

12-2018

Baccalaureate Nursing Programs Supporting Veterans: A Qualitative Study of the Student Veteran Experience

Heather Zonts

Follow this and additional works at: <https://knowledge.library.iup.edu/etd>

Recommended Citation

Zonts, Heather, "Baccalaureate Nursing Programs Supporting Veterans: A Qualitative Study of the Student Veteran Experience" (2018). *Theses and Dissertations (All)*. 1667.
<https://knowledge.library.iup.edu/etd/1667>

This Dissertation is brought to you for free and open access by Knowledge Repository @ IUP. It has been accepted for inclusion in Theses and Dissertations (All) by an authorized administrator of Knowledge Repository @ IUP. For more information, please contact cclouser@iup.edu, sara.parme@iup.edu.

BACCALAUREATE NURSING PROGRAMS SUPPORTING VETERANS:
A QUALITATIVE STUDY OF THE STUDENT VETERAN EXPERIENCE

A Dissertation

Submitted to the School of Graduate Studies and Research

in Partial Fulfillment of the

Requirements for the Degree

Doctor of Philosophy

Heather L. Zonts

Indiana University of Pennsylvania

December 2018

© 2018 Heather L. Zonts

All Rights Reserved

Indiana University of Pennsylvania
School of Graduate Studies and Research
Department of Nursing and Allied Health Professions

We hereby approve the dissertation of

Heather L. Zonts

Candidate for the degree of Doctor of Philosophy

Teresa C. Shellenbarger, Ph.D.
Distinguished University Professor, Advisor

Theresa M. Gropelli, Ph.D.
Associate Professor of Nursing and Allied Health
Professions

Pamela O’Harra, D.Ed.
Assistant Professor of Nursing and Allied Health
Professions

Cory Shay, Ph.D.
Director, Military and Veterans Resource Center

ACCEPTED

Randy L. Martin, Ph.D.
Dean
School of Graduate Studies and Research

Title: Baccalaureate Nursing Programs Supporting Veterans: A Qualitative Study of the Student Veteran Experience

Author: Heather L. Zonts

Dissertation Chair: Dr. Teresa C. Shellenbarger

Dissertation Committee Members: Dr. Theresa M. Gropelli
Dr. Pamela O’Harra
Dr. Cory Shay

With the current education benefits offered to military personnel, student veterans entering higher education is projected to increase. This student population has unique needs because of combat exposure associated with military experiences. Therefore, to enhance the success of this growing population, educators need to understand factors that impact student veterans in higher education. To meet the needs of this group, government entities such as the Health Resources and Services (HRSA) administration are providing funding to create learning environments that retain student veterans in higher education and more specifically nursing. With the implementation of these programs, it is imperative that nurse educators identify what resources are beneficial for student veterans.

The research question for this phenomenological study was “What is the lived experience of student veterans enrolled in nursing programs at institutions identified as supporting military including both HRSA grant funded Nursing Education, Practice, Quality and Retention: Veterans’ Bachelor of Science Degree in Nursing programs and/or nursing programs located in institutions designated as Military Friendly®?” The study sample consisted of 11 study participants from five different baccalaureate in nursing degree granting institutions located in the eastern United States. Each institution either received HRSA grant funding through Nurse Education, Practice, Quality and Retention (NEPQR) Program focused on Veteran’s Bachelor of

Science Degree in Nursing and/or were identified as Military Friendly®. Transcripts from the semi-structured interviews were analyzed using Colazzi's method. Using Whittemore, Chase, and Mandle's framework, rigor was maintained throughout the research process.

The resultant themes included acclimating to the college culture, shift in the thinking paradigm, using resources to facilitate progress, reestablishing a sense of community, expression of leadership attributes, and determined to succeed. The results from this research study describe the student veteran experience and are helpful in guiding nursing education for these students. These results may assist administrators and nurse educators with the development of programs and initiatives aimed at increasing faculty awareness, resources to enhance student veteran retention, and the creation of support networks for student veterans. Further research is needed regarding the experiences of student veterans in nursing programs. Recommendations are provided regarding research, funding, and policy.

ACKNOWLEDGEMENTS

I want to thank everyone that helped with this research study. Having been in the Pennsylvania Army National Guard for 13 years, I have seen veterans both before and after deployments. Also, being an educator, I have seen the impact that these deployments can have on student veterans. Therefore, it was important to me to conduct this study to determine what the student veteran experience is in nursing programs with the hope of retaining this growing population of students.

I would like to express my deep gratitude to my dissertation chair, Dr. Teresa Shellenbarger. I have known Dr. Shellenbarger since I completed my undergraduate nursing degree 14 years ago. A few years after I attained my BSN, I asked her for a reference for an acute care nurse practitioner program. Interestingly at that time, she asked me if I was sure that was what I wanted to do. She knew all along where my heart really was, teaching students. I started that program and she was right. It wasn't where I wanted to be. Her confidence in my abilities and her continued support are what have pushed me to complete my dissertation. I hope that she knows the impact she has had on me not only as a doctoral student, but also as a person. I greatly appreciate all that she has done.

I would also like to thank my doctoral committee, Dr. Theresa Gropelli, Dr. Pamela O'Harra, and Dr. Cory Shay. Even during my struggles, you were all there to help me through. Your continued support throughout this process facilitated me to accomplish my goal.

Another important group I would like to thank are the student veterans that agreed to participate in this research study. I want to thank you for your service. Additionally, I want to thank you for the time you devoted to this research study and your willingness to discuss your experiences. Your dedication and drive are a true inspiration.

I would also like to thank all of the veteran representatives/liaisons that assisted me at each of the institutions. Your assistance was monumental in my ability to complete my research study at each of your institutions. Many of you went above and beyond to help me and it did not go unnoticed. I greatly appreciate everything you did.

I also want to thank the other students from my doctoral cohort. The support from class to class is what kept me going. I would also like to thank Dr. Megan Gross. Her support in these last few months has pushed me to where I am now, completing my dissertation. When I was discouraged, she was there. Her words of support and encouragement pushed me to continue. I will be forever grateful for this support!

I want to express my gratitude to the nursing faculty at IUP. Your words of encouragement and your desire to help were important sources of support for me.

I also would like to thank my friends, especially those that have listened and supported me throughout this process.

Last, but not least, I would like to thank my family including my mom and dad for the countless hours they have spent listening to me lament about my progress. Most importantly, my husband and children have been a major supporting factor throughout this process. Dennis, you have been understanding throughout this journey and pushed me to continue even when I was feeling discouraged. Without that I am not sure I would have made it through. To my three boys, Parker, Brayden, and Gannon, your patience and understanding have helped me to continue working toward this goal. I hope you see the importance of pursuing your dreams and not stopping until you achieve them, even when you are discouraged.

TABLE OF CONTENTS

Chapter		Page
ONE	INTRODUCTION	1
	Background.....	2
	Statement of the Problem.....	6
	Purpose.....	7
	Research Question	7
	Definition of Terms.....	8
	Assumptions.....	9
	Significance.....	9
	Summary	12
TWO	LITERATURE REVIEW	13
	Military Impact on Student Veteran Development.....	13
	Physical, Mental, and Emotional Health.....	16
	Disconnection With Nonmilitary Peers in Higher Education.....	21
	Support.....	25
	Phenomenology.....	30
	Summary	39
THREE	METHODOLOGY	40
	Introduction and Background	40
	Sample.....	43
	Setting	45
	Procedures.....	46
	Rigor	52
	Human Subjects Consideration.....	58
	Summary	59
FOUR	FINDINGS.....	60
	Sample.....	60
	Themes.....	63
	Acclimating to the College Culture	64
	Peers.....	65
	Academia	68
	Shift in the Thinking Paradigm.....	72
	Using Resources to Facilitate Progress.....	75
	Veteran liaison	76
	Faculty.....	79
	Physical resources.....	81
	Reestablishing a Sense of Community	82

Chapter	Page
	Veteran status.....83
	Common goal.....85
	Expression of Leadership Attributes.....87
	Determined to Succeed90
	Summary94
FIVE	DISCUSSION95
	Discussion96
	Implications.....112
	Student Veteran Support112
	Creating a support network.....113
	Veteran resource center.....114
	Veteran liaison role115
	Institution117
	Veteran orientation program117
	Prior learning assessments117
	Nursing Program118
	Faculty Education Sessions.....121
	Raising awareness121
	Teaching-learning strategies122
	Role of Student Veterans in Nursing Programs124
	Limitations126
	Recommendations.....126
	Research.....127
	Funding130
	Policy130
	Summary131
	REFERENCES133
	APPENDICES144
	Appendix A - IRB Approval Letter IUP144
	Appendix B - Interview Questions145
	Appendix C - Email Requesting Participation.....146
	Appendix D - Invitation to Participate.....147
	Appendix E - Informed Consent148
	Appendix F - Demographic Sheet.....150

LIST OF TABLES

Table		Page
1	Study Participant Demographic Information	63

CHAPTER ONE

INTRODUCTION

With the current rise in global conflicts, there has been an increase in military personnel deployments and their presence in combat situations. Unfortunately, with the highly volatile nature of these conflicts, many military personnel are returning with disabilities that impact their employment opportunities. Additionally, the employment prospects for many are limited and require that military personnel seek alternative careers. Therefore, approximately two million military veterans will use their education benefits to attend higher education institutions before 2020 (American Council on Education [ACE], 2008). The influx of veterans into nursing education specifically is further impacted by the Health Resources and Services Administrations (HRSA, n.d.) release of grant funding to support the Nurse Education, Practice, Quality and Retention (NEPQR): Veterans' Bachelor of Science Degree in Nursing Program (VBSN). Since the initiation of the NEPQR: VBSN grant in 2013, 30 colleges and universities have been awarded funding. The funding was provided to aid the development of veteran specific support systems within nursing programs fostering recruitment, retention, and academic success (HRSA, n.d.). Additionally, these programs build on the knowledge, skills, and abilities of veterans (HRSA, n.d.) and assist in developing the baccalaureate prepared nursing workforce. A number of these institutions also carry a designation of Military Friendly®. This designation is determined using surveys distributed to military service members located in military transition programs and U.S. military communities (Military Friendly®, 2018). In addition to this survey, public data sources from the Department of Education, the Department of Veteran Affairs, and the Department of Defense are also used.

The veteran population has unique skills that may benefit the nursing profession, but veterans may also require support services for success. Many of the programs that have received the HRSA grant funding have incorporated services focused on the physical and psychological support needs of this growing population. Additionally, a Military Friendly® designation further supports the veterans' perspective regarding the benefits of the resources provided at these institutions. However, little is known about veterans enrolled in nursing programs with either HRSA grant funding or a Military Friendly® designation and the experiences they have as students. This research study describes the lived experience of veterans enrolled at nursing programs in institutions identified as supportive of military students including HRSA NEPQR: VBSN grant funded institutions and institutions designated as Military Friendly®. This chapter will describe the background, problem, purpose, research questions, and significance of this study. Furthermore, assumptions and definitions of key terms are included to assist with the reader's understanding of the phenomenon of study.

Background

The American Council on Education (ACE, 2008) projected that approximately two million military veterans will use their education benefits to attend higher education institutions before 2020. According to data analyzed from the 2011-2012 National Postsecondary Student Aid Survey (NPSAS), approximately 5% of the undergraduate population consists of individuals who have served in the military of which 3.7% are veterans (Molina & Morse, 2015). Individuals who have served in the military include members of the National Guard, reserve components, and full-time service. To be considered a veteran, the service member must have "served on active duty, completed their service obligations, and met length-of-service requirements" (Molina & Morse, 2015, p. 3). Members of the National Guard and reserve components are

designated as a veteran when they are called to active duty service. The NPSAS also identified that one in five veteran undergraduates were enrolled in a science, technology, engineering, or mathematics field (Molina & Morse, 2015). Additionally, as identified in the Million Records Project, health professions enrollment ranked in the top five degrees pursued by veterans (Cate, 2014). Veterans are pursuing post-secondary education in health care professions; therefore, it is important to understand the lived experience when this population pursues nursing education.

Each individual serving in the United States military has unique experiences when leaving active duty service. These experiences depend on the branch of service, deployments, missions, and military roles. Each branch of military service has a set of core values that are engrained in military recruits from the beginning of their training. The Army has seven core values that include leadership, duty, respect, selfless service, honor, integrity, and personal courage (U.S. Army, n.d.). The Navy and Marines share core values including honor, courage, and commitment (Department of the Navy, 2009). Additionally, the Navy Ethos emphasizes the importance of integrity as a foundation for conduct (Department of the Navy, 2008). The Air Force also emphasizes the importance of integrity combined with service before self, and excellence in all they do (United States Air Force, n.d.). The Coast Guard has similar core values which include honor, respect, and devotion to duty (United States Coast Guard, 2016). They also identify integrity as a standard for conduct (United States Coast Guard, 2016). If one does not abide by these values and ethos, they may be removed from military service. Military values and ethos are taken extremely seriously because of their impact on decisions and actions during military duty. The lack of commitment to these values is not acceptable since it may result in a loss of life. This behavior is not acceptable. Therefore, the high standards established from initial

entry lay the foundation for an individual's military career. These values stay with the individual even after departure from military service and impact their role in the civilian world.

Additionally, research in higher education has shown the positive impact previous military experience has had on veteran development (Hammond, 2013; Ness, Rocke, Harrist, & Vroman, 2014; Olsen, Badger, & McCuddy, 2014). Military service provides soldiers with unique experiences that impact their development, including training and education opportunities, leadership roles, and military deployments. These experiences assist in the development of characteristics exhibited by military personnel including maturity, discipline, professionalism, time management skills, and the ability to collaborate with others (Hammond, 2013; Livingston, Havice, Cawthon, & Fleming, 2011; Messina, 2014). These strengths are all qualities desirable to the nursing profession, illustrating the importance of retaining this population in nursing education. Additionally, the nursing profession identifies the importance of the same core values. The core values of the National League for Nursing (2013) encompass caring, integrity, diversity and excellence. Further support for these military values comes from the American Association of Colleges of Nurses (2015), which values respect, open communication, quality, efficiency and accountability, and integrity. Therefore, the military population has engrained core values in their personnel that are mirrored within the nursing profession.

The government also recognizes the importance of these values and beliefs for health care professionals. In September of 2013, HRSA announced the release of grant funding to support the Nurse Education, Practice, Quality and Retention (NEPQR): Veterans' Bachelor of Science Degree in Nursing Program (VBSN) (HRSA, n. d.). The NEPQR-VBSN formation seeks to build on the training and education of veterans with health care experience and skills

(HRSA, 2013). Additionally, this grant program seeks to facilitate the transition and retention of veterans into higher education. Considering the influx of student veterans into academia and their already developed skill set, a need exists to assist veterans in transitioning and advancing in professional nursing careers (Allen, Billings, Green, Lujan, & Armstrong, 2012).

According to the United States Department of Labor (2015), the number of registered nurses is anticipated to grow at a rate of 16% between 2014 and 2024, increasing by almost 440,000 positions. As the need exists for growth of the workforce, so does the need to enhance diversity within the nursing profession. Increasing enrollment and retention of student veterans will assist in the nursing profession meeting the recommendations from the Institute of Medicine (IOM, 2011) and the Bureau of Health Professions through HRSA (2013), which call for a more diverse nursing profession. According to the Department of Defense (2013), the United States military consists of 85.1% male members and 14.9% female members. Additionally, 69.3% of the military population are white, while 30.7% are from minority populations (Department of Defense, 2013). These statistics highlight gender and diversity differences from the current nursing profession further emphasizing the importance of enrolling and retaining the veteran population in nursing programs to enhance diversity.

The NEPQR: VBSN grant seeks to enhance support for student veterans in nursing programs. Retention of military personnel in nursing will help to diversify the nursing population and advance the IOM recommendations. A stipulation of the funding is the creation of student veteran support systems to facilitate the transition to academia. The effectiveness of the funded programs from the student veteran's perspective has yet to be established. Therefore, exploring the student veterans' lived experience while enrolled in NEPQR: VBSN grant funded nursing programs may provide educators with valuable information regarding supportive learning

environments. Furthermore, it may facilitate efforts to retain this population in nursing programs, which is critical for the profession.

Statement of the Problem

The American Council on Education identified that approximately two million veterans will enter higher education by 2020 (ACE, 2008). Considering this large number and the recent combat zone conflicts in Iraq and Afghanistan, the military population has experienced deployments that may impact physical, mental, and emotional health. Health issues frequently plaguing the military population involved in these deployments include physical disabilities, Post-Traumatic Stress Disorder, and mental health problems (Graf, Ysasi, & Marini, 2015; Young, 2012). Additionally, the literature identifies that student veterans feel isolated and alienated (Durdella & Kim, 2012; Tomar & Stoffel, 2014). Student veterans face unique challenges in higher education related to their military experience, including frustration with the immaturity of their non-veteran peers (Hammond, 2013), adapting to the lack of structure typical in academia (Jones, 2013; Naphan & Elliott, 2015), the role transition from soldier to student, and the financial stress associated with post-military transition coupled with the cost of education (Naphan & Elliott, 2015; Rumann & Hamrick, 2010). These factors emphasize the difficulty student veterans may have in higher education. Current research regarding student veterans focuses on academia in general with paucity in the literature regarding student veterans enrolled in nursing programs. Additionally, research is needed regarding the lived experience of student veterans enrolled in HRSA NEPQR: VBSN grant funded nursing programs and/or Military Friendly® institutions.

Purpose

The purpose of this study is to describe the lived experience of student veterans enrolled in nursing programs at institutions identified as supporting military including both HRSA grant funded Nursing Education, Practice, Quality and Retention: Veterans' Bachelor of Science Degree in Nursing programs and/or nursing programs located in institutions designated as Military Friendly®. A phenomenological qualitative approach assists in describing the perceptions and experiences of student veterans. Descriptive phenomenology seeks to describe the subjective phenomena and is used when a phenomenon is poorly defined (Polit & Beck, 2012). In this case, there is limited research available about the experience of student veterans entering nursing programs. This study explored the lived experience of student veterans enrolled in HRSA grant funded baccalaureate nursing programs and/or Military Friendly® institutions. The use of semi-structured interviews provided study participants with the opportunity to tell their stories regarding their experiences. This form of data collection allowed study participants to provide illustrations and explanations regarding the phenomenon of interest (Polit & Beck, 2012). Furthermore, it provided the researcher with rich, detailed information regarding the lived experience of student veterans.

Research Question

This research study seeks to answer the following research question focused on the lived experience of student veterans into higher education: What is the lived experience of student veterans enrolled in nursing programs at institutions identified as supporting military supporting including both HRSA grant funded Nursing Education, Practice, Quality and Retention: Veterans' Bachelor of Science Degree in Nursing programs and/or nursing programs located in institutions designated as Military Friendly®?

Definition of Terms

The following terms used throughout the research study are defined below:

- **Student veteran:** Anyone who has served on active duty in the United States Army, Marines, Navy, Coast Guard, or Air Force (United States Census Bureau, 2015). For this study, the student veteran will be currently enrolled in a prelicensure baccalaureate degree nursing program. Also, the student veteran will have active duty experience with an overseas deployment during Operation Iraqi Freedom, Operation Enduring Freedom, or Operation New Dawn.
- **Active Duty:** Full-time service, other than for training, as a member of the United States Army, Marines, Navy, Coast Guard or Airforce. “Active duty applies to service in the reserves or National Guard only if the person has been called up for active duty, mobilized, or deployed” (United States Census Bureau, 2015, para. 25). For this study, active duty will require mobilization during Operation Iraqi Freedom, Operation Enduring Freedom, or Operation New Dawn.
- **Health Resources and Services Administration Nurse Education, Practice, Quality, and Retention (NEPQR) Veteran’s Bachelor of Science Degree in Nursing (VBSN):** This grant funded program is aimed at assisting veterans’ enrollment, progression, and graduation in obtaining baccalaureate nursing degrees (BSN); support NCLEX-RN licensing exam passage; modify current BSN curriculum and support services to meet the needs of veterans; and prepare veterans transitioning from military to civilian professional nursing practice (HRSA, 2013, p. 2).
- **Military Friendly® Schools:** Military Friendly® Schools receive this designation after an evaluation process involving both public and proprietary data gathered using the Military

Friendly® Schools survey. The public data is obtained from the Department of Education, the Department of Veteran Affairs, and the Department of Defense. The survey is distributed across the globe to United States of America servicemembers to gain their input rating colleges and universities. Designations include designated, bronze, silver, gold, and top 10 (Military Friendly®, 2018).

Assumptions

The assumptions of this study include the following:

- Student veterans have equal access to resources at the higher education institution; and
- student veterans will openly share their experiences in nursing programs in higher education.

In conjunction with these assumptions, certain biases may be present. The researcher has previous military experience that may impact the interpretation of the data. To prevent this, the researcher incorporated mechanisms such as bracketing to identify beliefs in order to lessen the impact on data analysis.

Significance

The IOM Report, *The Future of Nursing: Leading Change, Advancing Health* (2011), identified the importance of a diverse nursing profession to adequately care for and treat the United States population. They identified that a need exists to begin this initiative in higher education. The Bureau of Health Professions through HRSA also has initiatives aimed at increasing diversity of the health care workforce (HRSA, 2013). These initiatives call for more ethnic and racial diversity as well as increasing the number of males within the nursing profession. The inclusion of the veteran population will assist in meeting these diversity needs. The National Council of State Boards of Nursing (NCSBN, 2015) conducted the National

Nursing Workforce Study and found that 19.5% of registered nurses are from ethnic and racial minorities. Additionally, they identified that 14.1% of respondents were male (NCSBN, 2015). Consequently, the current nursing population lacks the diversity needed to adequately care for the United States population.

According to the United States Census Bureau (2012), the minority population currently makes up one-third of the United States population. Over time, the number of individuals from minority populations is expected to grow with predictions of a reversal of the minority population (United States Census Bureau, 2012). Henceforth, the United States population is becoming more diverse. The field of nursing must also enhance the diversity of the nursing workforce. One mechanism to meet this need is the enrollment and retention of student veterans. According to the Department of Defense (2013), the United States military consists of approximately 2.5 million soldiers. When analyzing the current demographic trends of the military population, “30 percent of active duty personnel and 25 percent of reservist and National Guard members identify as a racial/ethnic minority” (Molina & Morse, 2015, p. 7). Considering the proportion of military personnel from minorities and the number of males, enrolling and retaining veterans in nursing education programs can assist in meeting this need.

In addition to the growing number of veterans in higher education, the number of veterans entering the healthcare system has grown significantly. In April 2012, First Lady Michelle Obama and Dr. Jill Biden spearheaded the Joining Forces Initiative (National League for Nursing [NLN], 2012). This initiative is focused on educating nurses about how to recognize the health care issues plaguing the growing veteran population. These issues include Post-Traumatic Stress Disorder (PTSD), Traumatic Brain Injury (TBI), and other combat-related disabilities (NLN, 2012). This growth requires faculty to teach veterans-based care to students.

The National League for Nursing released the Advancing Care Excellence for Veterans toolkit aimed at caring for this population of patients (NLN, 2016). In addition to the NLN, the American Nurses Association (ANA), the American Association of Colleges of Nurses (AACN), federal nurses of the military and public health services, and the Department of Veteran Affairs (VA), to name a few, have also started initiatives that link with the Joining Forces Initiative to improve nursing education regarding veteran health (NLN, 2012). These initiatives were created to improve the nursing care the veteran population receives because most veterans seek care outside of the military health care system in local hospitals. This requires knowledgeable nursing professionals to handle the unique care needed for this growing population. Therefore, the enrollment and retention of student veterans in nursing programs can assist with this initiative through their awareness, understanding, and sensitivity to the needs of the veteran population. Student veterans enrolled in HRSA grant funded nursing programs and/or Military Friendly® institutions have previous military experience, which can be an asset to both nursing education and the current nursing profession. They can provide perspectives and understanding of the military population and assist in ensuring appropriate treatment and care.

Furthermore, the importance of retaining student veterans in nursing programs has been emphasized by the implementation of HRSA grant funded programs such as the NEPQR: VBSN program, increasing the importance of studying student veterans enrolled in nursing programs. In addition, it is also important to conduct research at institutions that have been designated as Military Friendly® because of the impact resources can have on retaining this population of students. The transition for students into nursing education can be difficult, even without the compounding factors experienced by military veterans. Therefore, a need exists to explore the lived experience of student veterans enrolled in nursing education. Using a phenomenological

approach provides student veterans with the opportunity to tell their stories about their experiences. Colaizzi (1978) identified the importance of data immersion and the formulation of meanings until an exhaustive description of the phenomenon is obtained. The description sought in this study is the lived experience of student veterans. Furthermore, the thick, rich descriptions obtained will help researchers understand the experiences of student veterans.

Retention of the student veteran population is important to nursing education. The unique skills and perspectives of student veterans can assist nurse educators in developing veteran care student learning experiences. With initiatives from the NLN, ANA, AACN, and VA, it is important that educators are creating meaningful learning experiences aimed at this growing population of patients. Additionally, the professionalism, values, and insights of the veteran population will enhance the nursing workforce. The positive impact the veteran population can have on the nursing profession cannot be underscored. The skills obtained through military experience will assist with caring for patients in emergency rooms, critical care units, and caring for other veterans in the health care setting. This research will further identify what educators need to do to ensure this population of students is retained.

Summary

This chapter provided a background of the topic of interest and discussion of the problem. The purpose of this research study and the research question were identified. Additionally, explicated terms were defined, and assumptions were presented regarding the research study. The chapter concluded with a discussion of the significance of this topic in nursing education. The focus of this research study is the student veteran perception of their experience while enrolled in a HRSA grant funded baccalaureate nursing education program and/or institution designated as Military Friendly®.

CHAPTER TWO

LITERATURE REVIEW

With the influx of veterans into higher education, it is imperative that educators understand their experiences in academia. These factors may impact their ability to be successful in nursing degree programs. Current literature regarding veterans in higher education focuses on all of academia and not specific degree programs such as nursing. This literature review provides knowledge regarding the impact of military experience on student veterans in higher education. To identify the impact previous military experience has on student veterans in academia, literature that focused on veterans in higher education with previous combat experience was reviewed. The literature search spanned from 2005 until 2016 and included journal articles retrieved from databases and dissertations. The literature reviewed revealed common findings including the military impact on student veteran development, their physical, psychological, and emotional wellbeing, student veterans feeling disconnected in higher education, and the need for focused support. Each of these are discussed in detail. Additionally, a brief overview of the use of phenomenology using the Colaizzi method is discussed. This method will assist in garnering detailed descriptions regarding the lived experience of veterans enrolled in nursing education.

