prepared them for the requirements of college work. The sample consisted of 156 undergraduate students enrolled in a comprehensive four-year institution in southern California. Results indicated that participants' felt improvements were needed at the high school level to better prepare them for academic work. Their comments related to the content areas of math, science, and writing. These findings lend support to the experiences of informants who felt that some of their students were under prepared for academic work and required additional support to be successful in collegiate endeavors.

Lastly, to fully understand the experience of being nursing faculty, it is important to consider the informants' practices of being available to provide student support. All of the informants conveyed a willingness to be accessible and available to students outside the traditional classroom hours. Several informants utilized e-mail to provide support to students and one informant even chose to be accessible to students 24-hours-a-day via e-mail. This practice was in opposition of findings of an exploratory study involving 259 higher education faculty teaching at a particular small private university or mid-sized public university (Duran, Kelly, & Keaten, 2005). The findings indicated that faculty in higher education were unhappy about the number of e-mails they received from students, the time it took to respond to student e-mails, and the feeling they must be available 24 hours-a-day. Being available to students in this manner blurred the boundaries between work and home and raised questions about the expectations to give of self in this manner.

These findings are consistent with the viewpoint shared by Jen, an informant in the current study. She said that prior to entering a faculty position, she did not expect to be available to students 24 hours-a-day, 7 days-a-week.

In summary, informants felt they were responsible for preparing safe practitioners who were qualified to enter the nursing profession. Their practices seem to be consistent with the essential nursing values and licensure standards. The literature supported the informants' descriptions of students who entered their classrooms but failed to recognize the level of support they provided to their students.

Theme 3: Trying Ways to Balance Multiple Roles

Informants interpreted workload associated with being nursing faculty as heavy because they functioned in multiple roles. While teacher, researcher, and service provider are the traditional triad associated with the faculty role since its inception (Finkelstein, 1984), there seems to be some discord between the expectations and realities of the position because various trends in higher education have impacted the faculty role in recent years.

Informants in the study spoke about the multiple roles associated with being nursing faculty and their heavy workload. The high workload has received attention in the literature and has been identified as a factor contributing to the nursing faculty shortage. In a review of the literature, Berlin and Schrist (2002) identified five recurring themes in the literature that related to the developing nursing faculty shortage. One theme focused on nursing faculty workload. Based on their review, the authors concluded that workload expectations of the nursing faculty role were heavy and unrealistic. This position was partially supported by findings of the NLN (2003) who reported that a small

percentage (3.2%) of nursing faculty vacated their positions due to workload concerns. In addition, Seldomridge (2004) reported that undergraduate nursing students, who participated in a faculty shadowing experience, perceived faculty work as never being done. The students indicated this deterred them from choosing a career as nursing faculty.

Workload as a deterrent to choosing a career as nursing faculty also was addressed in a qualitative study of 288 graduate prepared nurses aimed at identifying incentives to entice practicing nurses into faculty roles and strategies to increase the number of qualified nursing faculty (Brendtro & Hegge, 2000). Results of the study indicated having more realistic role expectations as an incentive that would attract graduate prepared nurses to faculty positions. This was one of the few reviewed studies aimed at identifying research-based strategies for recruiting additional nurses to faculty positions.

It is interesting that the literature supports the informants' interpretation of their workload and indicates nurses may not pursue faculty work or may vacate faculty positions due to workload concerns. However, what is missing from the literature is a clear understanding of the roles and responsibilities actually completed by those in the professional faculty role and the time involved in and credit received for completing such work duties. This gap in the literature was the reason for undertaking the current study.

While several job responsibilities were addressed by informants in the current study, teaching was the main role they discussed. The intangible rewards of their position were tied to teaching and student learning. However, Austin (2002) reported that in higher education, the scholarly aspect of the faculty role was rewarded. A finding of the qualitative 4-years longitudinal study involving 79 graduate students and teaching

assistants from a variety of disciplines was that faculty worked in an environment where teaching was emphasized, but rewards were based on research productivity. As a result, higher education faculty experience stress and conflict regarding their work demands.

According to Finkelstein, (1984) the faculty role in higher education originally focused on teaching and the intellectual and moral development of students. While practices of informants in the current study lend support to this, it is in the areas of service that discord seems to exist. The service component of the faculty position originally evolved as faculty members were called upon to share their expertise with constituents outside the educational institution, such as in their communities. Finkelstein said this practice made the professorate visible to the general public, who in turn, supported faculty work. This idea of service seems inconsistent with that the majority of informants in the current study. They felt service consisted of committee work completed within the confines of the institution where they worked, rather than in their communities where they lived. Only one informant addressed service in a manner consistent with that of Finkelstein. This suggests that for some reason, informants are not sharing their expertise with the community in a manner consistent with the traditional faculty role.

The multidimensional nature of the general faculty role has been addressed by the American Association of University Professors (n.d.) and through conceptualization of the faculty role as a meta-profession (Arreola, 2004; Arreola, Theall, & Aleamoni, 2003; Arreola, Aleamoni, & Theall, 2001; Arreola, Theall, & Aleamoni, n.d.). However, what seems to be missing from the literature is an understanding of the responsibilities associated with teaching clinically based coursework. These responsibilities are unique

to nursing and other health sciences. Louise, an informant in the study, spoke about how the clinical aspect of the nursing faculty role is different than that of higher education faculty. She also said that teaching clinically-based courses required nursing faculty to be off campus and as a result, they could not participate in various faculty related activities held while they were teaching clinical courses. This seems to suggest that unique attributes of the nursing faculty role may not be clearly understood by those in higher education.

In addition to teaching clinically-based courses, informants' in the faculty role continued their own clinical nursing practice. Jane, Jen, Victoria, Libby, and Gretchen all held part-time or per diem clinical nursing positions in addition to their full-time faculty positions. None of them addressed continued clinical practice as a requirement for their faculty position and one informant said that colleagues and an administrator at her institution viewed continued clinical practice negatively.