Military Impact on Student Veteran Development

When individuals enter the military, they are immersed in an environment dedicated to teamwork, service, respect, and discipline. During their military training, they learn the values that drive their branch of service. Even though these values may be phrased differently across all branches of service in the United States military they have similar meaning. While the values are similar, military service provides soldiers with unique experiences that may impact their development. These experiences include training and educational opportunities, leadership

development, and military deployments. All of these experiences enhance the development of characteristics exhibited by military personnel. Research has shown that military experience has led to personal development for an individual (Hammond, 2013; Livingston et al., 2011; Messina, 2014; Ness et al., 2014; Olsen et al., 2014). According to a qualitative study using constructivist paradigm, 19 Caucasian student veterans with at least one combat deployment believed that their military career changed them (Hammond, 2013). Even though this study lacked demographic diversity, the findings revealed that military experience led to maturity, discipline, and professionalism. Military experience gave them a broader understanding of the world and sense of appreciation for what they had. These findings support that military values are engrained in soldiers during their military training and continue throughout their military career. The researcher in the study was a civilian and identified that his lack of military experience may have impacted his ability to fully understand and interpret the veteran experience (Hammond, 2013). Therefore, it is unclear what influence having prior military experience may have on the interpretation of the findings for the current study.

Like Hammond, Messina (2014), another researcher who explored the military experience, identified the values brought forward from military experience including respect for others, collaborating with others, and fairness. Using an interpretive qualitative study, Messina (2014) identified that military values are explicit; whereas, they are implicit in academia. Soldiers are aware of expectations from the time they enter the military. On the contrary, the students identified that in academia, the expectations and value systems were not always known. Even though this is the case, it appears that the military values such as discipline and professionalism are deeply engrained and are retained even as veterans move into other career or educational areas (Messina, 2014).

The previous research emphasizes the important impact military service can have on the development of service members. Many times, military experience includes combat operations. While combat operations can negatively impact health and mental or emotional wellbeing, it can also positively impact student veterans. Ness et al. (2014) included 48 student subjects in the quantitative portion of their mixed-methods study. The researchers identified that 67% of the study subjects had previous combat operation involvement. They found that student veterans develop time management skills and the ability to balance multiple roles (Ness et al., 2014). The participants in this study attributed the development of these skills to their military training and furthermore, the discipline they developed while in the military. They also noted that military experience had a positive impact on enhancing veteran self-motivation. This intrinsic motivation drives military personnel to accomplish their goals and work harder to meet the expectations set forth. The mean GPA of the study participants was 3.37. This commendable GPA may be partially attributed to the discipline and dedication developed while in the military and then carried through into their educational experience. While not discussing data saturation in this study report, the findings regarding the positive impact of characteristics developed during the student veteran's military career were supported by other research studies. The mixed-methods study conducted by Olsen et al. (2014) consisted of ten full-time student veterans who served on active duty for at least one year, with 70% serving in a combat zone. The study participants identified they were taught self-discipline, leadership, and teamwork as part of their military experiences. Participants indicated that these characteristics, combined with increased motivation, helped them succeed in academia. The researchers were not specific regarding degree programs; henceforth it is not known if this is the case within nursing programs. These characteristics, discipline, leadership, teamwork, and professionalism are important within the

nursing profession. Therefore, it is important to determine if these characteristics are brought into nursing programs and if they are helping nursing students to succeed.

While student veterans have demonstrated characteristics such as professionalism, time management, and discipline, it is important to understand what they perceive as impacting their success. Another study investigating student veterans in higher education used a grounded theory approach at an institution that was previously a military education college. Livingston et al. (2011) found that student veterans (N=15) were more focused on school activities and less on social activities. They were self-motivated to succeed and self-disciplined to stay goal oriented, ultimately leading to successful college performance. Re-enrollment after deployment was a requirement for participation in the research study. This requirement may have impacted the enhanced self-motivation of the study participants.

Although there are some problems with the lack of diversity of the sample and minimal reporting of data saturation in Livingston et al.'s study, the literature shows that student veterans bring the characteristics developed in the military to the academic setting. These characteristics include discipline, professionalism, time management, respect, and the ability to effectively work in a team. While these characteristics are prominent with the military population, concern arises regarding support needs of this population because of increased combat zone deployments to places like Iraq and Afghanistan. These deployments leave some student veterans with physical, mental, and emotional disabilities that can impact their progression in higher education.

Physical, Mental, and Emotional Health

The positive impact military experience can have on student veterans is prominent in the research, but because of recent conflicts in Iraq and Afghanistan, the number of combat zone deployments has significantly increased in the last 20 years. These deployments may potentially

impact physical, mental, and emotional health and lead to a variety of other health concerns. Health issues frequently plaguing the military population involved in these deployments include physical disabilities and mental health problems such as PTSD (DiRamio, Ackerman, & Mitchell, 2008; Elliott, Gonzalez, & Larsen, 2011; Graf et al., 2015; Hammond, 2013; Ingala, 2011; Ness et al., 2014; Ryder, 2012; Tomar & Stoffel, 2014; Young, 2012). One major concern regarding the veteran population is the prevalence of Post-Traumatic Stress Disorder (PTSD). According to the Department of Veteran Affairs (2016), between 11% and 20% of veterans returning from conflicts in Afghanistan and Iraq suffer from PTSD each year. Additionally, a variety of factors such as the veterans' military actions, politics surrounding the war, war location, and enemy interactions can significantly impact the presence of PTSD and other mental health problems (Department of Veteran Affairs, 2016).

Current research supports the prominence of these PTSD issues among student veterans in higher education (Hammond, 2013). These findings were also supported by Elliott et al. (2011); they found that study participants with combat exposure had “an increased frequency of PTSD symptoms” (p. 286). In addition, PTSD led to increased alienation and increased strain on intimate relationships (Elliott et al., 2011). According to the demographic data, 77% of the study participants were previously deployed to combat zones including Iraq, Afghanistan, and the First Gulf War. Therefore, combat exposure may directly impact the mental and emotional functioning of study veterans.

Additionally, PTSD increased the hypervigilance experienced by students. This hypervigilance impacted student veterans' ability to focus over long periods (Hammond, 2013; Tomar & Stoffel, 2014). Tomar and Stoffel (2014) found that student veterans identified distraction and poor focus on what professors were teaching in the classroom. They also

discussed that classroom events such as certain activities, noises, and crowds can trigger PTSD symptoms. These findings must be viewed cautiously as they originated from a small (N=2) qualitative research study that lacked diversity (Tomar & Stoffel, 2014). Additionally, it was not clear if the participants were deployed to combat zones.

In contrast to the qualitative studies previously mentioned, Ingala (2011) used a quantitative correlational research design to analyze student veteran adjustment to college while including PTSD as a measure. Using the Student Adaptation to College Questionnaire (SACQ), student veterans diagnosed with PTSD had lower levels of college adjustment. The SACQ ($\alpha = .950$) analyzed academic adjustment, social adjustment, personal-emotional adjustment, and goal commitment/institutional attachment. The negative correlation ($r = -.64, p < .05$) between the SACQ and PTSD diagnosis from the sample of 128 student veterans supports the potential negative impact PTSD can have on adaptation to higher education. Other studies support these findings. According to Ryder's (2012) study, twenty-six student veterans previously diagnosed with PTSD reported having difficulty with concentration, time management, making friends, and reaching out to others. These difficulties, possibly associated with military experiences and subsequent PTSD, may impact student veterans' social adjustment and ultimately affect the overall student experience. While these findings are presented in the general academic setting, it is not known if student veterans in nursing programs have similar experiences. Furthermore, the added rigors of nursing programs may significantly impact the presentation of PTSD symptoms, but there is not current literature regarding PTSD and nursing students and more specifically nursing student veterans.

While little is known about this specific group, researchers have looked at the broader academic setting including Military Friendly® institutions. A quantitative study conducted by

Graf et al. (2015) examined the educational experiences of 215 student veterans. This sample was recruited from 40 different Military Friendly® institutions in Texas. The designation of Military Friendly® is awarded annually to institutions that engage prospective military students in a recruiting environment, educate military students once they are a part of the school, and hire military students in meaningful employment (Victory Media, 2016). Of the student veteran sample, 40% experienced combat. One tool the researchers used was a checklist administered via SurveyMonkey™ to determine the presence of physical difficulty as well as PTSD symptoms. Two-thirds of the 215 student veterans identified some residual physical, emotional, or behavioral difficulty or symptoms (Graf et al., 2015). Furthermore, Graf et al. (2015) identified that 70% of the 215 participating student veterans thought supported to obtain their education, but only 30% felt that their psychological needs were met. These statistics are concerning especially considering that perceived health was identified as a significant factor in adjustment from military to civilian life in Young's (2012) cross-sectional quantitative research study.

Not all research on this topic is limited to undergraduate students. Young (2012) analyzed perceived health by surveying 77 undergraduate (70.2%) and graduate (29.8%) student veterans regarding health problems they experienced that limited their ability to participate in work or school. The Internet survey was sent to student veterans at four schools identified as Military Friendly® in the New York metropolitan area. Within this survey, student veterans had to rate their perceived health on a 5-point scale ranging from poor to excellent. The findings identified that the level of dispositional resiliency an individual had was a predictor of depression. Young (2012) defined dispositional resiliency as a “characterological response to extreme stress that allows for protection against the effects” (p. 50-51). Additionally, Young (2012) found that student stress was also predicted by post-deployment social support. Therefore, student veterans

who were involved in combat may struggle to adapt to higher education, especially if they do not have adequate support systems. Furthermore, while these studies were some of the few to discuss the Military Friendly® designation, they emphasized that having this designation alone does not adequately reflect support systems available for student veterans. Furthermore, the lack of clarity regarding degree programs in each of these studies reveals the need for additional research regarding institutional and degree specific support systems and their impact on student veteran success.

In addition to PTSD, some student veterans may also suffer from Traumatic Brain Injury (TBI). The mixed-methods study by Ness et al. (2014) found that students suffering from mild Traumatic Brain Injury (TBI) and PTSD exhibited sensory issues, problems concentrating, and difficulty focusing and paying attention. TBI and PTSD impact the neurologic function of veterans. TBI has physical effects whereas PTSD has psychological ones. The symptoms of PTSD and TBI continue to impact student veterans throughout their lives, therefore impacting their ability for success in higher education and possibly even in a nursing career. The literature shows that increased stress associated with course work assignments and crowds can trigger PTSD symptoms. Considering student veterans in nursing programs are caring for patients and need to be able to work within a team, it is important to recognize these triggers and identify steps to facilitate student success. Additionally, introducing student veterans to an uncontrolled environment such as a clinical learning experience can precipitate these symptoms, provoke stressful feelings, and impact patient care. Understanding the impact of PTSD on student veterans is important when attempting to plan support services needed. Currently, a literature gap exists regarding student veterans in nursing programs and furthermore, their response to the clinical setting. Therefore, it is important to explore the lived experience of student veterans

within nursing programs. Including student veterans currently enrolled with at least one semester of nursing courses will assist in understanding their experiences within the clinical setting.

Disconnection With Nonmilitary Peers in Higher Education

In the military, service members become acclimated to an environment of structure, known expectations, and peers of similar mindsets. Shifting into academia where these values among students are not always the same, veterans may feel disconnected in academia with their nonmilitary peers. Additionally, the physical, mental, and emotional issues plaguing this population of students further compound these feelings of being alone and disconnected. The literature suggests this disconnection leads to student veterans feeling isolated and alienated, henceforth alone in academia (DiRamio et al., 2008; Durdella & Kim, 2012; Elliott et al., 2011; Graf et al., 2015; Hammond, 2013; Naphan & Elliott, 2015; Ness et al., 2014; Olsen et al., 2014; Ryder, 2012; Tomar & Stoffel, 2014). As discussed earlier, PTSD is a prominent concern among veterans returning from combat deployments. In the previously discussed study, Elliott et al. (2011) analyzed combat exposure and PTSD symptoms among 104 student veterans. Combat exposure included items that put the individual in dangerous situations such as “being shot at.” This study also measured alienation using a Likert scale focused on four items: “fitting in”, feeling “judged”, “looked down upon”, and discussing details of military service (Elliott et al., 2011, p. 284). In addition, the researchers used the 17-item PTSD Checklist Military Version to identify if individuals participating in the study suffered from PTSD and the frequency of symptoms (Elliot et al., 2011). Using bivariate correlations, the researchers found that student veterans who had more combat encounters were more likely to experience PTSD and had more feelings of alienation on campus. While these findings were significant, the response rate was only 45%. Therefore, it is unclear if these findings represent all student veterans.

Other research also describes the disconnection felt by student veterans. Thematic analysis of 26 student veteran responses using an online open-ended survey also identified difficulty with making friends, reaching out to others, and feeling more withdrawn from peers (Ryder, 2012). These factors contribute to student veterans' feelings of social isolation and loneliness. These feelings become further compounded when a student veteran is the only veteran within a course or program (Hammond, 2013). If this is the case, they do not have other veterans to reach out to for support. In addition, student veterans report withdrawal from others because of the inferred perception of being a "killer" or emotionally unstable. The more these feelings and perceptions are present, the greater the amount of separation between veteran and nonveteran students. Student veterans believe they cannot connect with their nonveteran peers because non-veterans do not understand their military experiences. This lack of understanding is evident when students ask them inappropriate questions such as if they ever killed anyone (DiRamio et al., 2008; Graf et al., 2015; Hammond, 2013). Further supporting these findings was a grounded theory study conducted by DiRamio et al. (2008) which was not limited to particular demographics as this study included 19 males and six female participants from three different research institutions. Situations regarding inappropriate comments and questions tend to cause student veterans to want to blend in and not stand out; they do not want to be the center of attention (DiRamio et al., 2008). DiRamio et al. (2008) found that student veterans become introverted and socially isolated thereby increasing their feelings of being alone.

Furthermore, these feelings of alienation and social isolation can be further attributed to the neurobehavioral symptoms associated with Traumatic Brain Injury (TBI) or PTSD (Ness et al., 2014). Many individuals diagnosed with PTSD attempt to avoid situations with an overabundance of stimuli because this may trigger PTSD symptoms (Hammond, 2013). The

PTSD symptoms may thus cause students to withdraw from social interaction and henceforth express feelings of isolation and alienation. This is further supported in the study by Hammond (2013) who conducted interviews with 19 student veterans to determine how military deployment impacted the college experience. He found that student veterans struggle with the development of social relationships with peers in academia leaving them feeling like outsiders within the academic environment. The study participants in this research study differed from other research by Elliott et al. (2011), Ness et al. (2014), and Ryder (2012) in that the participants did not identify as suffering from PTSD. Therefore, the feelings of alienation and isolation are present among both individuals with a PTSD diagnosis and those without. Furthermore, Durdella and Kim (2012) used a quantitative methodology (n=153) that found student veterans identified as having a lower sense of belonging and had lower participation rates in extracurricular activities which further increased their isolation from others.

The findings of student veterans' isolation, alienation, and withdrawal all support the overarching finding of disconnection with peers in higher education. Student veterans many times feel alone and have difficulty connecting with others within their courses. These findings were consistent across both quantitative and qualitative studies. Furthermore, non-military peer behaviors such as asking questions perceived as intrusive and the perception of "being a killer" are concerning especially when they occur at military friendly institutions. In addition to these findings, student veterans also become frustrated with non-military peers who lack maturity and experience thus further contributing to their impaired ability to connect with others (DiRamio et al., 2008; Hammond, 2013; Ness et al., 2014; Olsen et al., 2014; Rumann & Hamrick, 2010). As identified in the mixed-methods study of 10 student veterans enrolled in either an undergraduate (80%) or graduate programs (20%), study participants identified they had difficulty with social

interactions (Olsen et al., 2014). They reported difficulty finding common ground and interests with non-military peers.

Furthermore, they became frustrated with the attitudes and the lack of maturity of other students. The study participants had a mean age of 30, lived off campus, and 50% were employed (Olsen et al., 2014). As seen in these sample demographics, student veterans are typically older than the traditional age of college student. According to the National Center for Education Statistics (2018), the average age of college students varies depending on institution. In 2015, 89% and 86% of college students respectively that attended 4-year public and private nonprofit institutions were considered young adults, under the age of 25 (National Center for Education Statistics, 2018). The number of full-time young adults at for profit private institutions dropped significantly to 31% (National Center for Education Statistics, 2018). Therefore, the average age of the study participants was higher than the average college age for most institutions, which may impact the findings presented. Furthermore, the demographic factors of student veterans may influence these feelings regarding maturity and attitudes of peers.

Other studies have revealed similar findings regarding the attitudes of student veterans toward nonmilitary student peers. The grounded theory qualitative study by Hammond (2013) also supported these findings. The 19 study participants identified frustration and distraction when interacting with peers. In addition to difficulty with social interaction and common interest with non-military peers (Olsen et al., 2014), student veterans identified that other students were less experienced, less disciplined, and lacked appreciation for the ability to participate in their college education (Hammond, 2013). Furthermore, the average age of study participants was 31 years, which as discussed previously is greater than the mean age of college students and could explain the inability to connect because of these factors. Studies conducted by DiRamio et al.

(2008), Ness et al. (2014), and Rumann and Hamrick (2010) all identified that much of the frustration and difficulty with social interaction was attributed to the difference in the maturity level of peer students. This difference in maturity level may be attributed to the age difference between individuals with previous military experience and those without. Multiple studies have identified the factors impacting the perceived maturity difference including military experiences (DiRamio et al., 2008), clearer perspectives, increased goal commitment (Rumann & Hamrick, 2010), and work ethic (Ness et al., 2014). Additionally, student veteran respondents lived off campus and identified as independent from their parents (Olsen et al., 2014; Rumman & Hamrick, 2010). This independence combined with the maturity differences of military versus nonmilitary personnel may impact connections formed by these students. However, these studies did not discuss the degree programs of the study participants. Therefore, this could be another factor impacting connections formed by students because of variations in the learning environment. For example, some degree programs, such as nursing, are more intensive with both classroom and clinical learning environments. Increased demands may further impact student veterans' ability to transition and be successful in higher education.

Support

Adequate support services are paramount to the academic success of student veterans (Elliott et al., 2011; Tomar & Stoffel, 2014; Young, 2012). As seen in the previous literature, student veterans have unique needs. While student veterans feel disconnected from some students, they do feel connection with veteran peers. A primary area of support identified in five of the research studies focused on connections with other veterans (Hammond, 2013; Ingala, 2011; Lemos, 2013; Livingston et al., 2011; Olsen et al., 2014). Student veterans identified that their most prominent source of support was other veterans (Hammond, 2013; Livingston et al.,

2011). Livingston et al. (2011) found that student veterans expressed an increased comfort level with veteran peers because of their maturity and common experiences. Additionally, research suggests that veteran students believe they understand each other and have strong connections based on their experiences (Hammond, 2013).

Hammond (2013) also identified a common bond between student veterans that consisted of unconditional support, an established comfort level, and the continuous need to look out for each other. This common bond extends from their military service time. During military service, veterans eat, sleep, and work together daily. They experience deployments and combat situations together. These experiences solidify the bond between veterans and their understanding of each other. This supports the findings by Olsen et al. (2014) in their mixed-methods study that identified that students desire the support of other veterans. Student veterans reported higher comfort with veteran groups than with other students, rating their comfort on average a 7.4 on a 1 (minimal comfort) to 10 (maximum comfort) point scale. Therefore, student veteran's desire to socialize with other veterans is prominent within the research.

The correlation research study conducted by Ingala (2011) had similar findings. She found that student veterans missed the close community they experienced in the military. Ingala's (2011) correlational research study consisted of 128 participants. The results of the regression ($R^2 = .561$, $F(6,121) = 25.78$, $p < .05$) indicated that higher levels of unit support ($\beta = .022$, $p < .05$) and post-deployment support ($\beta = .036$, $p < .05$) predicted higher levels of successful college adjustment. Therefore, military unit support provided after deployment may enhance progression and success in academic programs. These findings suggest the positive impact of the camaraderie and support felt by student veterans. Also, values such as teamwork and discipline further assisted veterans in their transition to higher education (Ingala, 2011). They also

identified the importance of support from others that understand them and what they have experienced. The need for a veteran connection was evident in both the quantitative and the qualitative study findings, emphasizing the importance of this connection for veterans. While these findings were prominent, the research studies did not identify degree programs of the student veterans. Therefore, it is important to expand on this research to more fully understand the experience of student veterans enrolled in nursing programs. Further studies regarding student veterans will help reveal the exact nature of the support needed. Also, these studies will help identify more about the support seeking behaviors of the student veteran population.

With the increased incidence of physical, emotional, and mental health problems combined with feelings of disconnectedness, veterans may need added support to ensure success. In the aforementioned quantitative study by Elliot et al. (2011), increased social support lowered Post Traumatic Stress Disorder (PTSD) symptoms. Using bivariate correlations, the researchers determined that student veterans with increased social support expressed fewer PTSD symptoms, whereas those with physical injuries expressed more symptoms. Physical limitations restricted student veteran access to support services and therefore, they identified receiving less support while in college. Henceforth, less social support led to increased PTSD symptoms. When discussing social support, it is important to determine how this impacts student veterans' adjustment to college. Young (2012) sought to examine the relationship between risk factors such as combat experiences and resilience factors such as social support and the impact on student veteran college adjustment. The researcher measured adjustment by analyzing college students' stress, perceptions of belonging and support, and sense of belonging within the community. The findings from this cross-sectional quantitative study suggested that post-deployment social support directly impacted the adjustment to college ($r = .53, p \leq .01$). The

higher the veterans scored in each of these areas, the greater the adjustment to the college environment. Therefore, perceived support is also a determining factor in student veteran adjustment.

While support is essential, many veterans have identified that adequate support is not available at their institutions (Barnard-Brak, Bagby, Jones, & Sulak, 2011; DiRamio et al., 2008; Graf et al., 2015; Jones, 2013; Livingston et al., 2011). According to the DeRamio et al.'s (2008) grounded theory study of 25 student veterans at three research institutions in northern, southern, and western regions of the United States with recent active duty deployments, veteran groups and programs specific for veterans did not exist. Further substantiating the impact of veteran support in higher education was a quantitative study consisting of 596 faculty members (Barnard-Brak et al., 2011). They represented 28 different universities ranging in size from large four-year institutions to small two-year schools. According to the online survey results, study participants identified that when faculty were more negative about serving in the military, they were less likely to endorse and respect veterans' service (Barnard-Brak et al., 2011). Additionally, they were also less likely to endorse self-efficacy to work with returning veterans with symptoms of PTSD. Similarly, Livingston et al. (2011) found that veterans at a public four-year higher education institution which once was a military education institution identified a lack of military appreciation and institutional support. The 15 study participants discussed that military observance days such as Veterans Day and Memorial Day were not recognized. Recognition of these events indicate support for military service. A lack of appreciation may be perceived by veterans as a lack of support and henceforth a lack of respect for military service.

In addition to a lack of faculty and peer support, student veterans have expressed the need for ongoing comprehensive support (Jones, 2013). The three participants in Jones' (2013)

phenomenological study identified the need for assistance in admissions and financial aid offices. Other support services needed include both a social component, offering services to connect them with veteran resources, and financial services (Jones, 2013). Some institutions have identified the importance of military support and have instituted activities that support veterans. However, the programs developed do not always meet student veteran needs. The HRSA grant funding for baccalaureate degree nursing programs is aimed at enhancing student veteran support. Because of the ongoing concern regarding the support infrastructure, it is imperative that researchers explore the experience of student veterans enrolled in these nursing programs. Additionally, the current literature lacks sufficient evidence about the impact of the HRSA grant funding on student veterans in nursing programs. Therefore, this exploration may help educators to identify what support student veterans perceive as beneficial to completing their education and determine which to use to retain this growing population.

While several studies discussed the importance of support services for veterans, it is also important to understand the support-seeking behaviors of veterans. A few of the research articles reviewed analyzed the support seeking behaviors of student veterans (DiRamio, Jarvis, Iverson, Seher, & Anderson, 2015; Livingston et al., 2011; Olsen et al., 2014). Olsen et al. (2014) identified that student veterans do not participate in support programs for a variety of reasons. One reason for not using the support services is that some veterans do not want identified as a veteran. Other reasons include a lack free time or living off campus which make the support services less accessible and convenient to use (Livingston et al., 2011). This grounded theory research conducted by Livingston et al. (2011) also found that student veterans did not typically seek academic support. Instead, the types of support sought by veterans were associated with social components such as family, fraternities, and student organizations, not academic services.

The question of support also spans levels of degree programs. DiRamio et al. (2015) used a mixed-method approach with a sample size of 167 student veterans to explore support among this population. Their findings indicated that lower division undergraduates sought academic support more often than upper division students (DiRamio et al., 2015). The help seeking behaviors regarding both psychological and academic counseling were similar between males and females. Therefore, the issues with support services not only include availability but also the need to encourage students to seek out support. These studies included study participants from a variety of degree programs. Therefore, educators do not know if these same behaviors are true of nursing students. Further research is needed to investigate the lived experiences of student veterans in nursing programs to determine their experience.

Phenomenology

Phenomenology originated from the work of Edmund Husserl (Shosha, 2012). Some consider Husserl as one of the most influential philosophers of the 20th century (Beyer, 2016). Therefore, the foundation of phenomenology lies in philosophy, henceforth analyzing the human experience. Husserl believed that people do not live in isolation. They are impacted by their environment while their environment is impacted by them. Qualitative researchers using phenomenology describe these experiences and interactions that shape a phenomenon as the lived experience. While Husserl is considered the father of phenomenology, his approach to research is considered descriptive phenomenology because it describes what is happening. Other researchers such as Heidegger express the need to move beyond just describing the experience and suggest interpretation of the experience is needed. However, researchers need to first understand the experience and describe the phenomenon.

Descriptive phenomenology provides study insight by capturing the fundamental nature of the experience. According to Polit and Beck (2012), phenomenology requires careful

description of study participant experiences. The descriptions of these experiences include what they hear, see, believe, feel, remember, decide, and evaluate, and how they act (Polit & Beck, 2012). Including these components provides the researcher with a detailed narrative of the lived experience. This description of the experience includes the reality as it is known to the research participants and provides the opportunity to describe their living world. Furthermore, Munhall (2012) identified that researchers must acknowledge the influence of an individual's history, knowledge, and openness. By identifying these factors, one can further understand the participant's experiences.

Husserl believed that the only way to identify the meaning of the lived experience was through a one-to-one interaction between the researcher and the study participant (Wojnar & Swanson, 2007). This interaction requires the use of effective listening skills and a recognized presence by the researcher. In addition to the verbal components of the conversation, observation becomes another essential component of this experience and the data collection. Observation allows the researcher to detect subtle information from nonverbal cues. These cues such as eye contact, hand positioning, and body posture, can relay to the researcher the individual's comfort level while responding to the research questions. Documentation of these gestures is imperative to the research process.

While seeking to describe this experience accurately, researchers needed to eliminate their personal biases to achieve a state of pure consciousness (Wojnar & Swanson, 2007), as these personal feelings and beliefs may influence the description and understanding of the phenomenon. As identified by Munhall (2012), "subjectivity expands and enriches the authenticity of perceptions and understandings" (p. 127). Therefore, it is imperative that the researcher accurately describes what the study participants experience, not what the researcher

perceives is occurring. One approach to facilitate this process suggested by Ahern (1999) involves reflexive journaling. Using a reflexive journal allows the researcher to capture personal feelings, thoughts, and beliefs that emerge from past experiences and can assist in the bracketing process. Furthermore, Tufford and Newman (2010) emphasized that bracketing will enhance analysis by promoting deep engagement with the data and reflexivity by the researcher. Bracketing will allow the researcher to identify the personal opinions and knowledge that may impact data collection and analysis. The researcher's history of prior military service brings these unique experiences to the research, and thus, it is not possible to completely eliminate them. Instead, it is important to understand the impacts and influences of these experiences and to set aside these items during the research process. As identified by Chan, Fung, and Chien (2013), the researchers need to identify the beliefs, values, interests, perceptions, and thoughts that may influence the research process. This increased awareness will enhance the objectivity of the researcher. Therefore, early identification of presumptions during the research process as well as the ability for ongoing reflection throughout data collection and analysis will ensure the data is viewed in a pure form (Polit & Beck, 2012). Furthermore, reflexivity and bracketing will enhance the researcher's ability to identify common features of the lived experience among study participants without bias (Wojnar & Swanson, 2007).

Phenomenology also involves intuiting. Intuiting requires researchers to remain open to the meaning of the experiences by the study participants (Polit & Beck, 2012). The researcher does not question this meaning; the researcher accepts it and attempts to understand it from the study participant's perspective. Additionally, researchers using a phenomenological approach continuously reflect on personal experiences to ensure they are not obscuring data collection or analysis. Actively listening, acknowledging, and observing are paramount to the researcher

remaining open to the study participants' experiences. This openness will allow the researcher to analyze the meanings of these experiences without or with minimal influence of bias. Using both bracketing and intuiting will increase the likelihood of understanding the phenomenon of interest.

Several methods exist as a guide for completing phenomenological analysis. Prominent methods aimed specifically at phenomenology were developed by Colaizzi (1978), Giorgi (1985), and Van Kaam (1966). All three methods of analysis search for common patterns (Polit & Beck, 2012), but each approach has different attributes strengthening its use depending on the context. Giorgi's (1986) approach relies primarily on the researcher. He identified that it is inappropriate to use individuals outside of the researcher to validate the findings (Polit & Beck, 2012). Van Kaam (1966), alternately, relied on intersubjective agreement with other experts on the topic (Polit & Beck, 2012). Colaizzi (1978), a leading phenomenology expert, emphasized the importance of understanding the experience of others. He used a similar approach but diverges by including research participants in the validation of results (Polit & Beck, 2012). Colaizzi's (1978) method of data analysis requires participants validate the interpretations of the themes emerging from the research. By providing research participants with the opportunity to validate findings, the likelihood of full disclosure of their experiences increases. Moreover, findings verification will ensure that their stories are told accurately, because they will have the opportunity to correct inaccuracies or provide further explanation. This honest reflection of feelings and experiences from the respondents will further ensure trustworthiness of the analysis (Shosha, 2012). If information is not clearly or accurately presented, it can misrepresent the phenomenon. Furthermore, including the study participant validation step, Colaizzi's (1978)

method provides the most appropriate framework for data collection and analysis when topics are sensitive. Study participants can ensure their story is told accurately from their perspective.

The Colaizzi (1978) method emphasizes that the lived experience encompasses not only what is inside of the subject but also includes the interaction the subject has with the world and others within it. Furthermore, Colaizzi (1978) identified that “human existence and the world constitute a unity, a unity so vital and basic that either one is absurd and inconceivable without the other” (p. 54). Researchers need to recognize that some concepts are intertwined and cannot be removed from others because they comprise the whole person. Therefore, using phenomenology to conduct the proposed research will assist in identifying how the environment impacts the lived experience.

Phenomenology has effectively been used to describe a variety of lived experiences in nursing and nursing students in diverse situations (Dailey, 2010; Love, 2010; McCalla-Graham & De Gagne, 2015; Sun et al., 2016). These situations span from personal experiences when pursuing their nursing degree to experiences after graduation as new nurses. One phenomenological study described the lived experience of the socialization of African American nursing students (N=8) (Love, 2010). The study participants were African Americans between the ages of 24 and 29 years of age. The National League for Nursing (2014a) found that only 12.8% of the BSN student population identify as African American ethnicity. While this number is higher than the number of student veterans in nursing, it still distinguishes that the African American population is underrepresented in nursing education. Additionally, the students studied in Love’s (2014) research had unique cultural experiences that may have impacted their progression through their degree. Nurse educators need to understand that culture, whether ethnic or social, may impact student success.

The military population also has unique cultural experiences, which using the Colaizzi (1978) method will allow researchers to gather detailed descriptions to assist in understanding the student veteran experience. Love's (2010) research study identified six themes using the Colaizzi method including strength to pursue more, encounters with discrimination, pressure to succeed, isolation and sticking together, to fit in and talk white, and to learn with new friends and old ones. Each of the themes were supported by descriptive quotes obtained from interviews with the study participants. The use of semi-structured interviews revealed information about topics pertinent to the lives of students within nursing programs. Therefore, Colaizzi's (1978) method can assist in identifying the unique experiences of nursing students and student veterans enrolled in nursing programs. Because of the potential sensitive nature of these experiences, the validation step encourages students to communicate with the researcher because they are able to identify discrepancies or omissions that would not be readily identified using other data analysis methods.

Like Love (2010), Sun et al. (2016) also used semi-structured in-depth interviews in their phenomenological study. This method of data collection is similar to the proposed method for the current research study. Using Colaizzi's data analysis methods, these researchers explored the lived experience of anxiety of nursing students (n=15) during their first clinical practicum (Sun et al., 2016). These study participants provided personal information regarding their experience, revealing themes about how the environment influenced their anxiety. Evidence of this included feelings of anxiety associated with their first clinical experience, their anxiety reactions in response to clinical experiences, and how they coped with the anxiety. Sun et al. (2016) provided a clear description of the phenomenon of interest: anxiety. The researchers in this study reached data saturation after 15 interviews. As mentioned previously, student veterans

experience stress and anxiety in higher education. Therefore, using the Colaizzi (1978) method will allow the researcher to gather information related to these topics while ensuring accuracy by the study participants.

Researchers must create an atmosphere conducive to open communication. Open communication is imperative when attempting to describe a phenomenon. As seen previously, study participants are willing to discuss sensitive topics when the Colaizzi (1978) method is used. A phenomenological study conducted by Dailey (2010) researched the lived experience of 10 chronically ill nursing students between the ages of 20 and 31 years. This age range is like that of the military population entering higher education. Furthermore, nursing students in Dailey's (2010) study were willing to discuss health concerns. Using Colaizzi's method for data analysis, theme clusters were identified. The themes included the need to be normal, dealing with the behavior of others, enduring illness restrictions, and learning from their own experiences to care for others. The descriptions provided by the study participants helped enhance the understanding of the experience of students with chronic illness. Many student veterans experience physical as well as psychological difficulties following combat as discussed previously. Therefore, the population under study is similar regarding problems that student veterans may experience. These potential problems emphasize the importance of educators need to understand the lived experience of student veterans. Therefore, using Colaizzi's method will allow the study participants to describe these experiences both in reference to their military career and their current nursing program.

Additionally, the use of phenomenology and Colaizzi's (1978) method can also allow researchers to explore other professional transitions such as the experience of new graduate nurses. McCalla-Graham and De Gagne (2015) explored this transition and found three themes

centered around the experiences of new nurses including knowledge, skills, and environment. The study participants (N=10) in this study ranged from 22 to 56 years of age. As discussed, the information gained from studies using the Colaizzi (1978) method revealed feelings and experiences of the study participants. They provide insight into their experience with their current environment.

A few other studies involving the military population also use phenomenology and Colaizzi's method for data analysis. For example, Doherty and Scannell-Desch (2012) explored military nurses' (n=24) health and hygiene experiences during deployment using a phenomenological approach. Doherty and Scannell-Desch (2012) identified that "many participants expressed appreciation at the opportunity to verify the interview content and field note observations and to clarify their words and meanings" (p. 173). In this study, seven themes, all of which involved personal topics, emerged. The researchers used detailed descriptions that resulted from the semi-structured interviews to support the themes identified. Additionally, they identified that data saturation was reached.

An additional example of the use of phenomenology for veterans includes a study of the reintegration experiences of military nurses following the Iraq and Afghanistan wars (Doherty & Scannell-Desch, 2015). The study revealed feelings and experiences with reintegration of 35 nurses. The participants' descriptions provided vivid details that gave the researcher a realistic picture of the experience. The themes that emerged included renegotiating roles, homecoming, painful memories of trauma, needing a clinical change of scenery, low tolerance with complaints, and support presence. Their willingness to describe these events emphasizes the importance of this form of research within the military population. The previous research discussed supports that when military personnel are provided with the opportunity to validate the findings they seem

more forthcoming with their responses. To better understand the veteran population, the researcher needs student veterans to express their thoughts and feelings without reserve to gain a true description of this experience.

Another phenomenological study conducted by Scannell-Desch and Doherty (2010) was comprised of 37 male and female military nurses. Using Colaizzi's (1978) method, the researchers arrived at seven themes illustrating the experiences of these military nurses. While these three phenomenological studies were conducted by the same researchers, the samples consisted of different study participants (Doherty & Scannell-Desch, 2015). Therefore, the willingness of these 96 veterans to participate in these phenomenological studies supports the assumption that veterans will discuss their lived experience and share their personal accounts of their experiences.

As seen in the aforementioned studies, Colaizzi's (1978) approach provides researchers with the opportunity to describe the lived experience of both nursing students and military personnel. The studies had a wide range of ages and include male and female participants. They all supported their findings with thick, rich descriptions and identified that data saturation was obtained. Furthermore, phenomenology and Colaizzi's (1978) method were used to obtain information including sensitive topics, such as illness and anxiety, role transition, cultural considerations, and the impact of the military experience. Sensitive topics such as these may directly impact student veterans in higher education. Therefore, Colaizzi's (1978) method is an appropriate approach for data gathering that will enable the researcher to collect descriptions of the lived experience of BSN student veterans.

Summary

Student veterans are a highly diverse population. As seen in the literature, many concerns arise regarding the reintegration of student veterans into higher education. These concerns span from individual feelings of isolation and alienation (Durdella & Kim, 2012; Elliott et al., 2011; Graf et al., 2015; Hammond, 2013; Naphan & Elliott, 2015) to inadequate support systems available at the institution level (Barnard-Brak et al., 2011; Graf et al., 2015; Jones, 2013). Also prominent within the literature is the need to address health concerns plaguing this population including physical, mental, and emotional health (Graf et al., 2015; Young, 2012). The literature pertaining to student veterans focuses on academia in general and not specific disciplines or majors. An identified gap in the literature includes the experiences of student veterans in nursing programs. Differences exist between nursing programs and other programs of study in academia. Within BSN programs, students participate in clinical experiences combined with their coursework. Therefore, educators cannot assume the nursing student experience is like other degree programs for student veterans. The use of phenomenology for data analysis will provide thick, rich descriptions about the lived experiences of student veterans in HRSA supported nursing programs. The use of Colaizzi's (1978) method for findings validation will enhance the veracity of this study.

CHAPTER THREE

METHODOLOGY

This chapter will provide an overview of the research design and methodology of the phenomenological study conducted. This overview will include the background of phenomenology as well as the rationale for choosing this method of research. The sample, setting, and procedural steps including methods for maintaining rigor and protecting human subjects are also discussed.

Introduction and Background

This research study used descriptive phenomenology as a framework for completion. This design allows researchers to identify a phenomenon based on how the study participant experiences them. One must describe “things” as people experience them, including “hearing, seeing, believing, feeling, remembering, deciding, evaluating, and acting” (Polit & Beck, 2012, p. 495). A descriptive phenomenological research approach provided the researcher with insight into the lived experience of student veterans enrolled in baccalaureate nursing programs at HRSA grant funded and/or Military Friendly® institutions. Current literature does not describe the experience of student veterans in baccalaureate nursing programs. Moreover, descriptive phenomenology allowed study participants to express feelings and thoughts regarding their experience. Therefore, phenomenology provided an in-depth description of the student veteran experience.

Additionally, phenomenology requires a direct interaction with research participants, which typically occurs through interviews. Using the interview process allowed individuals to voice their perspective regarding their nursing program experience. Phenomenology provides the richest, most descriptive data regarding this experience (Polit & Beck, 2012). While the tenets of

descriptive phenomenology provide an appropriate framework for describing the study participants' lived experience, they also assist in eliminating potential bias from researcher previous experiences. In this case, the researcher has previous military experience, which may bias the analysis process. To ensure bias is not present, the researcher used bracketing. Bracketing will allow the researcher to maintain a sense of caution and requires he or she to be cognizant of the impact bias can have when making sense of the data (Wojnar & Swanson, 2007). The bracketing process requires the identification of researcher preconceptions prior to beginning the analysis phase of the research process. For example, the researcher has been in contact with military personnel post-combat and experienced both positive and negative events. In some instances, the outcome has been positive for the military member; however, others have not been so positive. By identifying potential bias, the researcher becomes aware of the need to recognize that every situation is different. Additionally, every individual is different. The researcher must enter the analysis process with an open-mind to ensure appropriate data analysis and not allow the preconceptions lead the researcher to false analysis. By identifying areas of bias, the researcher will remain open to the data.

The researcher used reflexive journaling to document the bracketing process. Reflexive journaling allowed the researcher to take notes regarding interests, clarification of values, identification of areas of bias, and recognition of personal conflict. Additionally, the researcher used reflexive journaling to describe unexpected findings as well as reflect between the findings and the literature reviewed (Ahern, 1999).

While previous military experience may lead to preconceptions, it also provides the researcher with an understanding of the military population other researchers may not have. The researcher has experienced veterans returning from combat, veterans going to combat, and

veterans with past combat experience. Additionally, the researcher has experienced military training and understands the military mindset, including the values and beliefs associated with this experience. Much of the current literature was completed by individuals with no military experience, which could impact their understanding of the data gathered. Therefore, previous military experience may provide bias, but it also may strengthen the study. As with any culture, it is important to know the values and beliefs that are engrained in the culture. To experience the military culture provides a unique vantage point compared to those who have no previous knowledge.

Another important component of descriptive phenomenology is intuiting. Intuiting refers to the need to remain open to research findings and the meaning of the experience as identified by the study participant (Polit & Beck, 2012). Previous military experience will help the researcher to remain open and will assist in understanding the military population. Because of the experiences of some combat veterans, other researchers may become distracted or overwhelmed by descriptions or troubling experiences. Entering the research with an understanding of the military impact can help to stay focused and open during the interview. The researcher provided the student veteran the opportunity to tell their story without inhibition.

In addition to being open to hearing the student veteran experience, the use of open-ended questions allowed participants the opportunity to tell their complete story. The researcher seeks to understand the story of student veterans in baccalaureate nursing programs. Allowing student veterans to tell their story provided the researcher with individual perspectives. Student veterans can explain the influence of previous military experience, educational resources, and the nursing program rigors on their education experience. In addition, they can describe their thoughts and feelings regarding their experience within their nursing program. Furthermore, the

researcher can use this information to provide a description of the phenomenon of interest, the lived experience of student veterans in institutions designated as supportive of military personnel including NEPQR: VBSN programs and/or a Military Friendly® designation. This description can assist nurse educators in understanding the needs of this unique population of students.

Sample

A purposive sampling approach was used to obtain study participants for the research study. According to Polit and Beck (2012), a purposive sample provides the researcher with study participants that provide the most benefit to the study. The researcher attempted to achieve a diverse sample using nursing programs with NEPQR: VBSN funding and/or Military Friendly® designation. Variation in program characteristics regarding location of degree programs including rural versus urban was sought. Additionally, variation regarding student demographics and degree program resources was present. The sample was chosen based on specific inclusion and exclusion criteria.

The inclusion criteria for this research study included:

- Full time enrollment;
- enrollment in either a HRSA grant NEPQR: VBSN funded program and/or a Military Friendly® institution;
- previous active duty experience. Active duty experience will include mobilization during Operation Iraqi Freedom, Operation Enduring Freedom, or Operation New Dawn for a minimum of 90 days;
- 18 years of age or older;
- English speaking; and

- completion of at least one entire semester of nursing courses in the baccalaureate nursing program.

The exclusion criteria included:

- Part time enrollment;
- non-English speaking;
- less than 18 years of age;
- no previous mobilizations during Operation Iraqi Freedom, Operation Enduring Freedom, or Operation New Dawn;
- no previous active duty experience; and
- has not completed at least one semester in the baccalaureate nursing program.

The sample included 11 study participants from five different baccalaureate nursing programs that had either HRSA grant funding and/or were designated as Military Friendly®. The researcher strived to have a diverse representation including institutions that were in rural and urban settings. Furthermore, including institutions of varying sizes assisted in meeting this goal. Study participants were sought until data saturation was reached.

The researcher obtained a list of institutions that received the HRSA grant NEPQR: VBSN from an internet search. The researcher used this list to access websites for institutions located in the eastern United States. This eastern location provided a reasonable travel distance for the researcher. The researcher contacted the grant program directors for the identified programs. After initial contact, the researcher sent the grant program director an email (Appendix C) requesting student veteran participation in the research study and requested distribution of the email to potential study participants. This email identified the study purpose, inclusion and exclusion criteria, and anticipated time required to participate in the study.

Additionally, the researcher provided contact information within the email, including her name, phone number, and email address.

In addition to the HRSA grant funded institutions, the researcher obtained a list of institutions designated as Military Friendly® from the Military Friendly® website. The researcher contacted personal and professional associates at these institutions to request they disseminate the participation flyer (Appendix D) to student veterans within their academic programs. Student veterans interested in participating were instructed within the flyer to contact the researcher using either email or phone. Providing the contact information allowed study participants to contact the researcher with questions or concerns regarding the study. Once initial contact was made, and verification of meeting inclusion criteria was completed, the researcher set up interviews with the first respondents from each institution. The researcher worked with study participants to determine a mutually agreeable time and place to meet for the interview. The researcher sent a reminder email regarding the meeting time and place one week prior to the interview and again one day before the meeting.

At the mutually agreed upon meeting, the researcher began the interview by verbally reviewing the informed consent and allowing time for the study participant to ask questions. Once all questions were answered, the researcher and study participant signed the informed consent (Appendix E). A written copy of the informed consent form was provided to the study participant. After providing consent, the researcher asked the study participants the demographic sheet questions (Appendix F). Following completion of this form, the interview began.

Setting

The semi-structured interviews were conducted at the student's institution. To ensure confidentiality, space was reserved at each institution outside of the nursing department when

available. Completing the interviews at the institution facilitated the ability to contact campus counseling services if they were needed. Because of the potential sensitive nature of the research study, the researcher ensured that campus counseling services were available. Prior to beginning the research study, the researcher contacted the counseling services on campus regarding availability during the research study. This collaboration with institutional resources ensured a safe environment for the participants. Follow-up interviews conducted for clarification purposes occurred using telephone communication. The researcher recommended that the study participant be alone in a private location during the follow-up interviews. Furthermore to ensure privacy, the researcher was in a room alone during the follow-up interviews.

Procedures

Institutional Review Board (IRB) approval was sought from Indiana University of Pennsylvania (IUP). Initial approval provided was IRB approval pending site approval (Appendix A). Following this approval, the researcher used two recruitment strategies to obtain the study sample. The initial strategy included HRSA grant NEPQR: VBSN funded programs. The second strategy focused on institutions designated as Military Friendly®.

Initial recruitment efforts focused on HRSA grant-funded baccalaureate nursing programs. Once IRB approval was obtained (Appendix A), the researcher initially contacted baccalaureate nursing programs that received the HRSA grant NEPQR: VBSN funding in the Eastern United States. The programs were chosen based on location, with the intent to obtain two institutions in rural locations and two in urban locations. To identify the willingness to participate, the researcher located the grant program directors' contact information using Internet searches. Then, the researcher contacted the grant program directors for the nursing programs by telephone and email. The contact information for these individuals was usually available on the

nursing program websites. If this information was not available, the researcher contacted the institution directly to obtain a point of contact for the HRSA NEPQR: VBSN grant program director. After the grant directors agreed to assist in the research study, the researcher contacted the counseling center on campus to ascertain the process for providing additional psychological support if needed during or after the interview. This point of contact was established because discussing previous military experiences may stimulate memories of traumatic experiences that may create a psychological response requiring additional support. The researcher obtained contact information for an appropriately trained counselor at the campus site. The researcher initially requested site approval from each potential institution. Some institutions required additional IRB approval. The research sought IRB approval at these institutions and once received, it was used to obtain final IRB approval at IUP. Once final IRB approval was obtained from IUP, the researcher communicated with the point of contact (POC) regarding potential study participants and recruitment.

The POC was contacted by telephone and/or email to request that he/she forward the information about the research study via email to potential study participants (Appendix C). The researcher also emailed the POC the inclusion and exclusion criteria to ensure only applicants meeting the criteria were contacted. The researcher requested that interested recipients contact her by email or telephone regarding their desire to participate in the research study. Once contacted, the researcher also requested student contact information to arrange an interview meeting time and place. If after two weeks the response rate of interested participants was less than three at an institution, the researcher requested that the POC forward the email again to potential study participants.

In addition to HRSA grant funded institutions, the researcher identified colleges and universities that were designated as Military Friendly®. Upon approval from the IRB at IUP, the researcher reached out to personal and professional contacts at these institutions to assist in dissemination of the research participation flyer (Appendix D). Within the research participation flyer, potential research participants were instructed to contact the researcher to participate via email or telephone. Prior to conducting the interviews, the researcher obtained information about the counseling services at the student veterans' institutions regarding availability of counseling if needed. The researcher provided this information to study participants at the start of the interview.

Once the researcher was contacted by the potential study participants, she verified that they met the inclusion and exclusion criteria. Prior to conducting the interviews, the researcher collaborated with the institution to find a room to conduct the interviews to ensure privacy for the study participants. Additionally, during the initial conversation with participants, the researcher and study participant identified a mutually agreeable meeting time. All study participants were met during the same week and between the hours of 8 a.m. to 5 p.m. This time frame increased the availability of institutional counseling services during the interview. At some institutions, the researcher had a two-day data collection period while at others it was one day. This time frame depended on the number of interviews scheduled.

Prior to conducting the interviews, the researcher compiled a reflexive journal. Within this journal, the researcher identified potential areas of bias for bracketing. The researcher also documented observations about the institution's environment. These observations included but were not limited to location of the institution, bulletin board announcements regarding veteran services if within proximity of the meeting place, and veteran resources available. Upon arrival

and after introductions with the study participants, the informed consent was reviewed in detail and discussion of the risks and benefits occurred. The researcher reviewed the inclusion and exclusion criteria and provided the opportunity for study participants to ask questions regarding the study. Study participants were also made aware of their ability to withdraw from the research study at any time without penalty or fear of negative consequences. The researcher also informed the study participants that the interview would be recorded. Upon conclusion of this discussion of the study and answering any participant questions, the study participants signed the informed consent.

Once the informed consent was signed, the researcher asked the study participants the questions on the demographic questionnaire. Information gathered on this questionnaire included age, race, gender, branch of service, area of mobilization, number of times mobilized, number of years in the military, current semester enrolled in the nursing program, and number of years in college prior to pursuing their nursing degree (Appendix F). Following this demographic data collection, the researcher began the semi-structured interview. For confidentiality reasons, study participants were asked to supply a fictitious name to use for reporting purposes. They were instructed that the name should not be a nickname, alias, or a surname they are associated with to maintain confidentiality. Open-ended questions were asked with prompts regarding the lived experience of student veterans in baccalaureate nursing programs (Appendix B). The interview lasted approximately 30 to 60 minutes and was audio recorded following approval by the study participant. Upon completion of the interview, the researcher provided the study participant with a \$15 gas card. Additionally, the research participants received a \$5 gas card upon completion of the verification of findings phone call. This gas card was mailed to the participants.

The researcher also used reflexive journaling to write down notes and observations made during or immediately upon concluding the interview. Additionally, within the journal, the interviewer documented potential biases, thoughts, and feelings. More specifically, the researcher notated the nonverbal reactions of the study participants. This information assisted in the analyzing of data. Verbatim transcription occurred using the audio recorded interview. This transcription occurred within one week of completion of the interview. This immediate immersion allowed the researcher to appropriately note observations made during the interview. To ensure interview transcription accuracy, the primary researcher recorded, listened, and re-listened to each interview. Following the transcription, the researcher reviewed the transcript and compared it to the audio recording to ensure accuracy of the content.

The researcher contacted the study participants if she had additional questions or clarification was needed during the data analysis process. The researcher contacted nine of the study participants for follow-up interviews via email. Of these nine, only six study participants completed the follow-up interview. These interviews occurred by phone and were also recorded and transcribed. As new information was obtained, the researcher continually reviewed the data. Upon completion of transcription, data analysis began. Data analysis for this research study used the Colaizzi (1978) method. This method consists of seven steps including:

1. Read all study participant descriptions to acquire a feeling for them. The researcher read and reread each of the study participant transcripts. This process afforded the researcher a general impression of the content.
2. Return to each study participant description and extract phrases or sentences that pertain to the investigated phenomenon.