Since maintaining clinical practice can be viewed as a strategy for maintaining content expertise, it seems appropriate that nursing faculty would receive credit for continued clinical practice as part of their faculty role. The literature reflected an approach to incorporating clinical practice into the faculty role through faculty practice. For example, using the National Organization of Nurse Practitioner Faculties (NONPF) Guidelines for Evaluation of Faculty Practice as the basis of the critical analysis of 35 articles describing models of faculty practice, Sawyer, Alexander, Gordon, Juszczak, & Gilliss (2000) reported that nursing faculty members were often expected or required to participate in faculty practice in addition to completing traditional tasks expected of all higher education faculty members. Through their review of faculty practice models, the

authors concluded that, while many faculty practice models exist, issues with workload and compensation persist. They reported, “The value of faculty practice time and expertise has not been sufficiently demonstrated” (p. 516). This indicates that while faculty practice may be an option for incorporating clinical practice into the teaching role, current models may need adapted to reflect realities of faculty work.

Pohl, Duderstadt, Tolve-Schoeneberger, Uphold, and Hartig (2002) also explored faculty practice. They conducted an exploratory study of 452 NONPF members to better understand current faculty practice. Almost one-half (45%) of the 343 practicing faculty who participated in the study indicated their practice was separate from their faculty position, 32% had negotiated practice as part of their faculty position, and 13% reported that practice was a required component of their faculty position and was conducted in a setting associated with the school of nursing. Over one-half of the sample (51%) reported that practice was not considered in decisions regarding tenure and promotion.

Changes to tenure and promotion to include continued clinical practice have been suggested in the literature. The AACN (2003b) has recommended that nursing faculty be given credit for continued clinical practice as part of tenure and promotion guidelines. Use of comprehensive faculty evaluation systems, such as one proposed by Arreola (2000), allow for adapting evaluation guidelines to include activities aimed at building the faculty member’s content expertise, including clinical nursing practice. Adjusting workload requirements to include continued clinical practice has been addressed in the literature as a potential nursing faculty recruitment strategy. For example, through a qualitative study of 288 graduate prepared nurses, Brendtro and Hegge (2000) discovered

that increasing the opportunity to continue clinical practice while teaching would be an incentive to entice practicing nurses into faculty positions.

In addition to their multiple work-related roles, the informants fulfilled roles in their personal lives. They mentioned being mothers and having families who were an important part of their lives. In an attempt to manage their multiple roles, informants tried ways to balance their duties at work and between work and their personal lives. None, including the most senior faculty, spoke of having balance in both of these areas. Instead they were all searching for balance. Five informants voiced concern that an imbalance in these areas had the potential to negatively impact their families, particularly their children, and they were not willing to let this happen. According to faculty census figures from the NLN (2003), 16.3% of the nursing faculty departures in the year 2002 were due to family obligations. This is over five times the number of faculty who departed because of workload concerns. This seems to suggest that while informants in the study spoke of trying various ways to balance multiple roles, some nursing faculty were not successful in establishing enough of a balance between home and work life to continue the search for true balance.

Flexible scheduling, such as working away from the office, was viewed by several study informants as a positive attribute of a faculty position. They utilized this approach as they tried to facilitate balance between work and home life. Gappa, Austin and Trice (2005) reported having balance and flexibility as one of the five essential elements of faculty work. These authors called for changes in higher education practices and policies and said current versions were devised when faculty members were predominately male, with a spouse at home managing domestic and personal responsibilities. Today, there are

an increasing number of female faculty members who are single parents, or who share responsibilities for childrearing and home life with a partner who also works outside the home (Gappa, Austin, & Trice).

Policy issues related to family and work were addressed in a nationwide study of Chemistry and English faculty. Drago and Colbeck (2003) conducted a study to discover the interplay between family and work commitment by faculty employed in colleges and universities in the United States. The researchers utilized a triangulated approach consisting of a national faculty survey (N=5,087), focus groups with faculty at nine institutions, and shadowing studies with 13 faculty at two research institutions. While both males and females in the study addressed the challenges of managing faculty and family roles, nearly one-third of females, compared to one-fifth of males, did not ask for reduced workloads to manage family responsibilities because they feared repercussions that could impact their career. Also, nearly one-third of fathers and one-half of mothers chose to miss a child's activity rather than ask for time off from work in order to show work commitment.

While the findings of the study were numerous, several focused on the benefits of having family-friendly policies for faculty (Drago & Colbeck, 2003). For example, institutions that were viewed by faculty as being family friendly had superior recruiting/retention rates for men, and particularly women. Study recommendations focused on the need to establish family friendly policies including the development of strategies to incorporate family into the institution and findings ways to reduce faculty workload to facilitate completion of family-related roles.

As nursing faculty engage in all dimensions of their work and personal life, it is necessary to consider the impact of heavy workload and the imbalance between work and home on their personal well-being. One informant in the current study said that as a result of the heavy workload, nursing faculty members are exhausted and have nothing more to give. This perspective is consistent with that of Fong (1993) who conducted a longitudinal study of the relationships between overload, social support, and burnout among nurse educators. The sample consisted of 84 full-time nursing faculty members from eight campuses in the California State University System. Results indicated that high demands, extreme job pressure, and emotional exhaustion lead to burnout.

Oermann (1998) also examined work-related stress of clinical nursing faculty. In a study of 226 associate degree and baccalaureate degree nursing faculty from 20 randomly selected programs throughout the Midwestern United States, interference of work with activities of personal importance was a predominate factor resulting in work related stress for clinical nursing faculty. In addition, through a meta-analysis, Gormley (2003) found that job satisfaction levels of nursing faculty decreased when they experienced conflict between varying roles. These studies suggest that exposure to heavy workloads, such as those described by study informants, can impact physical well-being and work satisfaction of nursing faculty.