3. Attempt to describe the meaning of each significant statement. The researcher strived to formulate meanings in connection with the study participant descriptions. This step requires the researcher to gain insight into what the study participants are revealing through their statements.
4. Organize the formulated meanings into clusters of themes. The researcher referred to the original study participant descriptions (step 2) to validate the clusters of themes. This step requires the researcher to verify that the themes do not go beyond what is identified in the original phenomenon description. The researcher is constantly reflecting between the original study participant descriptions and the identified themes to ensure data or themes are not missed.
5. Develop an exhaustive description of the investigated topic. An exhaustive description was provided for each theme with supporting details from the study participant descriptions.
6. Use the exhaustive description to create a statement of identification for the phenomenon. This step requires that the phenomenon of interest is described. All redundant, misused or overestimated descriptions are removed from the exhaustive description to generate clear relationships between the themes (Shosha, 2012).
7. To validate the findings, return to the study participants for review of the study findings. Validation required study participants to compare the researcher's phenomenon descriptions with their experience (Colaizzi, 1978).

Once data analysis was completed, the researcher contacted the study participants to share the preliminary findings. The researcher scheduled a phone meeting time to review the thematic summaries with the study participants. During this conversation, the researcher

discussed the findings and requested input from the study participants regarding the accuracy of the results compared to their experience. As identified in Polit and Beck (2012), not all study participants may be willing to participate in this follow-up member checking process. The researcher contacted all study participants and achieved a 54.5% participation rate during the member checking process. During this process, study participants were encouraged to provide a critical review of the content presented. Documentation of study participant reactions through notes and commentaries occurred in the researcher's reflexive journal. This documentation was reviewed to further assist with analysis and theme revision as needed.

Rigor

Phenomenology requires a holistic strategy for interpreting the narrative context of the data (Polit & Beck, 2012). This process required immersion by the researcher in the data. Initial immersion occurred through the researcher's presence in the study participants' environments, the college or university campus. Once the interview began, as identified by Colaizzi (1978), the researcher listened for speech variations and identified gestures made during the interview. Furthermore, Colaizzi (1978) identified the importance of the researcher being completely present with the study participant. This completeness required the presence of the researcher with the "entirety of his personality" (Colaizzi, 1978, p. 64). The researcher entered the interview with an open mind. To accomplish this, the researcher bracketed bias and entered without preconceived thoughts or feelings regarding the lived experience of student veterans. Prior to beginning the research process, the researcher performed the following steps associated with reflexive journaling:

1. Identified assumptions related to the research proposed such as gender, race, socioeconomic status of study participants. This required the researcher to consider the

power associated with the research project. These notes included items the researcher may take for granted.

2. Clarification of the researcher's value system and acknowledgment of areas of subjectivity. This clarification assisted in identifying areas of bias.
3. Identified potential role conflict areas. This required consideration regarding individuals the researcher is in contact with and spanned to potential problems with publishing the results.
4. Identified individuals that may impact the research, either favorably or unfavorably. This step helped to decrease conflict and anxiety within the research environment enhancing neutrality (Ahern, 1999, p. 408-409).

These steps set the framework for bias recognition and elimination when possible. Once this process was complete, the researcher began the interviews. During the interviews, the researcher encouraged the study participants to provide details about their story. She asked probing questions about their experiences in both the military and academia. Throughout the interview, the researcher listened attentively and documented observations about the study participants' responses in the reflexive journal. The researcher took these steps to ensure she was describing what occurred during the interview, not what she thought was happening. Colaizzi (1978) also identified the importance of immersion to seek understanding of the phenomenon. The constant revisiting of the data ensured immersion occurred. The research continued using the following steps identified by Ahern (1999) for reflexive bracketing during data collection:

5. Recognition of feelings that lack neutrality. Avoidance of negative situations is a potential example of this. The research immersed herself in the interview. When feelings

that lacked neutrality occurred, the researcher reflected back on the original notations in the reflexive journal.

6. Described new or surprising findings from the data collection or analysis. If this did not occur, then the researcher would have had to evaluate if data saturation was met or if the researcher was blocked or desensitized.
7. Identified methodologic problems if they occurred. The researcher should reframe them and determine how they can be used (Ahern, 1999, p. 409).

Using the reflexive journaling techniques identified, ensured that the researcher reflected adequately and accurately on the data. The aforementioned steps assisted in limiting the impact of researcher bias on data collection and analysis.

Additionally, the use of the framework of Whittemore, Chase, and Mandle (2001) acted as a foundation for maintaining the integrity of the study. All identified criteria required constant self-evaluation throughout the data collection and analysis processes, which correlated well with Colaizzi's (1978) method. Whittemore et al's (2001) framework includes four primary criteria: credibility, criticality, authenticity, and integrity. Criticality required the researcher to examine biases, continually reexamine findings, and recognize and explore ambiguities (Whittemore et al., 2001). Within the study, the researcher followed-up with the study participants with questions to clarify the content further. Also, prior to data immersion, the researcher identified her biases regarding the expectations of the study using bracketing. Furthermore, during the data collection process, the researcher documented any additional identified biases using reflective journaling.

Another primary criterion, integrity required that "the interpretation is valid and grounded in the data" (Whittemore et al., 2001, p. 531). To maintain the integrity of the study, repeated

checks of the data occurred. This ongoing evaluation occurred after analysis of the initial interview, comparing with each follow-up interview, and upon completion of all interviews. Integrity requires critical reflection. The researcher critically reflected upon the themes garnered from each interview. It is imperative that the researcher was self-critical and sought integrity during each phase of the research process (Whittemore et al., 2001). The use of a codebook assisted in the critical reflection process and for recording decisions that were made. In addition to integrity, credibility required constant reflection on the data to verify the interpretation achieved was accurate (Whittemore et al., 2001). Using evidence to support the interpretation represents one way to maintain credibility. Also, a detailed presentation of the findings provided further credibility of the interpretation. Using Colaizzi's (1978) method, the researcher developed exhaustive descriptions of the themes based on data analysis. These exhaustive descriptions provided the foundation for interpreting the data and developing the statement of identification of the phenomenon. The last primary criteria, authenticity, required the researcher to establish a realistic representation of the information obtained (Polit & Beck, 2012). Through authenticity, readers can better understand the experiences of the study participants. To accomplish this, the themes included direct quotes from the participants and notations obtained from observations during the interviews.

Whittemore et al. (2001) also identified six secondary criteria: explicitness, vividness, creativity, thoroughness, congruence, and sensitivity. Explicitness provided the opportunity for one to follow the decisions and interpretations made by the researcher (Polit & Beck, 2012). A detailed audit trail and meticulous maintenance of the data collected during the interview process, such as retaining audio tapes and reflexive journaling, supported explicitness in the review process. Another secondary criterion, vividness, required the presentation of rich data

from which themes developed (Whittemore et al., 2001). The provision of detailed documentation provided readers with the ability to see the experiences of the study participants. In addition, the descriptions provided by the study participants enhanced understanding of the phenomenon. Thirdly, creativity required innovative approaches to analyze and interpret data (Polit & Beck, 2012). The researcher viewed the results from multiple perspectives to ensure consistency in the themes obtained. These multiple perspectives were used to view the results included as a student, a faculty member, and previous military experience.

Thoroughness, another secondary criterion, refers to the “attention to the connection between themes and full development of ideas” (Whittemore et al., 2001, p. 532). The researcher immersed herself completely in the data to ensure that all themes were identified. Data immersion included reading and rereading the transcripts, coding and identifying themes, creating exhaustive descriptions, reflexivity, and integration of findings into a statement of the phenomenon (Polit & Beck, 2012). Also, the researcher collected data until repetitive themes presented themselves. To validate the themes, the researcher continued to conduct interviews until data saturation was obtained. Implementing procedures for thoroughness led to an opportunity for congruency. Congruency refers to the appropriateness of the method, research question, findings, process involved in data collection and analysis, and practice (Whittemore et al., 2001). To ensure congruency, prior to embarking on the study, the researcher had a subject matter expert review the interview questions identified for the study. Additional measures to confirm congruency include reflexive journaling, searching for confirming evidence, and the provision of thick vivid descriptions of the data (Polit & Beck, 2012). Last, sensitivity refers to the sensitive nature of implementing the research study with consideration for cultural, human, and social differences (Whittemore et al., 2001). These items were considered throughout the

data collection process as well as the description of the results. To safeguard these considerations, the researcher participated in prolonged engagement with the data and persistent observation of the study participants and their environment (Polit & Beck, 2012). Additionally, the researcher used thick, vivid descriptions from the study participants to adequately describe the lived experience of student veterans (Polit & Beck, 2012). To validate the findings, the researcher reviewed the identified themes with study participants. Also, consideration for human dignity and respect for the research study participants and their experiences occurred throughout the study.

Mechanisms for ensuring human dignity and respect began at the start of the study. The researcher ensured full disclosure of the study. Full disclosure required the researcher to fully describe the study, honor the person's right to refuse to participate, and clearly articulate the risks and benefits of participating in the research study (Polit & Beck, 2012). Additionally, the research participants had the right to self-determination. The researcher ensured that study participants were not coerced to participate in the research study. Therefore, the monetary reward associated with participating was small. The researcher also ensured that study participants' privacy was maintained. The interviews were held in private locations that did not allow others to hear the contents of the interview. Additionally, the transcription process as well as follow-up phone calls were completed in a private location. All study information was maintained on a secured password protected computer. All study participants' identifying information was removed prior to dissemination of the research findings. Furthermore, the researcher obtained IRB approval prior to completing the research study.

Human Subjects Considerations

IRB approval was obtained from Indiana University of Pennsylvania and then subsequently at each participating institution as required prior to completing the semi-structured interviews. IRB approval supported the protection of human subjects participating in the research study. All study participants were required to sign an informed consent (Appendix E). Included within the informed consent were the maintenance of confidentiality of the information obtained and a confidentiality statement. All informed consents will be retained for three years following the completion of the research study as mandated by federal law. Each participant provided a name they would prefer to use as an alias for data reporting. The name served as the primary tracking tool for the review process. The only individual with access to the participant's identity, including contact information for follow-up, was the researcher. Furthermore, to maintain confidentiality, the data is maintained in locked file cabinets, and password protected computer files. Upon completion of the data analysis process, all contact information was destroyed.

Regarding study participants' benefits, study participants received a \$15 gas card for initial participation in the study and an additional \$5 gas card for completion of the findings verification phone call. Monetary reimbursement was an anticipated benefit for the study participant. One identified risk of participating in this research study included the potential emotional impact of the interview. Prior to conducting the interviews, the researcher coordinated with counseling services on campus to assist in the event a concern arose. The student veterans were asked questions regarding their lived experience in baccalaureate nursing degree programs. As seen in the literature review, student veterans with previous military deployments have an increased risk of PTSD. In addition, some have identified increased anxiety and depression as concerns. Because of these, it was imperative to have support staff available. If a situation arose

where a counselor was needed, the researcher would have contacted the counseling services POC as identified previously. Furthermore, all study participants were given a handout with available support services at their institution. The researcher used ones that were already created by the institution.

Summary

This chapter described the descriptive phenomenological approach as the method of inquiry for this research study. Additionally, the Colaizzi (1978) method was discussed in reference to its use for data analysis. The rigor associated with this analytical approach combined with the framework provided by Whitemore et al. (2001) ensured trustworthiness of the data collection and analysis process. Furthermore, descriptive phenomenology provided the researcher with an exhaustive description of the lived experience of student veterans in baccalaureate nursing programs. In addition to the description of the methodological approach, the sampling method, setting, data collection procedures, and protection of human subjects were discussed to provide the reader with a clear understanding of the process used to obtain the results, which will be discussed in Chapter Four.

CHAPTER FOUR

FINDINGS

The previous chapters discussed the rationale for conducting this research, the literature currently available regarding student veterans in academia, and the methodology used to complete this qualitative research study. This chapter presents a description of the sample and a detailed description of the resultant themes. These themes are in response to the research question “What is the lived experience of student veterans enrolled in nursing programs at institutions identified as supporting military including both HRSA grant funded Nursing Education, Practice, Quality and Retention: Veterans’ Bachelor of Science Degree in Nursing programs and/or nursing programs located in institutions designated as Military Friendly®?”

The data collected using semi-structured interviews was analyzed using the Colazzi (1978) method. The interviews were recorded and transcribed verbatim. Data analysis began as interviews were completed. At the completion of data analysis, study participants were contacted to review the findings and verify the accuracy in describing their experiences. The resultant themes included the following: acclimating to the college culture, shift in the thinking paradigm, using resources to facilitate progress, reestablishing a sense of community, expression of leadership attributes, and determined to succeed.

Sample

The sample consisted of eleven students with previous active duty military experience from five different institutions. The institutions participating in this research study had either HRSA grant funding under the NEPQR: VBSN program or were identified as Military Friendly®. All study participants were actively enrolled as full-time students in baccalaureate nursing programs with the completion of at least one semester of nursing courses. The study

participants were primarily male (90.9%) and between the ages of 27 and 42 with the average age of 34. A diverse racial background was noted of the study participants. Within the sample, the study participants identified as white (63.6%), African American (27.3%), and Pacific Islander (9.1%). Additionally, the study participants were from three different branches of service including Navy (54.5%), Army (36.4%), and the Air Force (9.1%). The number of years in the military ranged from 6.5 to 22 with an average of 12 years. Of the study participants, two retired from their branch of service (18.2%) while seven had 10 years or less of military experience prior to separating from service (63.6%). The remaining two student veterans (18.2%) were still active reserve unit members from their branch of service. One of which currently had 22 years of service and the other had 10 years of service.

In addition to the number of active years in the military, the study participants rank was also collected. Within each branch of service is a hierarchical rank structure with a starting rank of E-1 (National Center for PTSD, 2012). The E indicates that the individual is enlisted in the respective branch of service. In the Army and Air Force, an individual with the rank of E-4 is considered a junior non-commissioned officer and ranks of E-5 and above are considered non-commissioned officers (National Center for PTSD, 2012). In the Navy, the rank of E-5 is equivalent to a non-commissioned officer but is called a petty officer second class (National Center for PTSD, 2012). Of the study participants, ranks included E-4 (9.1%), E-5 (45.5%), and E-6 (45.5%).

Also collected was information regarding number of completed nursing semesters. The study participants completed a range from one to five semesters with one (9.1%) completing only one semester, five completing two semesters (45.5%), three completing three semesters (27.3%), one completing four semesters (9.1%), and one completing five semesters (9.1%). The

individual completing their fifth semester was graduating from the program in which they were enrolled. To maintain anonymity during the research process, all study participants chose pseudonyms that were used for reporting purposes. Table 1 below provides further demographic information.

Table 1
Study Participant Demographic Information

Study Participant Pseudonym	Age	Gender	Race	Branch of Service	# of Years in Military	Military Rank	# of Completed Nursing Semesters
Blade	27	Male	African American	Air Force	7.5	E-5	2
Five	31	Male	Pacific Islander	Navy	8	E-5	3
Bobby*	27	Male	African American	Navy	10	E-6	3
Jason	42	Male	White	Army	9	E-6	1
Gwen	30	Female	White	Army	6.5	E-4	2
Todd	33	Male	White	Navy	10	E-6	2
Jack	42	Male	White	Navy	20	E-6	3
Max	41	Male	White	Army	22	E-6	2
Socrates*	42	Male	White	Army	22	E-5	5
Wakanda	32	Male	African American	Navy	7.5	E-5	4
Phil	31	Male	White	Navy	10	E-5	2

Note. * = Study participants with an asterisk denotes they are still in a reserve component of the military.

Inclusion criteria for this study required the study participants be active duty with a mobilization during Operation Iraqi Freedom, Operation Enduring Freedom, or Operation New Dawn. All study participants were mobilized at least once during their military careers during either Operation Enduring Freedom, Operation Iraqi Freedom, or Operation New Dawn. Exceptions to this were Five and Jack, who were mobilized twice, and Gwen, Todd, and Max, who were mobilized three times. In addition to their combat experience, the student veterans alluded to their military training within their branch of service. All of the study participants with the exception of one completed military medical training and spent their military career as either a Navy corpsman, an Army medic, or an Air Force Medical Service Technician.

The demographics of the study participants varied from that of typical BSN students. According to the NLN (2014c), only 18% of the BSN student population were over the age of 30. Within this study, nine (81.8%) of the study participants were over the age of 30. Additionally, only 15% of the students enrolled in BSN programs were male (NLN, 2014b) where conversely the sample for this study consisted of a 90.9% male population. Also, the sample was more racially diverse (36.4%) than the current nursing student population (28%) (NLN, 2014a).

Themes

The semi-structured interviews conducted with this diverse population yielded six themes. The themes are as follows: acclimating to the college culture, shift in the thinking paradigm, using resources to facilitate progress, reestablishing a sense of community, expression of leadership attributes, and determined to succeed. Each of these themes will be discussed in detail and reported with descriptions from the study participants.

Acclimating to the College Culture

Many of the study participants discussed concerns and issues regarding their movement from the military to the college culture. During this acclimatization period, they were learning to balance family, school, and, in some cases, work, while also adjusting to the college culture. Additionally, several of the study participants alluded to the fact that they lived off campus, which further impacted the socialization that occurred within the college environment. While these factors impacted the student veteran's acclimatization, the differences in culture were most prominent. Some felt, as was in Blade's case, that the civilian college environment combined with their military background felt like "two worlds at battle." Blade was in the Navy for over seven years and was enrolled in his second semester of nursing courses. He enrolled in his nursing courses soon after his departure from the military, which resulted in a recent culture shift from military to civilian life. This culture shift was impacted by multiple factors leading to the development of the subthemes, peers and academia. The concerns regarding peers focused on their maturity level, behaviors, and differences regarding meeting expectations. These factors had a direct impact, especially during initial entry, on the student veteran's ability to relate to their nonmilitary peers. In addition to issues with peers, student veterans had difficulty acclimating to academia in general. Student veterans are moving from a regimented culture to one that is more fluid. Additionally, they identified the difficulty knowing faculty expectations and knowledge of resources available. In addition to these concerns, some had difficulty with the initial entry into college and others with entry into the nursing program. The culture between these two worlds, college and the military are different. Not only are student veterans acclimating to the students and faculty, but they are acclimating to the expectations of academia.

Peers. The study participants discussed ongoing difficulty relating to peers within their nursing programs. In some instances, this was related to age and maturity level, while in others it was associated with peer behaviors. With differences in age, the student veterans identified differences in maturity. As Jason, a 42-year-old Army veteran, stated, “a difference in maturity between a 40 and 50-year-old versus a 20-year-old” comparing the difference between himself and his younger peers. He further discussed that age was not the only issue. How peers behaved within the program, such as “whining” about everything and blaming others for their difficulties also had a negative impact on the student veterans desire to associate with them. This concern regarding age, maturity, and behaviors was further expanded on by Phil, a 31-year-old Navy veteran, who mentioned that the student veteran population is “older, more mature, and have more going on unlike your typical student.” Phil also discussed, “I just don’t know how they study and just kind of talking to them a little bit, they seem...not as motivated to study like that.” Socrates shared similar concerns regarding his ability to relate to peers within the nursing program when he stated, “I didn’t have as much in common.” He discussed this further stating, “I don't work well with others when they are not there to do task, conditions, (and) standards.” Socrates was a 42-year-old Army veteran still active in the Army reserve. He was completing his last semester of nursing courses at the time of the interview.

Age and experience seemed to have an impact on the student veteran’s ability to relate to other nursing students as well. As evidenced by 41-year-old Max, a retired Army veteran with 22 years of service, when he identified a difference in priorities between the student veterans and their peers stating they were “not on the same wavelength, or party wavelength.” This insinuation of their peer’s aptitude to set priorities away from their studies was identified in several of the interviews conducted. The military exudes specific expectations for its members

including the ability to set priorities and complete the mission. When these expectations are not fulfilled, military members are reprimanded. They are primed with this mindset starting in their initial military training.

These differences in meeting expectations was not the only dividing component between student veterans and their non-military peers. Five, a 31-year-old eight-year Navy veteran, expanded on the difficulty he had associating with peers by stating, “I couldn’t identify with some of the things that they had struggles with.” He further stated that there were differences in study tactics between himself and his peers. He couldn’t relate to their struggles because they were different from his. These peer differences impacted the student veteran’s ability to relate to non-military students. Both Jason, 42 years old and Wakanda, 32 years old, mentioned that some students “complain” about the work required. They discussed how this can be frustrating and in Jason’s situation, he avoids them because of these behaviors.

From the perspective of the student veteran, as identified by Wakanda, they respond to the demands of college differently than their non-military peers. This was supported by Todd, who further discussed the difficulty he has relating to them. Todd stated:

It’s hard for me in some ways to relate to these other students because I see them visibly freaking out and I learned a long time ago you can’t minimalize anybody’s feelings. That stress may be the worst stress they have ever felt in their life and it’s easy for me to just think it’s not that bad right. You could be getting shot at.

Jason expands on this difference in stress from his peers:

We had a paper come up that was worth 50% of our grade in a theory and research class, but that was known from the very get go, from day one. It was on the syllabus. It was mainly what that class was about. That was not stressful to me. It was to a lot of folks in

the class, stressing them out because it was worth 50% of their grade. I mean we knew what was expected of us. We knew when it was due. It wasn't very stressful to me. Just some assignment to do. I did very well on it, but other folks, the fact that it was such a big high stakes thing for them, it really stressed them out, but again I'm also 42 years old where most of them are 20 as well so.

In most cases, the student veterans identified that their military training and experience is why they can handle stress well. They compared the stress of college to the military, identifying that the issues they handled in the military were a different type of stress, but nursing school was not as severe.

Not only did student veterans have difficulty relating to their nonmilitary peers, but at times, they didn't always feel accepted. Jack, a 42-year-old retired Navy corpsman, expanded on this notion:

I tried even with one particular group and just didn't get accepted so I'm like whatever, but a lot of the military people don't seem to get into those groups. Like different organizations on campus and that I've noticed is that we don't really, I don't even do it either though, don't really get involved in that stuff as much.

Furthermore, Jack mentioned that it was more difficult to relate to the younger students, the older one is. He also mentioned that priorities are different depending on age. For the older student veteran, the focus is family and children. Therefore, student veterans are less inclined to associate with their peers outside of the classroom. The difficulty with relating to others was discussed further by Gwen, who is 30 years old, "mentally we are on different pages, so it is harder to connect." These differences made it difficult for student veterans to associate with their peers.

While age differences did exist, they were not the primary reason that student veterans had difficulty interacting with their younger peers. As seen above, in many instances maturity level, peer behaviors, and expectations impacted the student veterans' ability to relate to other students in the nursing program. It is important to note that they attempted to interact with their nursing student peers, but the student veterans had difficulty forging relationships because they didn't understand where they were coming from or had difficulty identifying with them and what they were experiencing. This difficulty was expanded on with examples of differences in stress coping and student behaviors when met with struggles. Another factor that impacted the acclimatization to the college culture included a difference in structure regarding expectations and rules.

Academia. Participants also noted their concern about the differences in expectations and rules between academia and the military. In the military, everything is structured as discussed by Five who went on to state "that's what I am struggling with right now (the lack of structure). Because it is just so easy to not go to...your assigned time." The student veterans are moving from a structured environment with clear expectations to academia, which is more fluid. Additionally, in the military, everything is planned and organized. It is imperative within the military culture to follow rules and procedures to effectively accomplish the mission. Max, a 22-year retired Army veteran, further discussed how the change in structure impacted his acclimatization to the college environment:

I had to work a lot harder here and it sounds kind of dumb saying that but because I mean in the military everything is structured, you know what you're doing. I mean I know we've sat down, we've planned out what we're doing months in advance and all this other stuff so. You have a process that has been developed and what not and I think the hard

part has been finding my process and developing my process to be successful. To do the classes, to do the study, you know to do all of that. That's been the hardest part.

The student veterans are moving from an environment and furthermore, a culture where the expectations were clear, and everything was regimented. Additionally, a key component of the military culture is the dependence on members to follow protocols and regulations. These are not always clearly delineated in academia. This difficulty may be attributed to the student veterans' military experience, including amount of time in the military, number of combat deployments, or amount of time between active duty military and enrollment into college. As discussed by Todd, a 10-year Navy veteran with four combat deployments, he didn't feel prepared "for like the reality of leaving the military." Similarly, Wakanda, who transitioned directly into college following his separation from the military, discussed difficulties with initial entry into the college environment. His difficulty was focused not only on the academic component but also the need for support during this time. He stated:

It has been a little bit challenging coming out of the military and jumping straight into school was a different, a different thing entirely because it's different. I got out and jumped right into the classroom and the whole new environment...My first 3 weeks, 4 weeks really were really rough because it was like 'Oh my God, I'm in Limbo. (They) just threw me out there and I can't figure out what is going on.'

In reference to these differences, Wakanda mentioned how he was not aware of the resources available to him as a veteran. An example of this was the veteran association. He emphasized the importance of this knowledge regarding veteran specific resources and the need for support during this time of transition, "Tell people about the organizations during orientations. Then veterans wouldn't feel left out when they are in such a dying moment." Some of the academic

differences Wakanda went on to discuss were the need to learn to take notes and to know how to organize them. He also talked about the difficulty of moving from taking prerequisite courses to the nursing program. An area he struggled with was figuring out what to focus on and what was a priority within the content. Therefore, his difficulty did not end with initial entry, it carried through during his next transition into the nursing program. The lack of guidance entering academia combined with the lack of experience within the college culture, proved difficult for student veterans. This change in structure and expectations significantly impacted several of the student veterans participating in the study.

Student veterans had to not only learn the content, but also learn the expectations, the culture, and attain skills such as how to study to be successful. Bobby, a 10-year Navy veteran, identified how at times they don't know what is expected of them from their instructors. He expanded on this by stating the following:

You don't get all the information you need from your instructor all the time. So, it leaves you to the point of, you know, kind of guessing what exactly do they want us to know.

What exactly do they want us to take from this, you know. They said this but that's not the full conversation of what we need to know.