There is congruency between the published literature and the informants' experiences in terms of the multifaceted nature of the faculty role. However, the literature reflects a lack of understanding of the facets of the nursing faculty role. The informants, just as their counterparts in other disciplines, tried to find a balance at work and between their work and home lives. According to the literature, experiencing a heavy

workload has the potential to impact the health and well-being of nursing faculty and their levels of job satisfaction.

Theme 4: Support is Vital: Can't Do It Alone

All informants in the study expressed a need to have support from others in order to perform duties associated with their work. The type and level of support they needed and received varied among the informants.

The data suggest that the type and level of support needed by the informants may be reflective of the informants' experience in a faculty position and at a particular institution. Eden, who was in a tenure-track position for the last eight years, needed support to complete activities related to scholarship. However, informants who were relatively new to the faculty role or who had just relocated from another place of employment, spoke about needing support to learn the basic operational tasks specific to the institution, such as how to use the automated test scoring system or document student deficiencies. The literature addressed the importance of providing this type of support to newly hired faculty in the form of a comprehensive faculty orientation program (Gazza & Shellenbarger, 2005; Siler & Kleiner, 2001). Such an orientation can help faculty learn basic tasks associated with their position in a timely, efficient, and supportive manner.

Morin and Ashton (1998) utilized an exploratory design to study the needs and offerings of graduate level nursing faculty in terms of new employee orientation. They reported that 33% of the participants received an orientation lasting one day or less. Even though this study focused on graduate level faculty, the results raise questions about the support available to new faculty and the effectiveness of utilized approaches in providing

information faculty need to perform basic functions of their faculty position at a particular institution.

In order to obtain the support they needed, informants indicated they sought out colleagues within the school of nursing who were willing to help. Success in finding supportive peers varied among the informants, with some receiving adequate support and others feeling they were left to learn on their own. The practice of seeking out help was consistent with an article by Willis and Kaiser (2002) who suggested that new faculty who need support to develop scholarly productivity must actively help themselves by reaching out and getting to know colleagues and negotiating for what is needed to be successful in the faculty role. This seems to put the onus for establishing effective supportive relationships on the new faculty member.

All informants who spoke on the issue of support referred to the faculty who assisted them as mentors. This term was used regardless of the level of support provided by the individual. According to the published literature on mentoring, mentors provide more than just the “how to” aspects of the job. Instead, effective mentoring relationships are long-term, evolve between individuals with like interests, and have reciprocal benefits to participants (Roberts, 2000; Thorpe & Kalischuk, 2003). Only one informant in the study spoke about having this type of mentoring relationship. Eden explained how she had a mentor throughout her faculty career and how the mentor assisted with her professional growth. She conveyed the importance of always having a mentor and that mentors assisted her with developing various aspects of her role across her entire career.

Eden’s experience with mentoring is consistent with the mentoring approach suggested in a position statement by the NLN (2006), which involves mentoring across

the career continuum in an environment where mentoring is an expectation of the community and where faculty and administrators are knowledgeable about attributes and practices of effective mentoring relationships. The AACN (2003b) also recommended use of mentoring approaches as a way to encourage nursing faculty members to master the faculty role and remain in faculty positions.

While informants in the study may not have experienced true mentoring relationships as defined in the literature, three mentioned they willingly provided support to their new colleagues and those preparing for the faculty role. In two cases, the support they provided seemed to be reflective of the support they had received as a new hire. None of the reviewed literature on the topic of mentoring addressed the impact of one's own mentoring experiences on his/her performance as a mentor.

Lastly, informants with varying years of experience shared how the perceived lack of secretarial support increased their workload because they had to perform tasks such as copying and stapling examinations. One informant had access to secretarial support but found it to be of poor quality. Ultimately, she chose to perform her own secretarial duties rather than utilizing the available staff. Another informant who mentioned secretarial support stated that resources were available to assist with these tasks but it took time to understand how to access and utilize the services. This suggests that nursing faculty do need access to quality secretarial services as a source of support.

The need for secretarial support surfaced at an earlier time in history. Heidgerken (1956) studied the reasons for the nursing faculty shortage that occurred in the mid-1950s. A recommendation from the study was to make better use of teachers already in the workplace and improve working conditions. A suggestion was to secure additional

secretarial support to assist faculty. While this study is dated, it highlights the fact that some informants in the current study continue to experience a need for quality secretarial support.

Informants in the study underscored the need to have support in order to perform their work and the literature concurs. However, the informants do not appear to consistently receive the level of support recommended in the literature. Specifically, they are not engaged in true mentoring relationships as defined in the literature.

Theme 5: Workplace Relationships: The Good, the Bad, and the Ugly

Data from the study revealed that informants engaged in a wide range of interpersonal relationships in the workplace. The relationships ranged from positive and supportive to negative and detrimental.

Libby described the relationship she had with her colleagues as “like a family”. She was one of two informants to address the positive relationships she experienced with colleagues in the workplace. According to Gappa et al. (2005), feeling a part of a mutually respectful community of colleagues is evidence of collegiality and community involvement. Experiencing these respectful interactions is one of the five essential elements of academic work that are important to all faculty members in higher education. When all five elements are present, faculty will develop meaningful and manageable work lives leading to improved recruitment and retention (Gappa et al., 2005).

Unfortunately, more informants in the study experienced negative relationships at work. The interpersonal conflicts shared by the informants were similar to those described in the literature as bullying, workplace harassment, horizontal violence, and incivility (Kolanko, Clark, Heinrich, Olive, Serembus, & Sifford, 2006; Meissner, 1999).

Literature on this topic is sparse in regards to nursing faculty, but is starting to receive attention. The presence of these behaviors by nurses in clinical settings has been discussed in the literature and may serve as a foundation for understanding the rationale for its presence in nursing education (Baltimore, 2006; Meissner, 1999; Randle, 2003).