During military training, the expectations are clear. The content is specific to what is needed to perform in the job role. These differences between the military and academia in structure and expectations have a profound impact on student veterans entering nursing programs. Socrates, who is still currently in the military, discussed how being out of the school environment for a long time increased his difficulty starting again. About his first semester of nursing courses, he said the following:

It was a lot of information, a lot of basics about nursing that most of your traditional students get in their first, pre-nursing, and some other stuff. So, it was a lot of information really fast and at one point I was, I was not doing as good as I thought I would at first and about midway through I thought I wasn't even going to make it out of that semester.

Socrates went on further to discuss that the content was hard and how “adjusting to it, I just had to keep trying different ways to study.” As was the case with Socrates, some student veterans entered right into nursing courses, while others, like Wakanda, took other classes prior to entering their nursing courses.

Another difference between institutions was what the student veterans were given as credit toward their degree. Some institutions allowed the students veterans the opportunity to test out of some of the initial nursing courses, while other programs did not. This was the case for Jack. He was not able to test out of his initial nursing courses and began with entry level nursing classes. In reference to his experience, he identified “it was a little boring for the first semester. I was learning a few things so that was nice, but it really just kind of hit me in the face the second year.” The second year was when he entered his higher-level nursing courses, moving beyond basic knowledge and skills to more complex concepts. This transition to higher level nursing courses was viewed by many of the study participants as difficult. Both Max and Phil also referred to the fast pace and large amount of content using phrases like “a kick in the gut” and “trying to drink from a firehose,” respectively.

The difficulties with acclimating to academia stemmed from differences with peers to differences in structure. In the military, everyone is aware of the expectations. These expectations encompass behavior and work performance. When their peers do not meet these same expectations, student veterans discussed difficulty relating to them and understanding

them. Additionally, there were differences regarding how they handle stress. Individuals in the military receive training and experience situations that impact their ability to cope. Seeing their peers have difficulty with this made it further difficult to relate to them. Another area impacting the student veteran's ability to acclimate to higher education was the differences regarding the structure of academia. Moving from a regimented military lifestyle to one of shifting expectations and unclear rules made it difficult for the student veteran to acclimate. This combined with the shift in content from basic to complex while navigating a new culture proved challenging. This leads to the next theme a shift in the thinking paradigm.

Shift in the Thinking Paradigm

All of the student veterans but one had completed a medical training unit either as a Navy corpsman, an Army medic, or an Air Force Medical Service Technician. This shift from military medicine to nursing required building on skills they already attained during their military service. When talking about military training, Phil, a Navy corpsman for 10 years, acknowledged it as “a great foundation of basic patient skills and anatomy and physiology.” The military providing a solid medical foundation was not isolated to just one individual. Wakanda, another Navy corpsman, expressed that he was doing things like he did as a medic in the Navy. Socrates, an Army medic, explained how the military skill-set compared to his nursing program by stating, “all of the skills you could imagine that we do, everybody learns in their lower level of nursing.” While they expressed having a working knowledge of basic skills and their application, they identified the need to relearn what they already knew. In the military, they were trained a different way than their current nursing training. They felt the need to “rewire” their thinking. Bobby, a Navy veteran with 10 years of medical experience in the military, emphasized the importance of this shift to better understand the nursing concepts:

I always try to put myself in the shoes of I have never seen anything medical before. And that is how I had to reboot my mind because coming from a medical background in the military. It was oh yeah, I know this, I know this, what she's saying sounds so familiar, I'm not going to spend a lot of time on it. But military medicine and civilian medicine doesn't always equate to a lot of stuff. Especially being trauma type injuries that we see, we're going to slap a tourniquet on it very first thing. Tourniquet, your bleeding and let's get you out. And here it's direct pressure first, direct pressure, direct pressure you still okay now tourniquet last source. You know treat last, no that should be first. But at that point you have to rewire yourself and once I was able to rewire myself, I was starting to get a lot of the concepts. Because that was my issue, missing concepts was I was applying military to civilian and nursing and you can't do that.

As seen by Bobby's statement, they have the knowledge to perform the tasks and skills but need to work on understanding them from a nursing perspective. Max, an Army veteran with 22 years of service, further discussed:

The military part helped familiarize some of the stuff, but the whole realm of nursing is just really different. I mean I can't just because I had medical training previously does not mean it set me up successfully for nursing school or nursing in particular. I have always come at it with great, so I am familiar with some stuff and I know a little bit of stuff, but I've never been foolish enough to sit there and think well I know that because I encountered. Because it's, this program is so much more in-depth than anything I remotely anticipated being involved in to be honest.

Jack, a Navy veteran with 20 years' experience as a corpsman, expands on this by discussing how, "nursing theory and nursing critical thinking are completely different than the corpsman

critical thinking.” This difference in required thinking leads to the need to shift how they learn and understand the concepts. Blade, an Air Force veteran, explained this further when referring to his medical training:

I feel like I still do have a base, a step up, but some the science behind nursing is still pretty new to me. Because I could, I could perform things, I could do things in emergency situations, but I wouldn't know the science why, or like oh this is from hypernatremia or this is from, you know. But I was like no, I need to get this IV in you. So, in that sense we are kind of all at square one at as to the science why, but when it comes to skills and basis of knowledge versus the application I can kind of mentor (speaking about other students) them in that aspect.

This need for further understanding of the concepts was supported by Todd, a prior Navy corpsman, when he stated:

Nurses are expected to understand theory more. Rather than for us, it's mostly just practical, like why are you tourniqueting something. We get why but we're not understanding necessarily the biology and physiology of it, where nurses have to understand theory and research.

Furthermore, Socrates, a 42-year-old student veteran with over 22 years of prior service as an Army medic, highlighted that there is a gap between nursing and being a medic. He discussed the need to “look through different eyes.” He went on further identifying that “in the military you are not told the why. In nursing the focus is on theory and critical thinking.”

An additional difference identified by many of the study participants discussed how they had to shift their thinking from trauma focused to the need for assessment and holistic thinking. Five, a 31-year-old who prior to enrolling in nursing courses was a Navy corpsman for eight

years, was enrolled in his third semester of nursing courses. He discussed that he felt like he had to “relearn” the information. His training focused on a “sense of urgency” and practical skills. Five elaborated on his military training by stating, “In the military it's more efficient, save lives, save lives, save lives, so the critical thinking aspect was there, but critical thinking in other ways such as triage, tactical trauma, tactical care under fire, and stuff like that.” Trauma medicine and initial point of care were the focus of military training as discussed by both Max, a prior Army medic, Todd, a Navy corpsman, and Blade, an Air Force medical technician. Jack summarized the training focus by stating, “critical thinking is geared more towards...how to solve the issue that the patient is having whereas nursing is a little bit more holistic about the overall person. We’re (military medical personnel) geared more towards fix the immediate issue.”

As discussed, the student veterans identified the importance of having their basic skillset from the military but also the need to build on this skillset and shift their thinking. They can use what they currently know but need to further understand the theory behind it and how to apply it. Another area of shift requires learning beyond trauma and emergency medicine and expanding to different populations using a more holistic approach to patient care. This need to shift their thinking combined with them acclimating to the college culture encouraged them to seek out and use resources at their institutions to facilitate their progress within their nursing programs.

Using Resources to Facilitate Progress

Another prominent theme noted throughout each of the interviews encompassed the resources available. While many of the research participants identified that these resources were assets to facilitating their progress, the student veterans also discussed that no specific resource was required for them to stay at their current institution. Some of the resources that were highlighted throughout included veteran liaisons and faculty, as well as physical resources such

as textbooks, tutors, and veteran resource centers. In many instances, these resources enabled their movement forward within the program, facilitating their success. One example of this was the veteran liaison at the institutions.

Veteran liaison. Eight of the eleven research participants identified an individual at their institution who acted as a liaison for the student veterans. A liaison is someone that has a close bond or connection with the student veterans and acts as a communication vector as well as a means of support (Liaison, n.d.). This bond was emphasized by the support provided. An example of the support provided by the veteran liaison was described by Army veteran Jason, a 42-year-old male enrolled in an accelerated BSN program. Jason discussed that the veteran liaison was always available and provided ongoing assistance with resources and support. He stated:

I have always been able to go to (veteran liaison) and...she pretty much handles it or says, 'Hey go talk to such and such or this is the person you talk to. Let me email them right now for you and get you, you know or let me walk you down here to this person.' The second you bring a problem to her to me it seems like that's her number one priority at that time, take care of this problem. She will put, unless she is helping another student, she will put everything to the side to help you. I mean, that is her number one job to take care of us...If I need to ask her something I can text her, I can do whatever she is very approachable.

This support was strengthened by Blade, a 27-year-old Air Force veteran. He emphasized the importance of the veteran liaison having prior military experience. This was important because, as Blade stated, "I am kind of reluctant to talk to people when I am in a vulnerable state." The veteran liaison at his institution had prior military training and Blade discussed how:

She can just, she can see it in my face so. If you don't see it and don't know that I am going through something then I am probably not going to tell you, but she sees it and she's like what's going on you're not as chipper and talk to her and she gets it. So, she's been really good.

Furthermore, he discussed how “she kind of speaks the language and she has all of the resources. We even had a class where she gave us resources for any aspect of your life.” Blade identified that the veteran liaison was a valuable asset by further stating “I literally would not be here, if she hadn’t run around and figured that out.” Blade stated this when discussing how he needed a course and without the liaison’s assistance he would not have been able to progress within his program. As identified, the student veterans perceived the veteran liaison’s role as a means of support as well as a source for other resources available. This feeling was not isolated to one institution.

While the veteran liaison mentioned above was a prior service military individual, that is not always the case. Even so, as Bobby identified:

If we have issues we can go to her...we are able to express our concerns, our needs. It’s kind of like she is the liaison between us and the chair of the nursing department. She follows through on everything. She takes the extra stress of being a college student off of you, so you can focus on being a nursing student.

Bobby, a 27-year-old Navy veteran, was enrolled in his third semester of nursing courses. As discussed during the interview, during Bobby’s enrollment there was a semester gap where a veteran liaison was not available. Bobby emphasized that adding this resource back did facilitate the learning process by helping to decrease stress levels.

Similar findings were discussed by Five, a 31-year-old enrolled at a different BSN degree granting institution. He referred to the head of the veteran resource center for the institution in a similar capacity. The head of this center also had previous military experience, and this allowed him to “know how the military works and veterans work and how paperwork works and the whole process works.” Five discussed how having an individual with this knowledge “made me feel relieved to be like hey I can complete this degree and if I need anything even non-nursing or even non-veteran...and I feel more confident just anything veteran I can just go to him.” This experience was similar to that of Todd and Jack. Both were individuals enrolled at the same four-year institution and Navy veterans but were at different levels within their nursing program. Jack was currently in his third semester, whereas Todd was enrolled in his second. They did not refer to a veteran liaison within their nursing program but did identify the importance of the veteran coordinator who was head of the veteran resource center. Todd emphasized that the veteran coordinator:

He sends out a lot of resources and information and if we have anything going on at the university like logistically or administratively that we are having difficulty with he’s made a lot of liaisons to the point where he’s able to help out with that essentially. He’s involved in the community too. So, he sets up a lot of things for job placement and...networking events. He’s a pretty valuable resource.

Jack discussed that he facilitates the initial entry into college stating that “he helps smooth some of those (initial entry) lines out and explains the process of things that you need if you don’t know.” He went on further to discuss some of the issues veterans face with initial entry, including paperwork and funding allocations as well as the need to identify additional resources available.

The importance of resource personnel presented consistently throughout the interviews conducted. These individuals were either identified as veteran liaisons specific for the nursing program or were available through the institution's veteran resource center. While the veteran liaison having prior service was helpful to the student veterans, it was not required for this role to be considered an asset. At least two institutions had a veteran liaison that had no prior military experience but was still considered a valuable component within the nursing program for student veterans. In many instances, the student veterans highlighted how the veteran liaisons went above and beyond their roles to facilitate success for the student veterans. Student support personnel were not isolated to veteran liaison or veteran resource center individuals. Many of the student veterans also referred to the positive effects of veteran and non-veteran faculty.

Faculty. Faculty are also a valuable resource for student veterans. Some of these faculty previously served in the military, while others did not. Participants described key characteristics of these faculty as being empathetic to the concerns of students and being available. Prior military service also stood out among these characteristics. As identified by Jason, an Army veteran with nine years of prior military service, "there is a certain wavelength, mental link that goes between military folks...those instructors always want things to go like this, this, this...you know, and you appreciate that when you've been in the military." Jason was referring to the ability to communicate with faculty with previous military experience in addition to their identification of clear expectations. Furthermore, regarding communication, Bobby, a Navy veteran with 10 years of service, discussed talking to one of his instructors that had previous military experience when he was having difficulty with course content. "I was able to go to my instructor because she was prior military. I was able to sit and have a conversation and she was like you have to get this out of your head." He also identified that he can talk to this instructor

even when he is stressed and that she is readily available. This ability to communicate with prior service faculty was prominent throughout the interviews.

Not only did the study participants identify their ability to seek out faculty for help, but in many instances, the prior service faculty sought out the student veterans when they were concerned about their well-being. Jack, a 20-year prior service Navy veteran, discussed his experience:

They know where we're coming from and they know what our limits are, I guess you could say or know when we can do better. So, they're pretty good at judging or being able to tell if someone is kind of sandbagging something or if they need help. They are pretty good at kind of sniffing that out and being able to look and go, 'You doing alright? What's going on?'

Another student at the same institution, Todd, a Navy veteran with 10 years of prior service experience, further discussed this support identifying that faculty with prior military service:

Always find you and they're the ones that are open door and they go out of their way to help you because they know what you've been through and they know what you're going to be. And they have a little more of an invested interest in your success.

Gwen, a 30-year-old female Army veteran, had a similar perception of the military faculty. She discussed that, "They know how you are and if something's wrong with you during a test, they can tell. I've had many teachers you know, 'What's wrong with you. You slipped up on this test is something going on?'"

Faculty with prior military service provided an additional means of support for student veterans. Support was also provided from nonmilitary faculty. In these instances, student veterans discussed the support in terms of academic progression and their willingness to help

understand concepts. These faculty were also understanding of the student veterans past experiences and responsive to their concerns or questions. Above all, the faculty were supportive and respected the student veterans military service.

Both faculty with prior military experience and faculty without this experience were seen as supportive to the student veterans. The support for nonmilitary faculty was primarily academic, whereas with military faculty it was instructional as well as emotional. Many of the examples provided explain the link student veterans share with their prior military service faculty. Student veterans termed this link the “military mentality” or the “military mindset.” Student veterans feel comfortable and, in many cases, safe when talking to these individuals, touting the lack of “preconceived notions” and the ability to “understand where they are coming from.” The common bond of previous military experience provided the framework for these connections between students and faculty.

Physical resources. The emotional and instructional support provided by the faculty and veteran liaisons were not the only resources that student veterans identified as beneficial. They also found that the physical resources, such as the veteran resource centers, tutoring, and books, facilitated their progress. In terms of veteran resource centers, some referred to a center that was available campus wide and others referred to resource centers that were specific to nursing students. Commonalities regarding the resource centers was their availability of computer and printing services. At some institutions, as was in Jason’s case, the veteran resource centers provided a quiet space to study in, but at other institutions as discussed by Todd, the veteran resource center acted as a meeting place as opposed to a study area. This difference may be attributed to the size of the institution and the size of the veteran population indicating usage. Another common resource was the provision of tutoring services specifically for student veterans

within their nursing program. Of the study participants, two of the five institutions offered this resource. While the use of tutors was not prominent within the study population, participants that did use them emphasized their importance to their success. Lastly, two out of the five institutions offered books for the student veterans to use. These were nursing textbooks. In one case they were kept in the library, while in the other, they were in a separate room that was strictly for the student veterans. Student veterans from both institutions discussed using these resources as well.

The resources available to student veterans included veteran liaisons, faculty, and physical resources such as the veteran resource center, tutoring, and textbooks. Throughout the interviews, the student veterans identified the importance of these resources in facilitating their success. Additionally, many mentioned the physical resources available and, in some cases, wished they used them more. In other instances, the student veterans identified that without these resources they would not have been able to succeed within their nursing programs. Once the student veterans became adjusted to their program using these resources, they began to reestablish a sense of community.

Reestablishing a Sense of Community

Developing a sense of community originates in the common attitudes and interest within a group. In addition to these commonalities, the participants of the community want to be with other members of the group and grow to care about their peers (Community, n.d.). Within the military, a sense of community is established during their initial training. During this period, service members are with their military peers all day every day. This type of environment leads to the development of connections with their peers and a sense of community with them. These connections and relationships are further developed in high stress situations, such as combat. As noted previously, all of the student veterans were deployed to combat zones at least once in their

military careers. Within Five's, a two-time combat veteran, interview he discussed the sense of camaraderie established during his military deployments with his military peers and the bond that developed. The need for a sense of community does not leave the military veteran when they leave their branch of service. It continues as was established by the student veterans throughout their academic programs. When discussing their experiences, the student veterans identified how they seek out others like themselves. This could be other veterans, students with similar characteristics, such as age, or students with a common goal or work ethic, such as those students within their nursing cohort. The overarching commonality was finding similarities that they could bond with to form that community or unit feeling they had in the military. In many instances within this community, they study together, look toward one another for help, and overall share a sense of camaraderie with their peers. While this was the case, some student veterans did identify that these relationships did not start right away, but they had to get to know each other and begin to understand that they were in the nursing program together. Each of these areas will be discussed below.

Veteran status. A commonality that brought student veterans together was veteran status. According to Phil, a 10-year Navy veteran, "they can relate to other veterans." Gwen contributed this ability to relate to each other to the fact that "We have more in common, so we tend to draw to each other." They share similar experiences during their military careers. Todd, a three-time combat veteran with 10 years of military experience, discussed how they can, "reminisce about war and our experiences... We are able to lean on each other when touchy topics come up." Todd's experience emphasized the importance of being able to relate to others and link themselves with people who understand their experiences. This connection extended across military branch designations. As demonstrated by Wakanda, also a Navy veteran, "I don't

care what branch you served in. I hear you are a veteran you are my brother, you are my sister. I don't care like that is how much we bond...quick.” Any veteran link proved to be a common factor. In addition to sharing their combat experiences with each other, they also looked to each other in the classroom. Five emphasized this point when discussing the classroom environment. He talked about how he and other veterans would discuss content, “it's like hey what were you thinking about this...what were you thinking about that...everyone does, but we always do.” The student veterans look to each other for support both emotionally and academically.

While being with veterans contributed to their college experience, this was not always an option depending on the demographics of the institution. In Blade's case, this did not stop the need for a military tie. He surrounded himself with individuals that had military connections themselves. For example, their family members or significant others were in the military. He discussed the importance of these relationships because they “understand that whole lifestyle (referring to the military)” and “they kind of know where I'm coming from.” Not only did the student veterans establish that they understand each other better, as discussed by Todd, they “confide in and talk to one another.” He further mentioned how they were “able to lean on each other and talk about very uncomfortable things because a majority of us haven't really dealt with those issues yet, not to the probably capacity that we should have.” These points underscore how their military bond provided them with a source of support. They understand each other and provide each other with support similar to what they felt in the military.

As seen above the common link with other veterans is present. Within the interviews, the student veterans expressed the desire to have that bond again. While this was the case, the student veterans did extend their community to include other students. Students with a common goal or work ethic were the most common type that were enfolded into their community circle.

Common goal. Even though they identified difficulties regarding their peers, they also identified that they did not feel “isolated or outcast” as discussed by Phil, currently in his second semester of nursing courses. They identified commonalities that united them within their nursing program. These commonalities helped in forging a bond between military and nonmilitary students. The importance of having a bond with their fellow students was identified throughout the interviews. Phil best exemplified this when discussing group work:

Being able to rely on the person next to you, as cliché as it sounds, it's nice to have that kind of already, I don't want to say engrained, but kind of being familiar with that and not having to feel weird about asking somebody like ‘hey we are both in this together, let's divvy it up so we're not working so hard and then we can both benefit from this, or we can all five or six benefit from this so’.

This commonality of purpose was further emphasized by Blade, also in his second semester of nursing courses. He identified, “It’s like I’m in the fight right now with my fellow classmates. We are all trying to get our BSN...those are my comrades right now.” When discussing group work, the importance of aligning oneself with others that are focused on the program was prominent throughout the interviews. As in Bobby’s case, he emphasized the importance of having similar expectations and doing what you are supposed to do. Todd discussed how they linked their experiences with other students as making them feel like they,

are part of a unit again. Being back in the military, I think of my cohort, my classmates as my unit and I feel sad when they don’t do well, and I mean I really feel it. And I’m getting strong relationships and connections with these people.

Todd also stated that with these connections, they “try to do things for one another and we care for one another.” The importance of connections was present throughout the interviews. Gwen

discussed how it “Feels good to have another group you can connect with besides just the military because it is such a small community.” Even the common goal helped to supersede the age barrier presented earlier. Phil identified that while an age difference was present, “after a while we were talking to them individually. We came to the common okay we are all in nursing school together.” Gwen further discussed the similarities she shared with her peers:

We all have the same type of passion and we're kind like the same type of people. We're empathetic and so it's, it's been good. It's nice and it kind of feels warm to have another group that you can connect with besides just the military because it is such a small community.

The student veterans identified the importance of connecting with their peers. This connection helped both them and their peers succeed. These connections were similar to their past military experience and the expectations of their military role to come together and accomplish the mission.

In the military, soldiers depend on each other and support each other. Socrates discussed “I was used to the military environment where I got 30, 40, 50 something people to select from while I'm going through school that we would sit down, and we would go over things and over things and over things until we memorized them. Whereas this, it was I can't find enough people to sit down on a regular basis, so...I'd have to study on my own.” They sought out this support that they once had in the military. Similar to Socrates and the need to find that common link again, Wakanda expressed how he missed the “brotherhood” he attained in the military. He talked about how they had “rough days” and they had “good moments” and that he missed them. He went on to state “I miss all of my Marines and my sailors.” Interestingly, in several of the interviews when discussing their military peers, the student veterans used the pronoun “my,”

reflecting the connection between them. They miss the community and, in some cases, the family they developed when in the military. They want to feel like part of a unit again, which considering a majority of the study participants had seven or more years of military experience was to be expected. This desire explains why in many cases the student veterans established study groups to attain this community again. Furthermore, while establishing this sense of community was important, the desire to see success in their peers within these groups leads into the next theme, leadership attributes.

Expression of Leadership Attributes

All study participants held a formal leadership role during their military experience. Some of the military leadership roles fulfilled by the study participants included senior medic, lead petty officer, senior line corpsman, and noncommissioned officer in charge of clinic operations. These military leadership roles were discussed at the beginning of the interview and many of the study participants emphasized that the leadership characteristics attained in these roles were engrained in them through their training. They also identified that they still retained these leadership attributes within their civilian lives. Each of the armed forces provides leadership training to their soldiers. As defined by Army doctrine ADP 6-22, leadership is “the process of influencing people by providing purpose, direction, and motivation to accomplish the mission and improve the organization” (Headquarters, Department of the Army, 2012, p. 1). When referring to the student veterans, the organization includes the student group within which they are currently indoctrinated, and the mission is completing their BSN degree. Furthermore, each of these individuals identified that leadership characteristics including having the ability to prioritize, exhibit time management skills, having a sense of responsibility, being disciplined, and establishing study groups to help with success stemmed from their military training. Many

mentioned the importance of working as a team and in most cases, they initiated that team. They were a precipitating factor to ensure the team worked effectively and efficiently. In addition, many of the student veterans held leadership positions at their institutions, either formally as the head of an organization or informally fulfilling the role of tutor or group leader.

The team component was prevalent in several of the interviews. Five, who separated from the military as an E-5 with eight years of military service, provided an example of how he exhibited leadership characteristics from clinical:

Everyone was kind of off there by themselves and doing this like ‘Yeah I don’t need help’ or they didn’t want to ask for help for any type of reason, but I see it as a team thing and we’re like hey we’re here, hey I’ll help you, you help me, let’s go!

He stressed the importance of pulling everyone together to accomplish the task and helping each other. Furthermore, he emphasized the importance of teamwork stating, “if you want to go fast, you go alone. If you want to go far, you do it together.” He identified that this mentality, the importance of functioning as a team, stemmed from his military training.

Not only were the student veterans the impetus of developing a team, they were also sought out by other students because of their abilities. Blade was also an E-5 but he was in the Air Force. He discussed how students sought student veterans out for help, “we help them with especially our skills portion, our hands on for our check offs, things of that nature, they always come to us.” These experiences spanned all military ranks and branches of service. Phil, similar to Five as an E-5 in the Navy, shared a similar experience “after we talked and got to know each other a little better they would seek me out if they couldn’t find their instructor or their nurse for help.” This emphasized how other students see them in their role as a leader. Socrates identified how “other students...the ones that were apprehensive, they always looked at me and said will

you go in with me?” Socrates, an E-5, is still currently an active member of the Army reserves. He also talked about how they recognized his experience level and pursued him as a source of support. He further identified that leadership in the military also fulfills the role of trainer. Knowing this, it is understandable that they are altruistic to their peers and want to help them learn and succeed. Examples of altruistic behaviors were prominent throughout a majority of the student veteran interviews.

These examples were specific to the clinical setting, but the student veterans exhibited these leadership characteristics in the classroom as well. One example of this was their role regarding study groups and expectations of other group members. Bobby, still a current member of the Navy reserves, emphasized that with study groups, “we have all got to bring something to the table.” He also discussed how this mindset carries over from his current military position as a lead petty officer in his military unit. Phil expanded on the leadership role maintained within the study groups, “coordinating it all and making sure that everything was clear. Who was doing what and what time we were showing up.” Wakanda further emphasized the importance of working as a team and in groups highlighting the fact that “we all learn from each other as well and share ideas.”

In addition to realizing the importance of teamwork, leadership requires individuals to accomplish the goals and directives set forth. As in the instance of transformational leadership, it is moving themselves and others to the next level. Blade discussed how he is “more worried about doing stuff for the greater good or for someone else...or I can do more to help my peers or the people I tutor.” The student veterans identified the importance of helping others to excel numerous times. Both Jack and Gwen emphasized the importance of helping their peers to succeed. In Jack’s situation he “always tries to help everyone...I’m going to walk you through

what you need to do.” Similarly, Gwen mentioned how she would “bring other students into situations that could be a learning experience that we don’t see on a regular basis.” While it was important for the student veterans themselves to succeed, it was also important that their peers do too.

They were not only leaders in the classroom and clinical settings, they also held leadership roles in student groups. As identified by Wakanda, peers want them in leadership roles, “no one wanted to take up the position and a couple of people wanted me to go for it and I took up the challenge.” In addition to the desire to help others excel, they identified a sense of duty, responsibility, and the importance of accountability. They exhibited respect and discipline, qualities which further helped them to succeed.

Determined to Succeed

While many changes were occurring for the student veterans participating in the research study, they were all resolute about finishing their BSN program. They established that they had a goal or a mission and because of their military mindset, they would not give up. They exhibited this mindset from their initial entry into higher education and throughout the acclimatization phase. This mindset is what encouraged them to seek out resources, faculty assistance, and the need to develop a sense of community again. They identified that their military training helped them to stay focused and disciplined to complete their goal, which was obtaining their nursing degree. Therefore, they used what resources were available to facilitate their shift in thinking and push them to succeed. Additionally, the leadership attributes attained during their military careers further helped this process and encouraged them to continue regardless of obstacles.

As established by Jason, enrolled in an accelerated BSN program, “you can pretty much endure anything for 15 months (referring to the length of his program).” Five, who is currently in

his third semester of nursing courses, identified the need for a “temporary mindset” and the need to see the “big picture” which in this case was accomplishing his goal of completing the BSN program. The big picture to some meant their identified “mission.” The “mission” was mentioned by several study participants. Blade, a student veteran in his second semester of nursing courses, discussed, “I am trying to get the mission done right now.” Socrates, who was in the last semester of his coursework, continued to express, “You just get the mission done.” The mission, goal, and end-goal are always at the forefront. While they identify this is what they are working toward, the study participants did discuss what they are thinking as they progress. As discussed by Blade, a second semester nursing student, when comparing military training to nursing school:

It’s going to be hard, it’s going to be tough, you’re going to bleed, you are going to sweat, but you are going to get better. So, it’s going to become like a norm to you and it’s going to become easier for you even though it is still intense but looking at it from the outside. I kind of translate that to the nursing curriculum. You know day by day you’ll get better, you’ll sharpen your toolset so that will carry you through.

A commonality across the study participants is realizing that you need to push through to succeed and realize the importance of what you are learning. This mindset carried across to the other student veterans as well. Phil, currently enrolled in his second semester of nursing courses, stated “It’s more just my mindset. Just like in the military you kind of get dealt a hand and you just have to deal with it....get the job done. So, I just go ahead and do it.” Furthermore, Socrates, who is still active in the Army reserve, stated in the military, “we never quit, we never fail...just get the mission done.” Additionally, the ability to stay focused as mentioned by Gwen:

Everything with me is more focused...College for me is strictly business...I know this is the ultimate goal and these are the steps I have to take so it's helped me to be able to accept that and how to work through it no matter what...failure has never been an option. Even though I have wanted to (give up) like 85,000 times. I don't know how many boxes of tissues I've gone through. How many meltdowns I've had just in one year of nursing but I think a lot of that is who I am personally from life and from military experiences that have made me like okay this is what I've chose to do so this is what I'm going to do and I'm going to complete it whether I stick with it afterwards or not.

This drive and determination were threaded throughout the interviews with study participants. They identified that their previous military experience made them disciplined and focused which pushed them to grow and succeed. This was articulated well by Blade:

If you look at it in terms of the end-goal of where you want to be and whether you are at it. It's going to be overwhelming, but if you look at it day by day, you are going to learn more, you are going to pass this class, you are going to pass this curriculum, you are going to build a skill, and then you are going to be the great nurse you want to be.

Additionally, to accomplish this Bobby who is also still active in the Navy reserve, stated the need to "put in the time to actually accomplish that (referring to the goal)...I have to be laser focused in order to get it done." Phil, a 10-year Navy veteran, supports this when referring to the impact the military has had on him. "More discipline, more focused, more driven to pursue my goals." Several of the study participants referred to the discipline and focus instilled in them during their military career. Max, a retired Army veteran, expanded on this further stating:

For the longest time the only goal I had was to, you know, be a soldier and well that one's done and so it's been time to find a new one...You have committed to something for so

long. It doesn't just stop. You always continue further on and you keep going. You set new goals. Set new dreams and achieve them.

The commitment he was referring to was his military career. He highlighted the importance of not stopping and achieving the goals set forth. Todd further expressed:

If you have a dream or if you have a goal you can obtain it. Yeah, it's hard, you have to stay up late nights, and you have to do things, but you can still obtain it if you want it bad enough.

In addition to the commitment to complete their degree, the study participants emphasized the importance of excelling in their nursing courses. As was in Blade's case:

It really burns me when I hear 'C's get degrees.' I really cannot stand that 'C's get degrees' because it's like for yourself, you should want to be the best. For your future patient, you should want to be the best and absorb as much knowledge as you can.

The student veterans described putting their full effort into learning the material because of the impact not knowing can have on their future career and caring for their patients.

As seen above, all of the study participants were motivated to complete their degrees, as evidenced by their internal drive and determination. While this was the case, there were also external motivators including family, financial factors, and the desire to help others again. Some identified that once they attained their degree, they wanted to enlist in the military again, as was the case with Wakanda. While those currently in the military, Socrates and Blade, discussed obtaining their officer commission once they completed their degree program and functioning as a nurse in the military.

Every study participant stated the importance of establishing an end goal or mission. They also identified that the military helped them to become more disciplined and focused to

achieve this end goal. In some cases, they identified the importance of learning a step at a time to keep from becoming overwhelmed and ensuring their likelihood of success. They also discussed what motivated them to continue to succeed. This mindset spanned all years of service from six and a half to 22 with some student veterans still actively involved in the reserve components.

Summary

This chapter discussed the demographics of the sample participating in this research study. Using the techniques outlined by Colaizzi's (1978) method, the researcher identified six themes that were prominent in the interviews conducted. The themes included the following: acclimating to the college culture, shift in the thinking paradigm, using resources to facilitate progress, reestablishing a sense of community, expression of leadership attributes, and determined to succeed. This chapter discussed each of those themes in detail and provided descriptions using quotes and depictions from the interview transcripts. These themes will be further analyzed in Chapter Five where the implications as well as limitations will be discussed.

CHAPTER FIVE

DISCUSSION

The phenomenological research study conducted sought to explore the research question, “What is the lived experience of student veterans enrolled in nursing programs at institutions identified as supporting military supporting including both HRSA grant funded Nursing Education, Practice, Quality and Retention: Veterans’ Bachelor of Science Degree in Nursing programs and/or nursing programs located in institutions designated as Military Friendly®?” Using Colazzi’s (1978) method, the researcher attained a detailed description of this experience from eleven study participants. While each of these individuals shared the commonality of the military and enrollment in a BSN program, the sample was diverse regarding branch of service, ethnicity, gender, and age to name a few. Regarding the BSN programs, five different institutions participated in the research study. Differences also existed in their military career regarding their combat experiences. While these differences existed, the experiences were still similar across the study sample.

Using in-depth semi-structured interviews revealed six comprehensive themes including: acclimating to the college culture, shift in the thinking paradigm, using resources to facilitate progress, reestablishing a sense of community, expression of leadership attributes, and determined to succeed. Understanding this lived experience can assist researchers in facilitating the movement of student veterans in academia by understanding their needs and viewpoints regarding their education progress. Furthermore, faculty can use this information to assist with identifying resources that would aid in the transition into both academia and more specifically nursing programs. This chapter will address the themes identified and consider their impact in

reference to current research regarding the lived experience of student veterans. Additionally, study implications, limitations, and recommendations for future research will be discussed.

Discussion

According to the American Council on Education (2008), approximately two million veterans are anticipated to enter higher education by 2020. Because of the increase in combat operations associated with Operation Iraqi Freedom, Operation Enduring Freedom, and Operation New Dawn, concern is present regarding the needs of the military population in higher education. The current research conducted did not specifically ask about current physical disabilities, PTSD, or mental health problems but did explore the resources needed to facilitate student veteran progress within the nursing program. Additionally, because of the lack of current research regarding student veterans in nursing programs, the results will be compared to studies analyzing all academia programs.

The phenomenological study conducted included a diverse sample of eleven study participants. Initiatives led by the IOM (2011) and HRSA (2013) are aimed at increasing the diversity of the health care workforce. Inclusion of diverse populations such as those within the military can assist in meeting these initiatives. Additionally, the sample within this research study was from five different institutions. This is important to mention because similar findings presented across the sample.

All student veterans participating in the current research study identified the importance of success with achieving their nursing degree. A vital finding was the determination to succeed exhibited by each participant. They attributed this to being disciplined and focused, which pushed them to excel within their nursing courses. To ensure success, they identified the importance of having a mission or end goal they were striving to achieve. The mission at this

time was attaining their nursing degree. Establishing a mission is important because it links back to their previous military experience. In the military when given a mission, personnel pushed through until the mission was complete. They used whatever resources were available to accomplish this mission. Furthermore, the expectations when completing a mission included completing the task at the expected level of performance and working until the desired outcome was achieved. This mindset carried through into their pursuit for their nursing degree. Having a purpose and a mission provided direction for their drive and determination. In many instances, they identified that failure was not an option. This mentality is engrained in military members from initial training and throughout their military career. Henceforth, they would continue to convey this even in the civilian world.

In conjunction with this mentality, as identified by Olsen et al.'s (2014) mixed-method study, student veterans carry skills, such as work ethic and time management skills, learned in their military career into the academic setting. Additionally, their self-discipline presents when they “attend(ing) each class on time, meet(ing) deadlines for assignments and papers, prepare(ing) adequately for upcoming exams, and coordinate(ing) plans with peers for group assignments” (Olsen et al., 2014, p. 104). Student veterans have the self-discipline to complete the tasks required, the ability to stay focused, and complete their mission, which is their nursing degree.

In addition to discipline, they are motivated to succeed. The motivation to continue within the nursing program even when challenges presented varied among the student veterans. Some of the identified motivators were family, seeking their career, financial reasons, and the desire to continue to help others. An exploratory study conducted by Ness et al. (2014) regarding student veterans enrolled in post-secondary education, also found that interest in a particular field

and financial factors were motivators to ensuring success. These findings were also present in the current study. The student veterans in the current study were in the medical field during their military career and identified the continued desire to help people. In one case, after obtaining their nursing degree, the individual was planning to go back to the military to continue caring for their military peers. These motivators influenced their drive to continue with their degree. Completing the mission was important, but equally important was completing it to standard.

Standard in the minds of military members is putting your full effort forth and going above and beyond the call of duty to accomplish the task. This mindset carried through to their nursing courses. Several of the study participants mentioned the importance of not only passing their nursing courses but achieving an “A” in them. While grades had a high level of importance for the current research study, Durdella and Kim (2012) found that student veterans did not perform as well as their nonveteran peers. GPA was not gathered for this research study, but student veterans did identify that they were able to achieve “A” and “B” grades. A comparison was not available with the nonveteran peers at the institutions. Even though the research from Durdella and Kim (2012) indicated a lower performance rating, student veterans still wanted to perform at their highest level exemplifying the expectations they set for themselves.

Furthermore, because of this need to excel, student veterans emphasized that their coursework was their primary focus. This focus may explain Southwell, Whiteman, MacDermid Wadsworth, and Barry’s (2018) results that older student veterans were less likely to participate in organizations and clubs at their institution. Attending social activities were not a priority like it is for their younger peers. Livingston et al. (2011) had similar findings, highlighting that the focus is on academics for student veterans. They want to complete their degree whereas their peers were more focused on socializing. While their focus is on academics, they do realize the

importance of maintaining a balance. Prior to leaving the military, they had a career similar to the civilian sector. They would go to work during the day and then in the evenings they would have time to socialize, spend time with family, or participate in activities. Maintaining this balance is important to prevent burnout, especially considering the rigorous expectations of nursing programs. Therefore, they gained perspective from their military experience realizing what is important and the need to balance school with their other demands. Additionally, as identified by Ness et al. (2014), the skills attained during their military career including time management and organization helped to maintain a balance between work, school, and their social lives. Finding this balance also required using the military attributes of discipline and focus to further assist in their acclimatization to higher education.

During this acclimatization time, student veterans had to adjust to the culture differences between their military careers and academia. A predominant issue that impacted this transition was the structure of academia. The military is regimented with clear expectations and standard operating procedures, whereas academia is more fluid and not as controlled. The inconsistency regarding structure in academia proved difficult for student veterans, especially with their entry into academia and then when they entered the nursing program. Hammond (2013) and Messina (2014) expanded on the differences between academia and the military. They discussed how the expectations and the value systems in academia are not clear or not known. Shifting from an environment that requires its members to memorize the values that guide them daily to one that doesn't clearly identify a values system can lead to internal conflict.

Additionally, military members are evaluated regularly, and the expectations for their position are known. With vague evaluation systems and differing expectations from faculty, student veterans have difficulty figuring out their role and what is expected of them. As

discussed by Naphan and Elliott (2015) in their qualitative research study, military personnel receive clear directions, and, if they do not perform as expected, disciplinary actions are taken. When in the military, soldiers are told what to do, how to do it, and when to do it. During combat missions, every minute of every day is accounted for. This may explain the difficulty student veterans have self-regulating in school as identified by Jones (2013). As the student veterans in this study identified, they had difficulty initially figuring out the system and how to perform effectively within it. Additionally, when entering academia student veterans had to determine their own schedule and their day-to-day activities. This need to self-regulate, coupled with the inconsistencies between courses, can increase student veteran frustration and stress. They identified how they were not ready for the differences that came with leaving the military. They also discussed their difficulties with moving from a regimented military lifestyle to higher education and the need to develop their own process for navigating academia.

Another concern regarding academia was that only some institutions recognized previous training and experience gained from the military. Unfortunately, when not provided with the opportunity to gain credit for their military experience, student veterans may view the coursework as redundant and may be less motivated to complete it (Boerner, 2013). Some institutions provided the option to test out of their initial nursing courses, whereas others did not, requiring students to start at the beginning of the nursing program. For student participants that were not provided with this opportunity, they identified being bored and less engaged in the content, while they persisted in the program this may have impacted their development in the initial nursing courses. While this was the case, not all took advantage of the opportunity to test out. The rationale for this decision was so they could see how things are done as a nurse as opposed to their military training. They recognized the importance of shifting their thinking.

Henceforth, moving from general education courses to nursing courses encompassed a second acclimatization period. This acclimatization period was emphasized when discussing the differences between general education courses as compared to the requirements of their nursing coursework. Some of the study participants entered directly into nursing courses, while others had to complete prerequisite courses. Even when starting the nursing program at the beginning, the student veterans still identified a need to shift from a military mentality, and this shift proved difficult for some. Instead of focusing on emergency care as they did in the military, they had to develop a holistic approach, which required the development of critical thinking skills. Even though this was the case, they did identify the importance of their military training in providing a foundation to build upon. Regardless, shifting from a task-focused approach to a holistic viewpoint was challenging.

An additional consideration is that military training periods vary depending on branch of service. For example, military medical personnel training can last from 14 weeks (United States Air Force, n.d.) up to 19 weeks (America's Navy, n.d.). This brief training period focuses on the essentials of emergency medicine including combat training. Also, the focus during this training includes healthy young and middle-aged adults that are experiencing emergency care needs. Furthermore, as identified by Watts et al. (2016) when initiating a pilot program moving military medics into civilian healthcare positions, they found that military medics did not have sufficient training in psychosocial issues, chronic disease management, and geriatric populations. Although the population and training were restricted, the study participants identified proficiency in skill performance, which facilitated lower level nursing course success. The difficulty presented as they entered their upper level nursing courses. They identified difficulty not only with learning the content and the way it was presented, but in some instances, they identified difficulty with

testing. Additionally, they identified feelings of being overwhelmed and feeling like they were being provided information through a “firehose.” The focus is no longer on one population or only emergency care. The focus is now on multiple populations and the need to care for patients with co-morbidities and chronic diseases. Receiving an abundance of information paired with the need to develop critical thinking skills proved difficult. Many times, student veterans identified that they had to do things differently than they did in the military, but they referenced their military experience when trying to learn the content. They emphasized the importance of developing new study habits, new understanding of the content, and changing their viewpoint of medicine. When student veterans attempted to make these transitions alone, they expressed having difficulty with the process and becoming frustrated. These difficulties emphasize the importance of additional support for this growing population of students. Therefore, individuals around them also played a key role in this acclimatization period. Henceforth, student veterans not only had to acclimate to the college culture and nursing coursework, but also to their peers within that culture.

Difficulty with their peers was an identified issue throughout the student veteran college experience. According to the Merriam-Webster online dictionary (n.d.), a peer is someone that is viewed on equal standing with another person. Within this research study, peers were individuals that student veterans attended classes with at their higher education institutions. The demographics of this student peer population varied from the student veteran population. The National Center for Education Statistics (2018) reported that in fall 2015 the number of students under age 25 was 89% at public institutions and 86% at private nonprofit ones. The student veterans participating in the current research study were all enrolled at either public or private nonprofit institutions. These statistics are important to note because the average age of the study

participants was 34 years old, a nine-year difference from their peers; in some instances, this age difference could be as many as 16 years. Additionally, four of the study participants were over the age of 40 further expanding this age difference. Because of this age difference, several of the study participants identified they were at different points in their lives from their much younger peers. With age comes different life experiences, life circumstances, and responses to the stressors present in academia. The student veterans in this research study all had combat experience and were all part of a regimented culture that required maturity and professionalism. Additionally, the student veteran population had a value system that was engrained from initial entry into the military. They lived this system every day of their lives for the duration of their enlistment. These values further encompassed the focus and discipline mentioned previously. Their younger peers do not necessarily have these traits and in some cases don't see the importance of them. Additionally, the student veterans were in combat. They know the importance of providing adequate appropriate care and realize that individual's lives are at risk. DiRamio et al. (2008) identified similar findings and discussed the difference in maturity and associating this with the student veterans combat experience. Their younger peers have not had these same experiences, which made it difficult to relate to them. Therefore, when students complain about assignments or work required for a class, it frustrates student veterans because they understand the true importance of what they are learning and focus on the content presented.

Moving from a disciplined and structured military culture with combat experience to one where the population is younger, less experienced regarding life situations, and lacking professionalism may be why in many instances it was difficult for student veterans to relate to their much younger peers. Additionally, it may explain the disconnection that exists between veterans and their nonmilitary peers. As seen in the current research findings, they attribute this

disconnection to the behaviors and attitudes of their peers highlighting the immaturity that was present. Additionally, they identified differences in work ethic from their nonmilitary peers. Olsen et al. (2014) discussed similar findings emphasizing how student veterans become frustrated with the attitudes of nonmilitary peers as well as their lack of maturity. Previous research has also shown that student veterans also feel isolated and alienated in higher education (DiRamio et al., 2008; Durdella & Kim, 2012; Graf et al., 2015, Naphan & Elliott, 2015), but this discovery was not consistent within the current research findings. While there was one instance when a student veteran did not feel accepted, this was not conclusive across the study sample. To the contrary, some of the student veterans specifically stated that they did not feel isolated or alienated. This may be associated with the increased military presence or the increased activities provided for student veterans at their institutions because of the HRSA grant funding and designation as Military Friendly®. While this is the case, they still avoided individuals that lacked maturity, focus, and work ethic but were open to forming new relationships with those having similar characteristics as themselves. What is not clear is if the differences in isolation and alienation are present because of previous experiences or potentially their immersion within the nursing program.

While student veterans did not feel isolated or alienated, they identified that their nonmilitary peers did not understand them. An exploratory research study conducted by Graf et al. (2015) further supported this finding regarding nonmilitary student's inability to understand the experiences of student veterans. Understanding these experiences as identified by Hammond (2013) included their combat experiences, military life, and the impact that nonmilitary actions can have on previous military members, i.e. comments and questions. This lack of understanding is another factor that contributes to the divide between student veterans and their nonmilitary

peers. Previous research has shown that student veterans withdraw and become more isolated because of these factors, but this was not true of the current study population.

The student veterans within this study sought out others that were similar to them, and they did not isolate themselves. Student veterans miss the close community they experienced in the military (Ingala, 2011). In the military, there are many instances when personnel are together with their peers for a prolonged period of time. These periods could include training, daily operations, or as was the case with all of the study participants, deployments. During these times, veterans develop a sense of community. Once they enter academia, they seek this out again. When they are unable to establish this sense of community, student veterans identify as having a lower level of a sense of belonging (Durdella & Kim, 2012). The ability to establish a community is imperative as it provides support for the student veteran. As identified previously, peers are identified as being on equal standing. This classification of equal standing is not isolated to age. In some instances, their peers were other veterans, but in others they were individuals with other commonalities such as age, similar expectations, and furthermore, individuals also in their nursing program. Several student veterans discussed how they were in the same situation as their nonmilitary peers, which brought them together helping them to reestablish a sense of community.

As established by McMillan and Chavis (1986), development of a sense of community is accompanied by a feeling of belonging, feelings that members of the group matter to one another, and that member needs will be met by their commitment to each other. In the military, a sense of community develops through training and missions they perform. Military members depend on each other during these times. They are part of a team and they have purpose within that team. The need for this sense of community carries through into their nursing program. The

student veterans within the current research study identified that they are all working toward their degree. They have a shared goal. In addition to this goal, they share similar expectations and work ethic with other members of their group. While the individuals within the group may not have a military background, their shared purpose and commitment assisted in their development of a sense of community and they came to rely upon each other. If members of the group did not meet the established expectations, then they were not a welcome part of the group. This relates back to the importance of mattering to one another and their commitment to the success of the group.

While they do seek out peers similar to themselves, if individuals with previous military experience are present, they are drawn to them first. The bond between military veterans was evident across the literature (Hammond, 2013; Olsen et al., 2014; Ingala, 2011). These researchers found that student veterans sought other veterans because they understand each other and have strong connections based on their experiences. Within these relationships, they provide each other with unconditional support and attain a level of comfort with each other (Hammond, 2013). The student veterans within the current research study shared similar experiences when connecting with their military peers. They also established their ability to talk to their military peers because of this comfort level. They understood what they had experienced during their military time and could relate to one another. Additionally, student veterans use this military link to cope with the stressors of academia as well as their previous combat experience (Gregg, Howell, & Shordike, 2016). The study participants emphasized the importance of this ability to support each other within their nursing program. In several of the institutions, this veteran link was possible, but in smaller institutions the student veterans were the only ones in their course, therefore they sought out individuals with other similarities for support.

Reestablishing a sense of community with their peers, military and nonmilitary, provides another form of support both emotionally and academically to facilitate their success within their nursing program. This additional support may explain why they did not feel alienated or isolated as established by prior research. Additionally, the previous research was conducted at higher education institutions, not focused on a specific degree program. Nursing programs require students to spend large amounts of time together, similar to the military. Therefore, this increased immersion with their classmates may lead to an increased sense of community with their peers both military and nonmilitary.

Within this new community student veterans establish, they start to assume leadership roles. These roles can be attributed again to the instruction received during their military training and career. The leadership roles they accept can be formal or informal. Formal positions include student representatives and heads of student organizations. Informal positions included leading student led study groups, mentoring fellow students, and tutoring. As identified throughout the discussion of findings, student veterans expressed a continued willingness to help others which is conveyed in these leadership roles. While this help was focused primarily on other students, they did identify the desire to help faculty at times as well. This help was primarily discussed in the clinical setting but could potentially span to the classroom. This is important to note, considering the increase in initiatives by the NLN, ANA, AACN, and the VA aimed at improving nursing education regarding the provision of veteran health care (NLN, 2012). This inclination to want to help could lead to collaboration with student veterans to improve veteran care. The student veterans within the current research study also discussed how they sought out leadership positions to assist with improving the nursing program. These positions included student representative roles and leading student groups. They want to provide a voice but also help those

around them. Their roles in these positions further assisted in their acclimatization to the nursing program affording them the ability to establish control over their education and assist in improving the education experience. Additionally, these leadership characteristics facilitated their ability to function effectively in team and groupwork activities (Olsen et al., 2014). They were able to collaborate with their peers and maintained confidence in their ability to do so, further assisting with their acclimatization.

Peer support and leadership roles provided mechanisms for student veterans to adjust to higher education. To further assist with acclimating, student veterans also sought support from faculty or veteran liaisons. Several research studies identified that student veterans felt that the support available was not adequate at their institutions (Barnard-Brak et al., 2011; DiRamio et al., 2008; Graf et al., 2015; Jones, 2013). In the current research study, upon initial entry the lack of support was a concern, but it was because they were not always aware of the resources available. Some of the study participants discussed this regarding their first semester. When the interviews were conducted, they were all into their second, third, or fourth semester and henceforth, became aware of what was available. At this point in their education the study participants identified that the resources available were adequate, but no specific resource was needed for them to stay at their current institution. Additionally, once they were aware of what was available, they did identify that the resources did assist their progression in their nursing program.

Many times, support was not always sought out initially, but their determination to succeed encouraged student veterans to reach out for help. Previous research has revealed similar findings regarding support and student veterans. Multiple reasons have been identified for why they do not seek out support including lack of free time or living off campus (Livingston et al.,

2011). A majority of the study participants did live off campus as alluded to during their interviews. Another commonality, lack of free time, presented because of the multiple roles student veterans are fulfilling, including employment and family obligations. They did identify that they did not always seek emotional support but did seek out support for academic purposes. Seeking out support emotionally for student veterans can be difficult especially if they are not comfortable sharing their military experiences. Additionally, this emotional support is many times received from their families, student veteran peers, or military faculty and not necessarily counseling centers on campus. These individuals understand the student veteran's military mentality and present a safe environment for them to share their concerns.

While this is true of emotional support, they do seek out institution resources for academic support. This finding contradicts the findings of Livingston et al. (2011) that student veterans did not seek out support for academics. DiRamio et al. (2015) also discussed that the amount of support sought varied depending on their class standing. This also was not true of the current study population. The student veterans were at varying levels and individuals at each level identified seeking out support when it was needed. They sought out this support because of their determination to succeed. As mentioned previously, they will use what resources are available to accomplish their mission, their nursing degree. Therefore, the need for support during acclimating to higher education cannot be underscored.