The phrase “eating their young” was mentioned by an informant in the study as she discussed conflicts between new and senior faculty at her place of employment. Meissner (1999) wrote about the notion of nurses eating their young and postulated that nurse educators are the first offenders in the scenario. Nurse educators utilized authoritarian approaches to nursing education, assigned unrealistic study loads, and evaluated student performance with minutiae-filled examinations. Nurse administrators in clinical settings carried on the practice by expecting new graduates to perform as experienced nurses. The cycle continued as colleagues disregarded suggestions and input from new nurses. Meissner viewed this process as “insidious cannibalism” (p. 43) and felt that it would destroy the profession of nursing.

The literature supports the idea that bullying may be rooted in nursing education. Baltimore (2006) addressed horizontal violence between veteran and new clinical nursing staff and hypothesized that “the initial breeding ground for dysfunctional nurse-to-nurse behavior is nursing academia” (pp. 30-31). Baltimore concluded if this is true, then during their education, nurses are socialized into a profession where dysfunctional behaviors are the norm and eventually the bullied become the bullies. Randle (2003) likened this to Freire’s work on oppression, which indicated that oppressed groups become like their oppressors. Their thinking becomes distorted and they unconsciously identify with the oppressor. Over time, they become oppressors and the cycle continues.

The pervasiveness of incivility in nursing education was reported in the only study located that focused on nursing faculty incivility. Kolanko et al. (2006) reported that 25% of the attendees at the 2005 NLN Education Summit shared stories of their experiences with what they called “mean girl games”. Of the approximately 261 participants, 245 told stories where they were the targets of workplace incivility. Horizontal incivility was most commonly reported, followed by top-down incivility, and bottom-up incivility. The researchers concluded that the sharing of stories begins the process of uncovering the presence of such behaviors in the academic workplace. Only then can steps be taken to eliminate the presence of these behaviors in the work place. This is extremely important since one informant in the study vacated her faculty position due to work place incivility.

Lastly, two informants in the current study stated that, prior to entering faculty positions, they did not expect to experience these types of interpersonal conflicts in academia. Instead, they expected to work with a group of scholars who focused on moving the profession forward. The conflict between the expectations and realities of a faculty position was identified in a study of 350 early career faculty and graduate students preparing for faculty work in a variety of disciplines (Rice, Sorcinelli, & Austin, 2002). Study participants stated that graduate education did not prepare aspiring faculty for the full range of experiences they would encounter in the professorate including teaching, student advising, public service, research, and institutional citizenship. This resulted in feelings of ambiguity about the faculty role.

The literature indicated that positive workplace relationships enhance the work environment. Unfortunately, only two of eight study informants mentioned experiencing

such relationships. The literature is sparse on the topic of incivility and nursing faculty. However, what is available is consistent with that reported by informants in the study. Informants reported experiences of horizontal incivility and to a lesser extent, top-down incivility. The literature indicated that it is not uncommon for new faculty in higher education and those aspiring to become faculty to discover conflict between the expectations and realities of the faculty experience. This is consistent with the conflict experienced by two informants who did not expect to experience incivility in higher education.

Summary

Informants in this hermeneutic phenomenological study shared their experience of being nursing faculty. Their experience was exemplified through five major themes including: Making a Difference in the Student, Profession, and the World; Being a Gatekeeper to the Profession; Trying Ways to Balance Multiple Roles; Support is Vital: Can't Do It Alone; and Workplace Relationships: The Good, the Bad, and the Ugly. The literature supports the informants' beliefs about needing support to perform their work and the heaviness of their workload. However, it reflects little understanding about the intangible rewards of teaching, the facets of nursing faculty work, and the negative relationships the informants encountered in the workplace. The current study will contribute to the beginning stage of knowledge development in understanding the work of full-time nursing faculty working in baccalaureate level nursing education programs.

Limitations

There are several limitations that surfaced as part of the study resulting from the lack of data ascertained on the demographic questionnaire. A limitation related to sample characteristics was also noted.

The demographic questionnaire, a researcher-designed data collection tool, did not include questions about the ethnic or racial attributes of informants. Therefore, diversity of the sample could not be addressed as part of the study for the purpose of understanding the faculty experience from a variety of perspectives. While the actual sample may have been diverse, the uncertainty of ethnic or racial variations prevented analysis that may have added a dimension to the discussion of findings.

In addition, the demographic questionnaire did not include questions about the type of institution where the informant was employed. Collection of data about the mission of the institution, such as Carnegie Classification, may have facilitated a more in-depth discussion of the findings.

A majority of the informants were currently enrolled in doctoral studies. This could have impacted study results since it is an added dimension of the faculty experience. However, the role of student was not addressed during the interview by any of the informants. Informants reported enrollment in doctoral education as part of the demographic questionnaire.

Lastly, the sample consisted of only female nursing faculty members. While males were not excluded from participating in the study, none volunteered to participate.

The inclusion of male faculty members would have allowed for the inclusion of descriptions and interpretations from both genders rather than just the perspective of female faculty.

Implications and Recommendations

When considering the body of literature reviewed as part of the research process, this study represents one of the first to expand understanding about the experience of being full-time nursing faculty in a baccalaureate nursing education program. Findings provide insight for educational administrators, nurse educators, nursing students, and nurse clinicians into what it is like to be a nursing faculty member from the perspective of those in the nursing faculty role. This knowledge will be useful in developing recruitment and retention strategies aimed at increasing the supply of qualified nursing faculty members. As such strategies are implemented and evaluated through research, discipline-specific knowledge will result. Collectively, results of the study have implications for theory and nursing science, nursing education practice, and policies in higher education. They also serve as the basis for several recommendations regarding future research.

It is important to note the intent of a hermeneutic phenomenological inquiry is to uncover a particular phenomenon from the perspective of the individuals having the experience and includes both description and interpretation. Results of such an inquiry are not generalized to a larger population, but can be assessed for transferability to other settings (Lincoln & Guba, 1985). Transferability, which aids in establishing trustworthiness, is the level of similarity between the current study and the situation to which it is transferred. To facilitate transferability, the researcher must provide rich descriptions of the research setting and associated processes so that others can determine

if findings are applicable to a new situation (Lincoln & Guba, 1985). Transferability of the current study was enhanced through the use of purposive sampling, by comparing the sample to demographics of the general population of baccalaureate and higher degree faculty, and through the provision of dense descriptions of the informants' experiences.

Theory and Nursing Science

Data from the study suggest that nursing faculty remain in faculty positions despite having negative relationships with others and at times, a lack of support from colleagues. This has implications for the theory of job embeddedness. The theory focuses on why individuals remain in their jobs and proposes to predict intent to leave a job by assessing three variables including: "1) the extent to which people have links to other people or activities, 2) the extent to which their jobs and communities are similar to or fit with the other aspects in their life spaces, and 3) the ease with which links can be broken" (Mitchell, Holtom, Lee, Sablinski, & Erez, 2001, p. 1104). The theory proposes that the number of links and perceived compatibility or comfort within an environment can impact an employee's decision to remain in a particular employment position. Employees tend to find it difficult to leave positions where they have multiple links and experience a high level of perceived compatibility. However, data from the current study are not congruent with this theory because most informants were currently working in positions where dissonance, or strained links, existed between employees.

The study also has implications for role theory. Nursing faculty shared experiences where they cared for students by providing them with additional support. They also served as gatekeepers to the profession by ensuring that only qualified nurses entered the profession. This lends support to role theory since the informants seemed to

function in a manner consistent with that expected of nurses. The data suggest that informants' utilize professional nursing values as the framework for functioning in the faculty role. These are the same values utilized by nurses in the professional nursing role.

Findings of the study suggest a perceived threat to nursing science since a majority of the informants were in the 41-60 years of age bracket, most were just now enrolled in doctoral level education programs, and over one-third had been appointed to non-tenure track positions. These factors can limit the number of years informants will complete discipline-specific research to advance the profession. This implies that advancing nursing science may be jeopardized as a result of fewer nursing faculty conducting research, and those who are conducting research, doing so within a shortened career span.

The Practice of Nursing Education

Study findings have implications for nursing faculty, administrators in nursing education, and those who establish policies in higher education that impact nursing faculty. Several of the implications can be viewed as strategies aimed at recruiting and retaining qualified nursing faculty.

Nursing Faculty

The data suggest that the advancement of nursing science may be slowed as a result of informant attributes such as age, and common practices such as working in the years between enrollment in graduate level programs. The literature supports this finding. Therefore, nursing faculty should consider ways to encourage nursing students to begin pursuing a doctoral degree early in their careers, aid them in establishing a plan for completing the degree, and establish RN-PhD programs that will facilitate timely

completion of doctoral studies. These approaches are aimed at increasing the number of nurses preparing for faculty work, but will also decrease the amount of time between academic degrees. Ultimately, this could increase the time employed as a faculty member contributing the advancement of nursing science.

Nursing faculty members are in a position where they can expose undergraduate and graduate students, and nurses in clinical practice to the feelings associated with the rewards of teaching. They can provide opportunities for them to experience the feeling of making a difference in others. This could be accomplished through patient and staff teaching assignments, student teaching experiences where graduate students teach undergraduate nursing students, and extensive internship opportunities for those aspiring to become nursing faculty. Nursing faculty can help clinical nurses experience the feeling of making a difference while serving as preceptors to students and new graduates. Collectively these approaches may attract undergraduate and graduate nursing students and registered nurses outside of academe to the nursing faculty role.

Informants in the study demonstrated a commitment to preparing qualified nurses to enter the profession. They engaged in varied approaches to ensure that only safe practitioners progressed in the nursing education program and entered the profession. The informants encountered students with diverse needs and provided them with the support needed to be successful in meeting high performance standards. Often, they provided support to students outside of the traditional classroom setting and required work hours. Therefore, it seems appropriate for faculty to better understand the population of students they teach, and to establish effective mechanisms for providing support that have the least possible effect on their workload. This could include the establishment of student

retention programs specific to needs of today's nursing student, and the utilization of student support services already available on most college and university campuses.

Since informants addressed workload concerns and the literature supports the understanding that faculty workload is heavy and can interfere with the balance between work and family life, nursing faculty should implement approaches that establish balance in these areas. This may be accomplished by contributing to the development of family friendly policies in the workplace, and by sharing with colleagues practices they find to be effective in establishing balance. Faculty needing flexible schedules to manage family requirements should make their needs known to colleagues and administrators as part of their search for balance. They should be willing to negotiate workload requirements with colleagues and administrators after considering needs of all parties. Faculty should also be sensitive to the long-term effects of trying to maintain a heavy workload and engage in activities aimed at minimizing stress and burnout.

In terms of faculty retention, the data suggest that nursing faculty need to play an active role in serving as a mentor and in seeking out their own mentors. Providing support to a novice faculty and faculty who are new to a particular institution can begin by establishing comprehensive orientation programs. They should also establish positive relationships with colleagues and be willing to engage in mentoring relationships across the career span. Conversely, nursing faculty members must actively seek out mentors who can provide them with support as they pursue scholarly endeavors such as research.

Lastly, in the area of workplace relationships, the data suggest that more experienced negative than positive interpersonal relationships at work. The literature suggested that practices such as "eating their young" were based on the oppressive nature

of approaches utilized in nursing education (Baltimore, 2006; Messiner, 1999). Therefore, it seems appropriate that nursing faculty examine practices within nursing education and take the necessary steps to eliminate those that are oppressive in nature. They must also play an active role in establishing healthy work environments by engaging in respectful interactions with colleagues and utilizing conflict management techniques to resolve differences within the workplace.

Nursing Education Administrators

Suggestions for administrators are aimed at recognizing faculty for their work and establishing an environment that facilitates safety, promote the establishment of family friendly policies, and facilitate professional growth of those working within the nursing program. These recommendations also have implications for recruitment and retention of nursing faculty.