Additionally, support may come from a variety of sources. The importance of peer support was discussed previously. Support may also come from veteran liaisons or faculty. The veteran liaison role was highlighted throughout the current research study. The NEPQR: VBSN HRSA grant was aimed at enhancing student support. At several of the institutions a veteran liaison specific to the nursing program was instituted. It should be noted that at institutions

without the grant, the head of the veteran or military resource centers acted in this role and will be referred to as veteran representative. Student veterans identified the importance of the veteran liaison and/or veteran representative, especially during the entry phase of the program. As discussed by the study participants, individuals in these roles were invested in their success. They were identified as available and open, and they expressed a strong desire to assist the student veterans in their pursuit to obtain their nursing degree. They provided access to resources and assisted with financial issues regarding funding, paperwork needed, and navigating the higher education system.

The research also supported the idea of the importance of the role of the veteran liaison and/or veteran representative as an important part of transitioning in higher education. Murphy (2011) also found that student veterans identified the veteran liaison as a consistent form of support and was depended upon throughout their college experience. As seen in the current research study, the student veterans identified that the veteran liaison and/or veteran representative provided emotional support as well as assisted with navigating academia. In many instances individuals in this role had prior military service, but this was not always the case. Regardless, they consistently provided resources that facilitated the progress of student veterans throughout their college career.

Faculty support was another important factor that impacted the success of student veterans. This support was identified in faculty with and without prior military experience. The study participants identified that faculty with military experience “know what they have been through” and in some instances, emphasized the increased comfort they had with these individuals. Additionally, student veterans identified the importance of having clear expectations and that courses were organized. They identified that faculty with previous military experience

provided a learning environment with these important characteristics. Similarly, Murphy, Zangaro, and Gadsden (2012) identified that faculty with previous military experience provided “clear expectations, clear presentation of the material, direct communication, and internal equity in grading” (p. 207). Therefore, faculty with previous military experience provided student veterans with the structured learning environment they needed to acclimate to higher education. In addition to fulfilling this need, they provided student veterans with emotional support and exhibited a genuine invested interest in their progress throughout the program. The military mindset shared between these two groups, students and faculty with previous military experience, provided a vector for communication. It established a bond between them. Several study participants discussed how this commonality allowed them to seek out support when they were struggling. Also, faculty sought out student veterans when they saw them struggling. Both groups realized the importance of completing the mission and ensuring they had the resources to do so. This support from faculty was not only present with faculty with prior military experience, some student veterans discussed the support provided by nonmilitary faculty. This support was typically isolated to assistance with academics, but behaviors such as being open encouraged student veterans to seek out these faculty members.

While support resources including the veteran liaison and faculty were important, the physical resources also facilitated success. The resources available shape the student veterans’ reintegration into the college environment (Tomar & Stoffel, 2014). Resources that provided the ability to connect with others student veterans and assisted in their ability to obtain their education were identified as important in the current research study. The resource most prominently discussed by the student veterans was the veteran resource center. This center was an area isolated to student veterans. At some institutions, they had centers specifically for

nursing students whereas with others, they were open to the entire institution. At these centers, student veterans had computer access with printing capabilities, an area to relax and decompress, and in some, refreshments. While these may be seen as basic, they provided the students veterans with their own area where they did not have to compete for resource access. They also provided the opportunity to link with other student veterans, which was an important factor in their ability to acclimate to higher education. Additional resources such as tutoring, and textbooks also supported their pursuit for success. Considering the financial concerns plaguing many student veterans in academia, it is important to note that free resources such as textbooks can benefit this population of students. Free tutoring services can also facilitate their transition and can help with student veterans in shifting their thinking, test taking, and the development of study techniques.

Implications

The current research and previous literature support that student veterans share similar experiences across academic settings. The student veteran population is growing, and more veterans are entering nursing programs. Considering this growing population, institution administrators, faculty, and veteran service personnel need to realize the impact this will have on higher education. Additionally, institution leaders need to understand the resources and steps needed to support this growing demographic of students and enhance retention. This section will discuss the implications regarding student veterans in higher education.

Student Veteran Support

As student veterans enter higher education the support available becomes an important factor. The research conducted alluded to support services that may positively impact this transition. This section will discuss these services including creating a support network, creation of veteran resource centers, and instituting the role of veteran liaison.

Creating a support network. As seen in the literature and this current study, student veterans sought out other veterans as a source of support. The creation of student veteran groups both institutionally and within their specific degree program may unite veterans and provide a way for them to meet each other. Student veterans from the current study and past research identified the importance of aligning with other student veterans because they understand each other, and they are comfortable discussing concerns. Providing support activities will help them start to create a support network they are comfortable with and willing to reach out to when they are having difficulty. Student veterans reach out to other veterans as a source of emotional support more often than using institution resources. Therefore, providing this networking opportunity may further assist with retention of student veterans because they will have someone else to confide in and discuss concerns with.

Another option would be to create a student veteran group within the nursing program to assist their acclimatization to nursing. The student veteran group can encompass all levels of the nursing program. This would provide a safe setting for them to discuss concerns or questions with other student veterans. Additionally, upper classmen participating in the group may help with the transition into the nursing program for new students. They can provide study strategies, helpful suggestions for learning content, and support for retention. Also, a faculty member with previous military experience could act as a liaison to this group. Within the literature it was seen that student veterans feel more comfortable with expressing their concerns and emotions to faculty with previous military experience because they understand the military mentality. Therefore, if a faculty member with previous military experience is available this may be a viable option for the liaison between faculty and students. Including this component, may increase the likelihood that students' express concerns and frustrations they may be

experiencing. Furthermore, providing this support system may increase student retention and success. They can discuss when they are overwhelmed or when they are having difficulty. Instead of retaining these feelings they can work through them with their veteran peers. Additionally, faculty would have the opportunity to make changes or provide additional learning opportunities to enhance student veteran retention within the nursing program while also providing a supportive role.

Faculty should also encourage student veterans to participate in groups within the nursing program. For example, student veterans could participate in the Student Nurses' Association (SNA). Within the current research study, a few of the student veterans fulfilled leadership roles in these organizations. They identified that it provided them with the opportunity to help improve their current program. Organizations such as the SNA can allow student veterans to voice their opinion and use the leadership skills they attained during their military career. Additionally, it can help them to become more involved within the nursing program and network with other nursing students, enhancing their sense of belonging.

Also, faculty should consider creating informal gathering opportunities at the start of the semester. These gatherings would allow student veterans to network with other student veterans. Examples of these may include an ice cream social or a breakfast/lunch event. These would be nonmandatory but provided to encourage networking between the student veterans. They also could be expanded to the entire nursing program to encourage student veterans to begin to associate with their nonmilitary peers. These types of events would also allow student veterans to destress and socialize in a nonacademic atmosphere.

Veteran resource center. A prominent finding from the current research was the importance of the veteran resource center. In some cases, these centers were provided for the

entire institution and others were specific to the nursing program. Most institutions already have an established university wide resource center, but few have one for specific degree programs. The institution wide centers are focused on assistance with administrative and financial concerns. Administrators could consider providing this resource for student veterans in the nursing programs. Student veterans are typically commuters and when they have large blocks of time between classes, they need to find an area to study or decompress. Providing student veterans with this area within the nursing building, will increase ease of access and increase the likelihood of use by student veterans. Additionally, it will provide a place for veterans to network with other veterans. Research has shown that veterans seek out other veterans because they can communicate with each other and provide emotional support. Also, within the veteran resource center, students could have access to printers and computers. Another consideration would be the inclusion of nursing textbooks. The student veterans from the current study discussed how these resources helped them both financially and academically. These areas would be isolated to student veteran use providing them with an area to decompress from the stress of nursing school. Potential funding resources for the creation of these centers may include grants from the U.S. Department of Education, the Health Resources and Services Administration, or the Department of Veteran Affairs.

Veteran liaison role. The veteran liaison role specific to the nursing program was highlighted as a valuable resource for student veterans. Individuals in this role not only act as a mentor to student veterans but also provide a source of support for adjustment to the college environment. Additionally, the student veteran liaison, as seen in the interviews, can assist in providing student veterans with important information to facilitate their transition. This information may include tuition assistance programs, educational assistance programs,

counseling resources, opportunities to network with other veterans, assistance with navigating the requirements of the nursing program, and knowledge of additional veteran resources located in their local area. This assistance was also identified as an area of need in the student veteran literature. Student veterans identified a need for assistance with admission and financial requirements which the veteran liaison can provide. Additionally, the veteran liaison role can extend further to helping student veterans navigate nursing curriculum as well as providing emotional support during times of stress. To facilitate this transfer of information to student veterans, the veteran liaison may also act as the advisor to student veterans. Acting as an advisor, veteran liaisons could coordinate networking events and scheduling to further assist veterans in acclimating to the nursing program.

While it was seen as a positive when individuals in this role had prior military service, it was not a requirement. Higher education institutions may consider hiring faculty with previous military experience to fulfill this role. In a recent news release by the NLN (2018), they discussed the importance of integrating military nurses into higher education to meet the current nursing faculty shortage. The NLN recently established the *Preparing Military Nurse Officers for an Effective Second Career in Nursing Education* Toolkit to support nursing program administrators to facilitate the movement of military nurses into the role of nurse educator. Previous military experience would not be the only requirement for fulfilling the role of veteran liaison. An important component of this role is an enhanced understanding of the student veteran population. Therefore, potential candidates that could provide support regarding their knowledge of resources available and veteran experience would further enhance their ability to effectively perform as a veteran liaison. The veteran liaison would also be able to provide orientation services to students to enhance their awareness as well. As seen in the literature and current

research study, student veterans are not always aware of the resources available. If they do know, they may be more apt to use the resources available and henceforth, improve retention of student veterans in nursing programs. Additionally, the inclusion of this role may facilitate student veteran's retention in nursing programs because of the support provided.

Institution

The research study conducted identified factors at an institution level that may impact the transition of student veterans into academia. The study participants, in addition to previous literature, discussed their lack of awareness of resources available. Additionally, they identified that their experience is not always recognized. This section will further discuss the implications at an institution level including implementation of a veteran orientation program and the development of teaching-learning strategies aimed at the student veteran population.

Veteran orientation program. Inclusion of an orientation developed specifically for student veterans may benefit this growing population. Within this orientation, faculty could provide information regarding resources available for student veterans. While many of the student veterans knew what resources were available, this was not true at some of the institutions. Key resources to alert students of may include counseling services, veteran groups on campus, tutoring services, veteran resource centers, and online resources. Therefore, an orientation could ensure that veterans are aware of what support resources are available to facilitate their retention and success.

Prior learning assessments. Another concern that arose was that their previous experience and education was not recognized in higher education. Implementing programs that would provide credit for their past experiences and education would benefit student veterans. These programs may include providing student veterans with the opportunity to submit a

portfolio outlining their previous education, training, and experiences. Including these programs, would ensure that student veterans are not repeating their past learning and will allow them to be engaged in new learning. Additionally, recognizing their previous experience shows that institutions value their expertise. While this would not be the only requirement, institutions can provide student veterans with the opportunity to take Prior Learning Assessments to grant credit for their competencies and knowledge (National Council of State Legislatures [NCSL], 2014). As revealed in the current research study, several of the study participants had 10 or more years of experience as medical personnel. Many were deployed multiple times requiring further use and development of these skills emphasizing skill proficiency.

Nursing Program

Institutions could also consider providing student veterans with the opportunity to demonstrate skill proficiency upon entrance into the nursing program. Using this testing, educators can place student veterans into the program at the appropriate level. Educators could use the simulation lab on campus for this testing. Additionally, nursing programs specifically could consider using an Objective Structured Clinical Examination (OSCE). Using an OSCE, student veterans can be provided with several focused short stations to perform their skills (OSCEhome, 2018). Students would be expected to perform skills at these stations on standardized patients. In addition to these stations, faculty can include a testing component at the end of the skills portion where student veterans will need to answer further questions about the scenarios to further assess content comprehension. Providing them with the opportunity to gain credit for their experience may decrease the time and cost to obtain their degree (NCSL, 2014).

Additionally, considering the complexity of shifting the thinking paradigm from military medicine to nursing, institutions may consider implementing programs with their orientation that

assist veterans in nursing programs. Nursing program faculty could provide student veterans with a workshop prior to the start of classes. This workshop could be aimed at improving study techniques, organizing notes, developing critical thinking for student veterans, and test taking skills. Faculty may consider during this seminar having student veterans from the upper level nursing courses speak with incoming student veterans to identify what techniques were effective for their progression. Additionally, they can provide knowledge of available resources including supplemental instruction, study group sessions, tutoring, or other strategies to assist with improving retention of the nursing content. These types of learning modalities can also provide student veterans with peer support and identified area of need from previous research. Student veterans identified difficulty with study techniques and strategies after being away from school for an extended period. These sessions can provide case studies about the content that can move students from basic memorization to applying the content and developing decision-making skills.

Student veterans also identified the need to shift their thinking to develop critical thinking skills. Faculty can use the knowledge and skills from the student veterans' military experience as a foundation upon which to build critical thinking skills. Considering the focus of military medical education on emergency response, faculty can move students to think beyond this. Using the simulation laboratory, they can encourage student veterans to identify the next steps in patient care. They can also move the skill to different settings not only emergency situations and start to have students see the patient from a holistic viewpoint and consider what else could be impacting them.

Lastly, during these orientation sessions, faculty can provide assistance with test taking skills. These skills include the ability to identify what the questions are asking, eliminate options, identifying priorities, understanding the scope of practice, and answering questions objectively

(Poorman, Mastorovich, Molcan, & Gropelli, 2017). Student veterans use their previous experience as a guide for learning and testing, which has a basis in emergency medicine. Therefore, clarifying how to answer test questions and what to look for can build on the need to develop critical thinking. Faculty can provide student veterans with strategies to improve test taking such as rehearsing, planning, relaxation exercises, and analyzing previous testing performance (Poorman et al., 2017).

It would be optimal if these workshops were provided at the beginning of each semester to facilitate success into the nursing courses. These sessions can be specialized based on nursing content. Additionally, this content could be used to develop critical thinking scenarios in preparation for the upcoming semester. Many of the student veterans identified that they had more difficulty with the upper level nursing courses. Nursing program administrators may consider implementing more extensive programs at these levels to further assist this transition for student veterans.

Faculty should consider providing these activities in an online environment. Many student veterans commute to school and have obligations outside of higher education including families and work. Providing this in an online modality will increase accessibility while also allowing the student veterans to view the content when they have the time throughout the semester or program. Additionally, faculty could consider providing the opportunity for application of the content. This can be accomplished in the simulation lab. To enhance participation, faculty want to consider when to provide these learning activities because of the aforementioned reasons, including commuting, family, and work.

Faculty Education Sessions

As seen by the current study findings, faculty play a major role in student veteran retention in higher education and more specifically, nursing. To facilitate faculty in their role, institutions may consider implementing awareness programs for faculty regarding student veteran learning needs. Additionally, the development of workshops focused on teaching-learning strategies may provide faculty with the resources they need to help increase student veteran retention and success in academic programs.

Raising awareness. It is important that educators understand the learning needs of student veterans. While resources were identified as assistive, they were not the only items that veterans found helpful. Faculty were identified as a valuable resource. This finding was especially true of faculty with previous military experience. Faculty were one of the first resources that student veterans sought out in times of need both with academics as well as a source of support. Understanding the influence faculty can have on the student veteran experience, it is imperative that faculty understand the perspective of the student veteran. Faculty awareness of difficulties student veterans experience may help educators structure teaching-learning activities as discussed previously.

In addition to teaching-learning strategies, faculty need to be aware of potential risk factors that may impact student veteran success. Traits such as having an open-door policy and being approachable were seen in this study as factors that impacted student success. To enhance faculty awareness and understanding of the veteran population, institutions may consider providing an education seminar focused on student veterans. Additional ways to supply faculty with this information could include workshops, information on institution websites, orientation sessions for new faculty, and advisor training for faculty with student veterans as their advisees.

Additionally, institutions may consider having veteran resource centers provide this training to faculty. In many instances, the individuals working in these centers have previous military experience and are valuable assets regarding understanding the military experience. Additionally, tools such as the VA Campus Toolkit (Department of Veteran Affairs, n.d.) can be used to assist faculty understanding of this growing population of students. The VA Campus Toolkit provides educators with information regarding student veteran demographics, common adjustment experiences, ways to help veteran students based on their role, and initiatives such as the Veterans Integration to Academic Leadership initiative (Department of Veteran Affairs, n.d.). Through the provision of these resources, faculty can start to learn about the veteran population and their specific learning needs. It is also important to note that student veteran needs may vary from student to student and education programs such as this can increase this awareness.

Teaching-learning strategies. Throughout military education, students are immersed in a group learning atmosphere. During advanced training where they learn their specialty, military personnel are provided with a large amount of information in an abbreviated amount of time. Additionally, this is their only focus at that time as they are in a controlled military training environment. Therefore, they use group learning as an effective tool for content retention. Considering these past learning experiences, nursing faculty may consider creating study groups or encouraging student veterans to create their own study groups. These groups will allow discussion of the content, the ability to review the content, and the opportunity to study the content together. Faculty may also consider providing the opportunity for group learning within the classroom. While this may prove difficult with the increased pace of nursing courses, faculty may consider using case studies to present the information and have students work in groups to answer questions and discuss the case study.

Additionally, student veterans need to see the relevance in the content taught (The Army University, 2017). It is important for faculty to blend education and practical training. Faculty could consider using the simulation lab and provide time for practice after content is presented. Also, depending on the content presented faculty can allow time for active learning to occur through discussion or debate. This would allow students the opportunity to further develop the ideas learned in class and start to brainstorm potential examples or scenarios associated with the content. Additionally, faculty can use clinical post conference as another opportunity to provide this link between class and clinical. Ensuring content is presented in this manner will link what they are learning in class with what they are doing in clinical. Student veterans will see the importance of the content and therefore, be more apt to apply what they are learning in practice (Department of the Navy, 2009). It is also important to encourage students to ask questions and participate within the learning environment. Many times, student veterans associate what they are learning with their past experiences. Considering that previous military experience may include combat, not all experiences can be shared, student veterans should be provided with an open and sharing learning environment where they can apply what they know to the current content they are learning.

Additionally, student veterans function best with clear expectations. Faculty need to ensure they are providing clear and timely instructions for assignments. It is also important to structure the course from the beginning and adhere to the syllabus provided. When the course timeline, assignments, or expectations are modified during the semester, this creates a conflicting learning environment for the student veteran. To facilitate a structured learning environment, faculty may consider providing a calendar or detailed outline regarding when assignments are due. Student veterans are used to planning and preparing from their military experience. They

identified that they plan weeks and even months in advance. Knowing the course expectations ahead of time will allow them to continue to plan and prepare for course work assisting with decreasing stress levels. Furthermore, faculty may consider providing students with rubrics for assignments at the beginning of the semester. In the military, student veterans had clear directives and detailed instructions regarding what was expected of them. Therefore, providing rubrics may also enhance the student veterans' ability to plan and prepare and provides them with clear expectations regarding assignments. Therefore, maintaining a structured learning environment may facilitate the retention of student veterans within the nursing program.

Role of Student Veterans in Nursing Programs

While the student veteran population is growing, so is the number of veterans currently receiving health care resources. In 2012, First Lady Michelle Obama and Dr. Jill Biden organized the Joining Forces Initiative (NLN, 2012). The wellness priorities established for this initiative were focused on training and educating health care providers about the unique health care needs of the veteran population (NLN, 2012). Because of the increased population of veteran patients, understanding the care needs of veterans is becoming more imperative. Student veterans may provide valuable information for nurse educators regarding these care needs. They can supply faculty with an understanding of this growing population of patients. As seen in the current study findings, they are willing to help others. Student veterans may assist faculty in developing programs to enhance learning about the veteran population in healthcare. They can provide a different perspective that can also help other students better care for and communicate with veterans in the health care setting. Therefore, putting initiatives in place to retain this population is imperative to nursing education. Faculty need to see the value of seeking insight and guidance from student veterans regarding veteran patient care. Additionally, by seeking

student veterans' perspectives, faculty demonstrate that they value student veterans and their experiences and realize their importance within the health care setting.

Additionally, student veterans' knowledge and experience combined with their leadership skills can be an asset within the nursing student population. The study participants in the current study emphasized that they want to not only succeed themselves, but they also want to see their fellow students succeed. Faculty should consider providing student veterans with the opportunity to mentor other students. This position could prove invaluable especially in simulation labs considering their skill experience from the military. Faculty may also consider pairing student veterans with other students in the clinical setting. They want to see other students excel, therefore, they can provide encouragement for students that have low confidence levels that are struggling in the clinical setting. Additionally, student veterans could provide mentoring in the classroom. Furthermore, regarding their leadership capabilities, faculty may consider leadership roles for student veterans. These roles may be formal and informal. Student veterans could be encouraged to lead study groups or become leaders of nursing student organizations. Also, their leadership skills can be further utilized in the clinical setting, identifying them as team leaders. Furthermore, considering the solid skill foundation obtained during their military careers, student veterans can assist in simulation training, either facilitating other students in completing skills or acting as team leaders during simulation exercises. During their military careers, the student veterans were in leadership positions, which allowed them to develop leadership characteristics, but which also engrained in them the importance of team work and ensuring everyone fulfills their role. Student veterans can use the leadership skills attained during their military training including their time management skills, ability to prioritize, and their previous experience mentoring other soldiers to facilitate the simulation exercises and the learning process.

These attributes further support the importance of retaining student veterans in nursing programs. Both institutions and nursing programs have multiple opportunities to implement retention programs for student veterans. Administrators can use resources already in place such as military resource centers or create new ones to assist in retaining this growing population of students.

Limitations

During the interview some study participants were not as forthcoming with information as others. All participants answered the questions, but in some cases the study participants did not elaborate as much in their responses to these questions. Additionally, even when prompted the responses were not as descriptive as expected. It was also anticipated that adding the opportunity to verify findings would impact the amount of information provided, but in some cases the study participants were not as open regarding their experiences. While this may be attributed their comfort level discussing the topic, additional probing by the researcher was required. Additionally, not all of the research participants responded to the follow-up interviews, which could have revealed further information and insight regarding their lived experience. Another limitation is researcher bias. While the researcher did use bracketing and reflective journaling to eliminate bias, the potential is still present. The researcher had previous military experience, which could potentially influence the study findings. Even though this potential existed, the previous military knowledge and experience also could have facilitated the researcher's understanding of the language and culture influencing the student veterans' experiences.

Recommendations

The previously discussed implications may help higher education administrators and nursing faculty retain student veterans within institutions and nursing programs. While these

were alluded to in the current research, further initiatives to understand and retain the student veteran population are needed. This section will discuss recommendations including further research, funding initiatives to support the implications, and policy changes to facilitate student veteran retention and acclimatization to higher education.

Research

This study was focused on the lived experience of student veterans in BSN programs that either received HRSA grant funding or were designated as Military Friendly® on the east coast. Because it was anticipated that these institutions would have resources aimed specifically at the student veteran population impacting their lived experience, it would be important to further study the lived experience of student veterans at institutions without this funding or focus. By expanding data collection to other institutions, researchers could develop a broader sense of the lived experience of student veterans in BSN programs. Expanding this research nationwide may also provide valuable information regarding the veteran experience and if any differences exist at other institutions. Additionally, this research was limited to BSN programs. Further research regarding other program types including associate degree, diploma, and accelerated degree programs could also provide further knowledge of this experience and potential differences that may exist.

Student veterans may identify other concerns about their experiences. Another consideration is that student veterans in academia across various degree programs identified feeling alienated and isolated (DiRamio et al., 2008; Durdella & Kim, 2012; Graf et al., 2015, Naphan & Elliott, 2015). These feelings were not seen in the current research study. Therefore, researchers need to explore if these differences were due to the increased military support or the constant contact students have with each other in nursing programs, forcing them to develop

connections with classmates. Another difference noted in this study was support-seeking behaviors. In previous research it was identified that student veterans do not seek out support, but in the current study the participants sought help from other students and faculty. Further research regarding the differences in these support-seeking behaviors is needed to identify what encouraged student veterans to pursue help when they experienced difficulty within the nursing program. The current research study was focused on student veterans with previous combat experience. It is not clear if student veterans that have not been deployed or that are members of the military reserve component would have similar experiences. Therefore, broadening the sample to include all individuals with previous military experience may allude to any differences that exist regarding the transition into higher education between these populations. Researchers could use focus groups or semi-structured interviews to attain this information. It is important to note that many student veterans are commuters and typically do not spend large amounts of time on campus. These differences may require researchers to use alternative research modalities such as Skype, AnyMeeting.com, or telephone interviews for data collection.

It is also important to examine specific resources that benefit student veterans. Development of a quantitative research study focused on institution resources and their impact on the student advancement within nursing programs would assist in determining which resources would be beneficial to the student veteran population. The study sample could include both combat veterans and those without combat experience including members of the military reserve component. With future data collection, it may be important to add additional demographic variables that investigate enrollment categorizations, i.e. part-time or full-time and grade point average. These variables are important to include because the resources used may vary depending upon previous experiences as well how students are immersed within the college

environment. A longitudinal study examining these factors, resources available, student GPA, course progression, and graduation rates would assist in identifying resource effectiveness. The use of a longitudinal study may provide researchers with further information regarding how the student veteran experience evolves as they progress through the program. It may also provide information regarding student needs at various points in the nursing program. Because this would be a self-report study, it would be important to also note attendance at veteran specific programs or seminars and resource use from the institution. Additional factors to include may be frequency of resource use and the amount of time spent using resources. Furthermore, this type of study would provide researchers with information regarding what resources are deemed most helpful to the student veteran population. As seen in the literature, student veterans do not always use the resources available. Therefore, it would also be important to identify what is used and what could be modified to better assist student veterans.

Further research is also needed regarding how student veterans adapt to college and more specifically nursing programs. The Student Adaptation to College Questionnaire developed by Baker and Siryk in 1987 (2018) provides a quantitative tool that analyzes four areas: academic adjustment, personal-emotional adjustment, social adjustment, and attachment to the institution (para.1). In the current research study, many factors regarding acclimatization to the college culture were discussed. Using a questionnaire such as the Student Adaptation to College Questionnaire (SACQ) may provide a further explanation as to how the students are adapting to nursing programs. Researchers may include with this questionnaire demographic factors that may influence the student veteran experience as well including family, financial concerns, and living situation. An open-ended question regarding the influence these factors have on their experience may also assist in understanding the student veterans' responses to the SACQ.