The rewards identified by study informants were an important part of the nursing faculty experience. This suggests that attempts need to be made to expose nursing faculty to the successes of their students. Activities such as pinning and capping ceremonies, and alumni reunions would allow nursing faculty members to witness student achievement of important milestones. Facilitating communication between nursing program graduates and nursing faculty members who facilitated their learning is another mechanism that would allow faculty to learn of the successes of their students.

Informants in the study demonstrated a commitment to ensuring that only qualified individuals pass through the gate into nursing. They willingly provided students with the support needed to become a nurse. However, the literature did not address this facet of the nursing faculty role. In light of this finding, nursing faculty

members should be recognized and rewarded for their commitments to students and quality education. Collectively, faculty and administrators should celebrate the achievement of program outcomes such as graduation rates, licensure pass rates, employment rates, and alumni survey outcomes. These accomplishments should be shared with members of the profession and the academic community.

In response to study findings regarding safety, the realities of heavy workload requirements, the need for support to do the job, and the existent workplace relationships, it is apparent that administrators must evaluate the current work environments of nursing faculty. Using evaluation findings, they can devise and implement a plan that ensures a safe work environment that fosters professional growth of faculty, staff, and self. Establishing comprehensive orientation programs for novice faculty and those who are new to the institution, ensuring the availability of quality secretarial support, creating an environment where support and mentoring are an expectation, role modeling respectful interpersonal relationships with faculty, and establishing conflict management protocols for use in the workplace are just a few of the approaches to ensuring the presence of a healthy work environment.

Lastly, nursing education administrators must recognize the importance of having balance between home and family life. To ensure that faculty can have such as balance, administrators must explore alternate scheduling models and workload calculations that meet the needs of faculty and the nursing department. They need to be receptive to scheduling needs of faculty and collaborate with them to establish workload schedules that meet identified needs.

Higher Education Policies

The data suggest that those in higher education charged with devising policies that impact nursing faculty must reevaluate personnel policies, tenure and promotion guidelines, and workload requirements within the context of what is currently happening in higher education. This could aid in minimizing the conflicts between the expectations and realities of the faculty position. Also, tenure and promotion guidelines must be adapted to provide credit for participation in activities that are unique to nursing faculty such as teaching clinically-based courses and engaging in continued clinical practice. While this may prove challenging, comprehensive faculty evaluation systems can incorporate unique attributes such as clinical teaching and continued clinical practice into the faculty evaluation, and tenure and promotion processes (Arreloa, 2000).

Study findings regarding workload requirements, the search for balance between work and home life, and the importance of flexible scheduling options suggest that trends in higher education have indeed changed the faculty experience (Zahorski et al., 1999). The fact that informants addressed the importance of being with their family, particularly their children, warrants the attention of individuals who develop personnel policies for nursing faculty. Faculty practice models, self scheduling, job sharing, and alternate workload packages are a few options that might help accommodate today's faculty member.

Recommendations for Future Research

Results of this hermeneutic phenomenological inquiry revealed the experience of being a full-time nursing faculty member in a baccalaureate level nursing education program from the perspective of eight informants. While some findings of the study are

consistent with the published literature, a few have yet to be addressed in-depth through research. The following are recommendations for future research based on the results of this study.

Since only females volunteered to participate in the study, the study uncovered the experience of being nursing faculty for a sample of female informants. Also, since the ethnic and cultural attributes of the sample were not assessed, it is recommended that the study be replicated with a heterogeneous sample of nursing faculty to develop an understanding of their experiences in the faculty role.

The main theme that emerged from the current study focused on making a difference in the student, profession, and the world. This theme encompassed the rewards associated with teaching, which were based on making differences in these areas. While this was a major theme uncovered in the current study, the published literature is relatively void of research on the topic of the intangible rewards of teaching such as making a difference. It is recommended that research be conducted on this topic for the purpose of understanding the relationship between the presence of intangible rewards and their impact on faculty satisfaction, and recruitment and retention.

Data from this study, along with literature on the topic of Herzberg's two-factor theory of motivation, raise questions about how the experience of *making a difference* serves to motivate nursing faculty. Further exploration of the relationship of these factors may also be beneficial in identifying recruitment and retention strategies, including factors related to job satisfaction.

Informants described their workloads as heavy and shared a process they utilized to try and balance of the duties associated with their multiple roles. Conducting time

studies, such as those conducted by Drago and Colbeck (2003) may aid in identifying the time involved in performing multiple roles including that spent working with students outside of the traditional work hours. Findings could aid in developing a realistic set of role expectations that can be managed by nursing faculty within a reasonable timeframe and may be useful in establishing policies for the calculation of faculty workload.

A vast amount of literature is available on the topic of mentoring. However, informants' experiences with effective mentoring relationships were limited. Research to determine the level of mentoring occurring in nursing education and the effectiveness of mentoring models utilized within nursing units in higher education could prove beneficial. Findings could aid in establishing support structures that are readily available to new faculty and continue to be available across their career span.

The informants shared experiences of incivility that occurred in their work environments. The incivilities were bottom-up (student to faculty member), top-down (administrator to faculty member), and horizontal (faculty member to faculty member). Research aimed at exploring such behaviors could lead to the development of strategies aimed at minimizing their presence in the academic work environments of nursing faculty. Once such strategies are implemented, they must be evaluated to determine effectiveness in establishing a culture of civility in the workplace. This could also be accomplished through research focusing on the work environments of nursing faculty.

Lastly, the results of the study can serve as the foundation for developing recruitment and retention strategies aimed at increasing the number of qualified nursing

faculty. As such strategies are implemented, research into their effectiveness in alleviating the nursing faculty shortage is imperative and will build nursing knowledge in this area.

Conclusion

The purpose of this hermeneutic phenomenological study was to understand how full-time nursing faculty members in baccalaureate level nursing programs interpret their lives and make meaning of what they experience. Through personal interviews, informants in the study shared their experiences and five themes were identified in the data they provided.

According to study informants, the core component of the experience of being nursing faculty was in making a difference. Their work made a difference on a variety of levels. Through teaching, they made a difference in their students, the patients who received care from their students, and the profession of nursing. The effects of their work were far-reaching and served to perpetuate the discipline of nursing. By providing support to students, they seemed to care for them in the same manner that a nurse cares for his/her patients; identifying a deficiency, and implementing a plan of care aimed at improving the “condition” of the student. The level of commitment they have towards their work was evidenced by their willingness to persevere in a work environment where they must try to perform in multiple roles, and with inconsistent levels of support and respect from colleagues. This indicates they gave of themselves in order to make a positive difference in others.

Using these findings, nursing faculty, administrators, and policy generators in high education can establish research-based strategies aimed at preparing future nursing faculty, recruiting additional nurses to the faculty role, and retaining those already preparing nursing students for professional practice. While this research provided an understanding of what it is like to be a full-time nursing faculty member in a baccalaureate nursing education program, it also uncovers the need for additional research about components of the nursing faculty experience.

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APPENDICES

APPENDIX A

Demographic Questionnaire

The Experience of Being a Full-Time Nursing Faculty Member in a Baccalaureate
Nursing Education Program
Demographic Questionnaire

Pseudonym _____ Date _____

Instructions: These 10 questions relate to your full-time position in a baccalaureate level nursing education program. Please indicate your response by marking an "X" or writing the requested information on the line next to the appropriate response. Since the study focuses on full-time nursing faculty in baccalaureate level nursing education programs, it is not necessary to include information from additional part-time or adjunct positions that you may hold.

1. Please indicate your credentials (please check all that apply):

_____ Bachelor of arts degree
Major- _____

_____ Bachelor of science degree
Major- _____

_____ Master of science degree
Focus- _____

_____ Doctoral degree
Focus- _____

_____ Certifications
Please list- _____

_____ Other
Please specify- _____

2. What is your gender?

_____ Male _____ Female

3. Please indicate your age group:

_____ 25-30 years of age _____ 41-45 years of age _____ 61-65 years of age
_____ 31-35 years of age _____ 46-50 years of age _____ 66+ years of age
_____ 36-40 years of age _____ 51-60 years of age

4. What is your current professional rank?

- Instructor
 Assistant Professor
 Associate Professor
 Professor
 Other (please list _____)

5. Please indicate your current employment track:

- Tenure track
 Non-tenure track
 No track due to temporary or adjunct status
 Other (please specify _____)

6. What is your current employment status? (please check all that apply):

- Temporary faculty
 Permanent faculty
 Full-time employment
 Other (please specify _____)

7. What percentage of your current teaching assignment is completed in an entry-level baccalaureate nursing education program?

- < 25%
 26%-50%
 51%-75%
 76%-100%

8. Please indicate the years of experience you had working in a clinical position prior to being employed as a full-time nursing faculty member.

_____ total years _____ years part-time _____ years full-time

9. Please list the total numbers of years of experience you have working as a nursing faculty member.

_____ total years _____ years part-time _____ years full-time

10. Please indicate the number of years you have been employed as a full-time nursing faculty member at your current institution.

_____ years

APPENDIX B

Interview Guide

The Experience of Being a Full-Time Nursing Faculty Member in a Baccalaureate
Nursing Education Program
Interview Guide

Pseudonym _____ Date _____

1. Tell me what it is like to be a nursing faculty member in a baccalaureate nursing education program.
2. Explain or describe what it means to you to be a nursing faculty member.
4. Is there anything else you would like me to know about being nursing faculty?
5. I will be interviewing other nursing faculty members, how was this interview for you?

Examples of probes that will be used to elicit a more in-depth discussion of the experience of being a nursing faculty member:

1. Tell me more.
2. Please share an example of that.
3. Could you expand on what you said?
4. Describe how that made you feel.
5. What does that mean to you?

APPENDIX C

Cover Letter



SCHOOL OF NURSING
FISHER HALL

600 FORBES AVENUE
PITTSBURGH, PA 15282
TEL 412.396.6550
FAX 412.396.6346
www.nursing.duq.edu

Dear (Potential participant's name)

Thank you for expressing interest in being a participant for a research project partially funded by the National League for Nursing that seeks to investigate the experience of being a full-time faculty member in a baccalaureate nursing education program. Study results will aid in a better understanding of the phenomenon of being nursing faculty and the subsequent establishment of research-based recruitment and retention strategies aimed at increasing the number of nursing faculty.

Individuals who are currently working as a full-time nursing faculty member and completing a minimum of 51% of their current teaching assignment in an entry-level baccalaureate nursing program and teaching both theory and clinical courses at this level and are willing to share their experiences are invited to participate in the study. You meet these inclusion criteria and are eligible to participate in the study.

I look forward to learning about your experiences as a full-time nursing faculty member. As per our earlier conversation, your interview is scheduled for _____, 2006 at _____ AM/PM at _____.

You will receive a confirmatory message two days before the scheduled interview.

Please review the enclosed consent form for details regarding the study. You will be asked to sign a copy of the consent form prior to the start of the initial personal interview. Should you have questions about the consent or the study prior to the scheduled interview or if you would like to cancel or change your interview appointment, please contact me via e-mail at begazza@adelphia.net or by phone at 1-888-826-2829 (Extension 8275).

Sincerely,

Elizabeth A. Gazza MSN, RN, FACCE
PhD Candidate
Duquesne University School of Nursing

APPENDIX D

Consent Form



SCHOOL OF NURSING
FISHER HALL

600 FORBES AVENUE
PITTSBURGH, PA 15282
TEL 412.396.6550
FAX 412.396.6346
www.nursing.duq.edu

CONSENT TO PARTICIPATE IN A RESEARCH STUDY

INVESTIGATOR: Elizabeth A. Gazza MSN, RN, FACCE
44 Harrison Street
Homer City, PA 15748

ADVISOR: Joan Such Lockhart PhD, RN,
CORLN, AOCN®, CNE, FAAN
School of Nursing
412-396-6540

SOURCE OF SUPPORT:

This study is being performed as partial fulfillment of requirements for the doctoral degree in nursing at Duquesne University and is being partially funded by an education research grant from the National League for Nursing.

PURPOSE:

You are being asked to participate in a research project that seeks to investigate the experience of being a full-time faculty member in a baccalaureate nursing education program because you are a full-time faculty member in such a program. You will be asked to complete a 10-item questionnaire and allow me to interview you on 2-3 occasions. The initial face-to-face interview will last approximately 60-90 minutes. Once the initial step of data analysis is complete, a follow up interview lasting approximately 30-60 minutes will be conducted by telephone for the purpose of clarification and verification of your responses. If necessary, a third telephone interview, lasting 30-60 minutes will be conducted to confirm results of the data analysis. No time limits for the interviews will be imposed by the researcher. All of the interviews will be audio taped and transcribed. These are the only requests that will be made of you.

RISKS AND BENEFITS:

There are no risks associated with participation in the study. There are no personal benefits to participating in the study other than the possibility of gaining a clearer understanding of your experience as a nursing faculty member.

COMPENSATION:

You will not receive any form of compensation for participating in the study. However, participation in the study will require no monetary cost to you.

CONFIDENTIALITY:

If you indicate willingness to participate in the study, your identity will remain confidential. The signed consent and questionnaire will be reviewed only by the researcher. Only the researcher and participant will participate in the interviews. You will identify a pseudonym for use on the questionnaire. This pseudonym will be used on the audiotapes and when transcribing interview data. Transcription of audiotapes will be conducted by the researcher or a researcher-trained transcriptionist who has signed a confidentiality statement. No identity will be made in the data analysis. Verbatim quotes will be used in both the dissertation and publications. All materials, including audiotapes and raw data will be stored in a locked box at the researcher's home. All materials will be destroyed when all activities related to the research are completed.

RIGHT TO WITHDRAW:

You are under no obligation to participate in this study. You are free to withdraw your consent to participate at any time, including during the actual interview, and for any reason and without penalty.

SUMMARY OF RESULTS:

A summary of study results will be supplied to you, at no cost, upon request.

VOLUNTARY CONSENT:

I have read the above statements and understand what is being asked of me. I also understand that my participation is voluntary and that I am free to withdraw my consent at any time, for any reason and without penalty. On these terms, I certify that I am willing to participate in this research project.

I understand that should I have any further questions about my rights as a research participant, I may contact Dr. Paul Richer, Chair of the Duquesne University Institutional Review Board at 412-396-6326, Dr. Joan Such Lockhart, Chair of the Dissertation Committee at 412-396-6540, or the principal investigator for the study who is Elizabeth A. Gazza MSN, RN, FACCE at 1-888-826-2829 (Extension 8275) or via e-mail at begazza@adelphia.net.

Name of participant (please print)

Signature of participant

Date

Name of investigator

Signature of investigator

Date

APPENDIX E

Duquesne University Institutional Review Board Approval



DUQUESNE UNIVERSITY

INSTITUTIONAL REVIEW BOARD

424 RANGOS BUILDING ♦ PITTSBURGH, PA 15282-0202

Dr. Paul Richer
Chair, Institutional Review Board
Phone (412) 396-6326 Fax (412) 396-5176
e-mail: richer@duq.edu

March 10, 2006

Ms. Elizabeth Gazza
44 Harrison Street
Homer City PA 15748

Re: "The experience of being a full-time nursing faculty member in a Baccalaureate nursing education program"
Protocol #06/30

Dear Ms. Gazza:

Thank you for submitting your research proposal and the requested revisions.

Based upon the recommendation of IRB member, Dr. Joan Masters, along with my own review, I have determined that your research proposal is consistent with the requirements of the appropriate sections of the 45-Code of Federal Regulations-46, known as the federal Common Rule. The intended research poses no greater than minimal risk to human subjects. Consequently, under rules 46.101 and 46.110, your proposed research is approved on an **expedited** basis.

In accordance with federal guidelines, the IRB stamps the consent form with an approval date and one year expiration date. This stamp appears on the front page of the form, which is enclosed with this letter. You should use it as the originals for your copies. Please remember that there should be two copies of the consent form with original signatures, one for you and one for the subject.

This approval must be renewed in one year as part of the IRB's continuing review. You will need to submit a progress report to the IRB in response to a questionnaire that we will send. In addition, if you are still utilizing your consent form, you will need to have it approved for another year's use.

If, prior to the annual review, you propose any changes in your procedure or consent process, you must inform the IRB Chair of those changes and wait for approval before implementing them. In addition, if any procedural complications or adverse effects on subjects are discovered before the annual review, they immediately must be reported to the IRB Chair before proceeding with the study.

When the study is complete, please provide us with a summary, approximately one page. Often the completed study's Abstract suffices. Please keep a copy of your research records, other than those you have agreed to destroy for confidentiality, over a period of five years after the study's completion.

Thank you for contributing to Duquesne's research endeavors.

If you have any questions, feel free to contact me at any time.

Sincerely yours,

A handwritten signature in cursive script, appearing to read "Paul Richer".

Paul Richer, Ph.D.
IRB Chair

C: Dr. Joan Masters
Dr. Joan Lockhart
IRB Records

APPENDIX F

Confidentiality Statement

CONFIDENTIALITY STATEMENT

I, _____ understand that I may have access to personal information provided by persons involved as participants in the study, *The Experience of Being a Full-Time Nursing Faculty Member in a Baccalaureate Nursing Education Program*. As a member of the project team, I recognize that I have an obligation to protect the confidentiality of the information acquired in the conduct of the study and that I may disclose information so acquired only with the consent of individual(s) who is (are) the source of information and/or whom the information concerns, and of the principal investigator.

My signature below indicates my acceptance of the obligation on disclosure set forth above and I realize that failure on my part to fulfill this obligation can lead to appropriate disciplinary action.

Signature _____ Date _____