Funding

The current study was focused on programs that had HRSA grant funding or were identified as Military Friendly®. The HRSA grant funded nursing programs offered additional resources specific to student veterans as compared to Military Friendly®. Therefore, those institutions had increased funding aimed at nursing programs to offer tutoring, textbooks, printing services, veteran resource centers, and additional education opportunities for student veterans. Because of the associated cost of these initiatives, academic institutions and more specifically nursing programs should seek out funding to facilitate putting these valuable resources in place. An example of current funding to higher education institutions offered by the U.S. Department of Education include Veterans Upward Bound (2018). This grant program offers assistance with creating programs that enhance the retention of student veterans in higher education. Use of these resources may facilitate initiatives to retain the aforementioned resources for student veterans in nursing programs.

Policy

As seen from the previous research, the military personnel participating in this research study had prior medical experience from their military career. In some instances, this experience was recognized at their institution and they were provided the opportunity to test out of course work they were already proficient in, but in others this is not the case. Therefore, nursing education leaders may consider seeking policy changes at their institutions regarding awarding student veterans' credits for their previous military training and experience. Nursing education leaders may also consider implementing plans to allow student veterans to take Prior Learning Assessments (PLA) to evaluate knowledge and using OSCE to evaluate skills. These tools could provide educators with the opportunity to test proficiency prior to awarding credit for nursing

courses. Additionally, a study conducted by The Council for Adult & Experiential Learning (The CAEL, 2010) found that individuals earning PLA credit were more persistent in attaining their degree as compared to students without PLA credit. They were also two and a half times more likely to complete their degree (The CAEL, 2010). While in many instances, PLA would provide credit for introductory courses, instituting the OSCE could expand the faculties ability to further evaluate student veterans for degree specific courses. Current legislation initiatives are aimed at providing funding for veterans to take these exams. One current act is the Military Learning for Credit Act. This act will allow a small portion of their GI Bill funding to be used toward these assessments (Randolph, 2018). This legislation will facilitate testing and the likelihood of changes in policy because of the funding allocation. Therefore, it is important for academic institutions, veteran leaders, as well as nursing faculty to lobby their representatives regarding these initiatives to facilitate the progression of student veterans in nursing programs. Additionally, recognizing their past accomplishments can enhance the student veterans' feelings of belonging and of being valued henceforth potentially increasing their retention within nursing programs.

Summary

This chapter discussed the findings of the current research study. The implications provided may be used by educators to enhance the retention of student veterans in higher education and, more specifically, in nursing programs. The implications focused not only on the student veterans but on initiatives for faculty and administrators. Limitations of the current study were also discussed. Recommendations for future research encompassed expanding the sample seeking diverse participants and programs, using quantitative research methods, and completing a longitudinal study. In addition to this research, recommendations for funding and policy

development were also provided. The student veteran population is continuing to grow.

Instituting these initiatives may have lasting effects on both academia and the nursing profession.

References

- Ahern, K. J. (1999). Ten tips for reflexive bracketing. *Qualitative Health Research, 9*, 407-411.
- Allen, P., Billings, L., Green, A., Lujan, J., & Armstrong, M. L. (2012). Returning enlisted veterans-upward (to) professional nursing: Not all innovative ideas succeed. *Journal of Professional Nursing, 28*, 241-246. doi:10.1016/j.profnurs.2012.03.002
- America's Navy. (n.d.). *Medical support careers*. Retrieved from <https://www.navy.com/careers/medical-support>
- American Association of Colleges of Nurses. (2015). *Mission and values*. Retrieved from <http://www.aacn.nche.edu/about-aacn/mission-values>
- American Council on Education. (2008). *Serving those who serve: Higher education and America's veterans*. Retrieved from https://www.pdx.edu/sites/www.pdx.edu.dos/files/media_assets/Veterans_Issue_Brief_1108.pdf
- Baker, R. W., & Siryk, B. (2018). *Student adaptation to college questionnaire*. Retrieved from <https://www.wpspublish.com/store/p/2949/sacq-student-adaptation-to-college-questionnaire>
- Barnard-Brak, L., Bagby, J. H., Jones, N., & Sulak, T. (2011). Teaching post 9/11 student-veterans with symptoms of PTSD: The influence of faculty perceptions and self-efficacy. *Journal of Vocational Rehabilitation, 35*, 29-36. doi:10.3233/JVR-2011-0551
- Beyer, C. (2016). Edmund Husserl. *Stanford Encyclopedia of Philosophy*. Retrieved from <https://plato.stanford.edu/entries/husserl/>
- Boerner, H. (2013). Credit where credit is due. *Community College Journal, 84*(1), 20-24.

- Cate, C. A. (2014). *Million records project: Research from student veterans of America*. Retrieved from <https://www.luminafoundation.org/files/resources/sva-millionrecordsproject-fullreport.pdf>
- Chan, Z. C. Y., Fung, Y., & Chien, W. (2013). Bracketing in phenomenology: Only undertaken in the data collection and analysis process? *The Qualitative Report*, 18(59), 1-9.
- Colaizzi, P. (1978). Psychological research as the phenomenologist views it. In R. Valle & M. King (Eds.), *Existential-phenomenological alternatives for psychology* (pp. 48-71). New York, NY: Oxford University Press.
- Community. (n.d.). In *Merriam-Webster online*. Retrieved from <https://www.merriam-webster.com/dictionary/community>
- Dailey, M. A. (2010). Needing to be normal: The lived experience of chronically ill nursing students. *International Journal of Nursing Education Scholarship*, 7(1). doi:10.2202/1548-923X-1798
- Department of Defense. (2013). *2013 demographics: Profile of the military community*. Retrieved from <http://download.militaryonesource.mil/12038/MOS/Reports/2013-Demographics-Report.pdf>
- Department of the Navy. (2008). *Navy ethos: The fundamental principles and values we share*. Retrieved from http://www.navy.mil/navco/speakers/currents/Navy_Ethos_5_NOV_08_Final.pdf
- Department of the Navy. (2009). *The United States Navy*. Retrieved from http://www.navy.mil/navydata/nav_legacy.asp?id=193
- Department of Veteran Affairs. (2016). *PTSD: National Center for PTSD*. <http://www.ptsd.va.gov/public/PTSD-overview/basics/how-common-is-ptsd.asp>

- Department of Veteran Affairs. (n.d.). *VA campus toolkit*. Retrieved from <https://www.mentalhealth.va.gov/studentveteran/>
- DiRamio, D., Ackerman, R., & Mitchell, R. L. (2008). From combat to campus: Voices of student-veterans. *NASPA Journal (National Association of Student Personnel Administrators, Inc.)*, 45(1), 73-102.
- DiRamio, D., Jarvis, K., Iverson, S., Seher, C., & Anderson, R. (2015). Out from the shadows: Female student veterans and help-seeking. *College Student Journal*, 49(1), 49-68.
- Doherty, M. E., & Scannell-Desch, E. (2012). Women's health and hygiene experiences during deployment to the Iraq and Afghanistan wars, 2003 through 2010. *Journal of Midwifery & Women's Health*, 57, 172-177. doi:10.1111/j.1542-2011.2011.00115.x
- Doherty, M. E., & Scannell-Desch, E. (2015). After the parade: Military nurses' reintegration experiences from the Iraq and Afghanistan wars. *Journal of Psychosocial Nursing and Mental Health Services*, 53(5), 28-35. doi:10.3928/02793695-20150406-01
- Durdella, N., & Kim, Y. K. (2012). Understanding the patterns of college outcomes among student veterans. *Journal of Studies in Education*, 2(2), 109-129. doi:10.5296/jse.v2i2.1469
- Elliott, M., Gonzalez, C., & Larsen, B. (2011). U.S. military veterans transition to college: Combat, PTSD, and alienation on campus. *Journal of Student Affairs Research and Practice*, 48, 279-296. doi:10.2202/1949-6605.6293
- Graf, N. M., Ysasi, N. A., & Marini, I. (2015). Assessment of military viewpoints regarding post-secondary education: Classroom preference and experiences. *Rehabilitation Counseling Bulletin*, 59(1), 18-29. doi:10.1177/0034355214558937

Gregg, B. T., Howell, D. M., & Shordike, A. (2016). Experiences of veterans transitioning to postsecondary education. *American Journal of Occupational Therapy*, 70(6), 1-8.

doi:10.5014/ajot.2016.021030

Hammond, S. P. (2013). *Millennial combat veterans: How identity shapes experience in college* (Order No. 3557563). Retrieved from ProQuest Dissertations & Theses Full Text. (1346181160).

Headquarters, Department of the Army. (2012). *Army leadership* (ADP 6-22). Retrieved from <http://data.cape.army.mil/web/repository/doctrine/adp6-22.pdf>

Health Resources and Services Administration. (n.d.). *Nurse education, practice, quality and retention (NEPQR): Veterans' Bachelor of Science degree in nursing program (VBSN)*. Retrieved from <http://bhpr.hrsa.gov/nursing/grants/neqprvbsn.html>

Health Resources and Services Administration. (2013). *Nurse education, practice, quality and retention (NEPQR) program: Veterans' bachelor of science degree in nursing – HRSA-14-071*. Retrieved from <http://www.grantreviewinfo.net/Downloads/20142111226470.HRSA-14-071%20final.pdf?Program=410>

Ingala, A. M. (2011). *The impact of military deployment on college adjustment* (Order No. 3464868). Retrieved from ProQuest Dissertations & Theses Full Text. (886777780).

Institute of Medicine. (2011). *The future of nursing: Leading change, advancing health*.

Retrieved from http://books.nap.edu/openbook.php?record_id=12956&page=R1

Jones, K. C. (2013). Understanding student veterans in transition. *The Qualitative Report*, 18(74), 1-14.

- Lemos, F. F. (2013). *Evaluating GPA and satisfaction rates for veteran populations transitioning from combat to college classrooms* (Order No. 3595296). Retrieved from ProQuest Dissertations & Theses Full Text. (1443856668).
- Liaison. (n.d.). In *Merriam-Webster online*. Retrieved from <https://www.merriam-webster.com/dictionary/liaison>
- Livingston, W. G., Havice, P. A., Cawthon, T. W., & Fleming, D. S. (2011). Coming home: Student veterans' articulation of college re-enrollment. *Journal of Student Affairs Research and Practice, 48*(3), 315–331. doi:10.2202/1949-6605.6292
- Love, K. L. (2010). The lived experience of socialization among African American nursing students in a predominantly white university. *Journal of Transcultural Nursing, 21*(4), 342-350. doi:10.1177/1043659609360711
- McCalla-Graham, J. A., & De Gagne, J. C. (2015). The lived experience of new graduate nurses working in an acute care setting. *Journal of Continuing Education in Nursing, 46*(3), 122-128. doi:10.3928/00220124-20150220-17
- McMillan, D. W., & Chavis, D. M. (1986). Sense of community: A definition and theory. *Journal of Community Psychology, 14*(1), 6-23.
- Messina, V. (2014). *In and out of uniform: The transition of Iraq and Afghanistan war veterans into higher education* (Order No. 3617571). Retrieved from ProQuest Dissertations & Theses Full Text. (1527636681).
- Military Friendly®. (2018). *About us*. Retrieved from <https://militaryfriendly.com/about-us/>

- Molina, D., & Morse, A. (2015). *Military-connected undergraduates: Exploring differences between National Guard, reserve, active duty, and veterans in higher education*. Retrieved from <https://www.acenet.edu/news-room/Documents/Military-Connected-Undergraduates.pdf>
- Munhall, P. L. (2012). *Nursing research: A qualitative perspective* (5th ed.). Sudbury, MA: Jones & Bartlett Learning.
- Murphy, L. S., Zangaro, G. A., & Gadsden, E. (2012). Students' experiences with military nurses as faculty. *Journal of Nursing Education*, 51(4), 204-211.
doi:10.3928/0148434-20120224-02
- Murphy, M. P. (2011). *Military veterans and college success: A qualitative examination of veteran needs in higher education* (Order No. 3490565). Retrieved from ProQuest Dissertations & Theses Global. (917704918).
- Naphan, D. E., & Elliott, M. (2015). Role exit from the military: Student veterans' perceptions of transitioning from the U.S. military to higher education. *The Qualitative Report*, 20(2), 36-48.
- National Center for Education Statistics. (2018). *Characteristics of post-secondary students*. Retrieved from http://nces.ed.gov/programs/coe/indicator_csb.asp
- National Center for PTSD. (2012). *Veterans employment toolkit: Military ranks*. Retrieved from https://www.va.gov/vetsinworkplace/docs/em_rank.html
- National Council of State Boards of Nursing. (2015). *National nursing workforce study*. Retrieved from <https://www.ncsbn.org/workforce.htm>
- National Council of State Legislatures. (2014, May 30). *Veterans and college*. Retrieved from <http://www.ncsl.org/research/education/veterans-and-college.aspx>

National League for Nursing. (2012). *National League for Nursing joins forces with first lady Michelle Obama and Dr. Jill Biden to support veterans and military families*. Retrieved from <http://www.nln.org/newsroom/news-releases/news-release/2012/04/12/national-league-for-nursing-joins-forces-with-first-lady-michelle-obama-and-dr.-jill-biden-to-support-veterans-and-military-families-66>

National League for Nursing. (2013). *About the NLN*. Retrieved from [aboutnlncorevalues.htm](http://www.nln.org/aboutnlncorevalues.htm)

National League for Nursing. (2014a). *Percentage of minority students enrolled in basic RN programs by race-ethnicity and program type, 2014*. Retrieved from <http://www.nln.org/docs/default-source/newsroom/nursing-education-statistics/percentage-of-minority-students-enrolled-in-basic-rn-programs-by-race-ethnicity-and-program-type-2014-%28pdf%299064bd5c78366c709642ff00005f0421.pdf?sfvrsn=0>

National League for Nursing. (2014b). *Percentage of students enrolled in nursing programs who are male by program type, 2014*. Retrieved from <http://www.nln.org/docs/default-source/newsroom/nursing-education-statistics/percentage-of-students-enrolled-in-nursing-programs-who-are-male-by-program-type-2014.pdf?sfvrsn=0>

National League for Nursing. (2014c). *Percentage of students over age 30 by program type, 2014*. Retrieved from <http://www.nln.org/docs/default-source/newsroom/nursing-education-statistics/percentage-of-students-over-age-30-by-program-type-2014.pdf?sfvrsn=0>

National League for Nursing. (2016). *Advancing care excellence for veterans*. Retrieved from <http://www.nln.org/professional-development-programs/teaching-resources/veterans-ace>

- National League for Nursing. (2018, September 28). *NLN publishes new toolkit© for recruitment and retention of military nurse officers for second careers in nursing education.*
Retrieved from <http://www.nln.org/newsroom/news-releases/news-release/2018/10/01/nln-publishes-new-toolkit-for-recruitment-and-retention-of-military-nurse-officers-for-second-careers-in-nursing-education>
- Ness, B. M., Rocke, M. R., Harrist, C. J., & Vroman, K. G. (2014). College and combat trauma: An insider's perspective of the post-secondary education experience shared by service members managing neurobehavioral symptoms. *NeuroRehabilitation, 35*, 147-158.
doi:10.3233/NRE-141098
- Olsen, T., Badger, K., & McCuddy, M. D. (2014). Understanding the student veterans' college experience: An exploratory study. *The Army Medical Department Journal, 101-108.*
- OSCEhome. (2018). *What is objective structured clinical examination, OSCEs?* Retrieved from https://www.oscehome.com/What_is_Objective-Structured-Clinical-Examination_OSCE.html
- Peer. (n.d.). In *Merriam-Webster online*. Retrieved from <https://www.merriam-webster.com/dictionary/peer>
- Polit, D. F., & Beck, C. T. (2012). *Nursing research: Generating and assessing evidence for nursing practice* (9th ed.). Philadelphia, PA: Lippincott Williams & Wilkins.
- Poorman, S. G., Mastorovich, M. L., Molcan, K. L., & Gropelli, T. (2017). *A good thinking approach to NCLEX and other nursing exams* (3rd ed.). Pittsburgh, PA: STAT Nursing Consultants

- Randolph, K. (2018, September 18). Lamb, Stefanik introduce Military Learning for Credit Act. *Pennsylvania Business Report*. Retrieved from <https://pennbizreport.com/news/10854-lamb-stefanik-introduce-military-learning-for-credit-act/>
- Ryder, R. R. (2012). *Perspectives of student combat veterans diagnosed with posttraumatic stress disorder (PTSD) on their experiences in higher education* (Order No. 3508831). Retrieved from ProQuest Dissertations & Theses Full Text. (1018403529).
- Rumann, C. B., & Hamrick, F. A. (2010). Student veterans in transition: Re-enrolling after war zone deployments. *The Journal of Higher Education*, 81(4), 431-458.
- Scannell-Desch, E., & Doherty, M. E. (2010). Experiences of U.S. military nurses in the Iraq and Afghanistan wars, 2003-2009. *Journal of Nursing Scholarship*, 42(1), 3-12.
doi:10.1111/j.1547-5069.2009.01329.x
- Shosha, G. A. (2012). Employment of Colaizzi's strategy in descriptive phenomenology: A reflection of a researcher. *European Scientific Journal*, 8(27), 31-43.
- Southwell, K. H., Whiteman, S. D., MacDermid Wadsworth, S. M., & Barry, A. E. (2018). The use of university services and student retention: Differential links for student service members or veterans and civilian student. *Journal of College Student Retention: Research, Theory, and Practice*, 19(4), 394-412. doi:10.1177/1521025116636133
- Sun, F.-K., Long, A., Tseng, Y. S., Huang, H.-M., You, J.-H., & Chiang, C.-Y. (2016). Undergraduate student nurses' lived experiences of anxiety during their first clinical practicum: A phenomenological study. *Nurse Education Today*, 37, 21-26.
doi:10.1016/j.nedt.2015.11.001

- The Army University. (2017). *Army learning strategy*. Retrieved from [https://armyu.army.mil/sites/default/files/documents/Army_Learning_Strategy_24_July_2017_\(Signed\).pdf](https://armyu.army.mil/sites/default/files/documents/Army_Learning_Strategy_24_July_2017_(Signed).pdf)
- The Council for Adult & Experiential Learning. (2010). *Fueling the race to postsecondary success: A 48 institution study of prior learning assessment and adult student outcomes*. Retrieved from http://cdn2.hubspot.net/hubfs/617695/premium_content_resources/pla/PDF/PLA_Executive-Summary.pdf?submissionGuid=1976894d-79b5-424e-ad23-acd183bd4595
- Tomar, N., & Stoffel, V. (2014). Examining the lived experience and factors influencing education of two student veterans using photovoice methodology. *The American Journal of Occupational Therapy*, 68(4), 430-438.
- Tufford, L., & Newman, P. (2010). Bracketing in qualitative research. *Qualitative Social Work*, 11(1), 80-96. doi:10.1177/1473325010368316
- United States Air Force. (n.d.). *Aerospace medical service*. Retrieved from <https://www.airforce.com/careers/detail/aerospace-medical-service>
- United States Air Force. (n.d.). *Vision: It's our promise to protect*. Retrieved from <https://www.airforce.com/mission/vision>
- United States Census Bureau. (2012). *U.S. Census Bureau projections show a slower growing, older, more diverse nation a half century from now*. Retrieved from <https://www.census.gov/newsroom/releases/archives/population/cb12-243.html>
- United States Census Bureau. (2015). *Veterans*. Retrieved from <http://census.gov/topics/population/veterans/about.html>

- United States Coast Guard. (2016). *United States coast guard core values and creed*. Retrieved from <http://www.uscg.mil/auxiliary/corevalues.asp>
- United States Department of Labor. (2015). *Occupational outlook handbook: Registered Nurses*. Retrieved from <http://www.bls.gov/ooh/healthcare/registered-nurses.htm>
- U.S. Army. (n.d.). *The army values*. Retrieved from <https://www.army.mil/values/index.html>
- U.S. Department of Education. (2018). *Veterans upward bound program*. Retrieved from <https://www2.ed.gov/programs/triovub/index.html>
- Victory Media. (2018). *Military Friendly®*. Retrieved from <http://militaryfriendly.com/methodology/>
- Watts, B., Lawrence, R. H., Schaub, K., Lea, E., Hasenstaub, M., Slivka, J., . Kirsh, S. (2016). Transitioning former military medics to civilian health care jobs: A novel pilot program to integrate medics into ambulatory care teams for high-risk patients. *Military Medicine*, *181*(11), E1464-E1469. doi:10.7205/MILMED-D-15-00586
- Whittemore, R., Chase, S. K. & Mandle, C. L. (2001). Validity in qualitative research. *Qualitative Health Research*, *11*(4), 522-537. doi:10.1177/104973201129119299
- Wojnar, D., & Swanson, K. (2007). Phenomenology: An exploration. *Journal of Holistic Nursing*, *25*(3), 172-180.
- Young, S. L. (2012). *Transitioning from combat to college: The impact of risk and resilience factors on student veterans* (Order No. 3544993). Retrieved from ProQuest Dissertations & Theses Full Text. (1237220474).

Appendix A

IRB Approval Letter IUP



Indiana University of Pennsylvania

www.iup.edu

Institutional Review Board for the
Protection of Human Subjects
School of Graduate Studies and Research
Stright Hall, Room 113
210 South Tenth Street
Indiana, Pennsylvania 15705-1048

P 724-357-7730
F 724-357-2715
irb-research@iup.edu
www.iup.edu/irb

August 10, 2017

Dear Heather Zonts:

Your proposed research project "The Lived Experience of Student Veterans in Baccalaureate Nursing Programs," (Log No. 17-201) has been reviewed by the IRB and, pending our receipt of research site approval, will be approved. *However, you are not authorized to begin your research until you receive final notification of IRB approval. The site approval letter must be on the official letterhead of the site and endorsed by the person responsible for the site.*

To submit your research site approval letter, please log into IRBManager, open your study, click Start xForm and choose "submit research site approval letter". Follow the directions to electronically submit your letter to expedite the review process.

Again, you are not authorized to begin your research until you receive final IRB approval.

Sincerely,

Jennifer Roberts, Ph.D.
Chairperson, Institutional Review Board for the Protection of Human Subjects
Professor of Criminology

JLR:jeb

Cc: Dr. Teresa Shellenbarger, Faculty Advisor

Appendix B

Interview Questions

Interview Questions:

1. Tell me about your previous military experience.

2. Tell me about your college experience.

3. Tell me about your experience as a nursing student.

4. How has your military experience influenced you in your nursing program?
 - a. Tell me more about how you think this influenced your college experience.

5. Tell me about the resources your institution has for veterans.
 - a. Prompts:
 - i. Can you give me an example of what is available?
 - ii. Have you used the resources? If so, which ones?
 1. How have they impacted your college experience?
 - iii. Tell me about how the resources available to you have impacted your decision to stay in your academic program.

Appendix C

Email Requesting Participation

Dear Student Veteran,

My name is Heather Zonts. I am currently enrolled in the PhD in Nursing program at Indiana University of Pennsylvania. I have also served in the military. I was a member of the Pennsylvania Army National Guard for 13 years. I am contacting you to see if you would be interested in participating in my research study. The descriptive phenomenological study will investigate the research question, “What is the lived experience of student veterans enrolled in nursing programs at institutions identified as supporting military supporting including both HRSA grant funded Nursing Education, Practice, Quality and Retention: Veterans’ Bachelor of Science Degree in Nursing programs and/or nursing programs located in institutions designated as Military Friendly®?” This study will provide you with the opportunity to discuss your current experience in higher education and more specifically nursing programs. In addition, we will discuss resource availability and their impact on your experience. Participation in the study will include a 30 to 60-minute interview, a follow up interview for clarification if needed, and a request for review of the resultant findings. The information obtained will remain confidential and identifying information will be removed. Your participation in this activity will assist in expanding the knowledge of how previous military experience influences the transition into baccalaureate nursing programs. Additionally, it will provide nursing education leaders with an understanding of the resources needed to assist military veterans in nursing programs. Individuals agreeing to participate in the research study will receive a \$15 gas card upon completion of the initial interview and an additional \$5 gas card after telephone follow up regarding the findings. I appreciate your consideration of this request. Please contact me via phone (814) 736-5027 or email (gqnk@iup.edu) if you are interested in becoming a study participant.

Thank you,

Heather Zonts MSN, RN

Appendix D

Invitation to Participate

Research Study: The Lived Experience of Student Veterans Enrolled in Baccalaureate Nursing Programs

My name is Heather Zonts. I am currently enrolled in the PhD in Nursing program at Indiana University of Pennsylvania. I have also served in the military. I was a member of the Pennsylvania Army National Guard for 13 years. I am contacting you to see if you would be interested in participating in my research study. The purpose of the study is to explore the lived experiences of student veterans enrolled in baccalaureate degree nursing programs identified as supporting military personnel. This study will provide you with the opportunity to discuss your current experience in higher education and more specifically nursing programs. In addition, we will discuss resource availability and their impact on your experience. Participation in the study will include a 30 to 60-minute interview, a follow up interview for clarification if needed, and a request for review of the resultant findings.

The information obtained will remain confidential and identifying information will be removed. Participation in the research study is voluntary. You can withdraw your consent to participate at any time without repercussions. If you decide that you do not want to participate in the study or wish to withdraw from the study, your information will be destroyed. Your participation in this activity will assist in expanding the knowledge of how previous military experience influences the transition into baccalaureate nursing programs. Additionally, it will provide nursing education leaders with an understanding of the resources needed to assist military veterans in nursing programs.

Individuals agreeing to participate in the research study will receive a \$15 gas card upon completion of the initial interview and an additional \$5 gas card after telephone follow up regarding the findings.

I appreciate your consideration of this request. If you would like to participate, please contact me via telephone or email.

Principal Investigator:

Heather L. Zonts, MSN, RN

Email: gqnk@iup.edu

Telephone: (814) 736-5027

This project has been approved by the Indiana University of Pennsylvania Institutional Review Board for the protection of human subjects (phone 724.357.7730).

Appendix E

Informed Consent Form

This document was placed on IUP letterhead for signature.

The Lived Experience of Student Veterans in Baccalaureate Nursing Programs
You are invited to participate in a nursing research study. Please read the information below to assist in your ability to make an informed decision regarding study participation. If you have any questions, please ask at any time.

The purpose of this study is to describe the lived experience of student veterans' enrolled in nursing programs at institutions identified as supporting military including both HRSA grant funded Nursing Education, Practice, Quality and Retention: Veterans' Bachelor of Science Degree in Nursing programs and/or nursing programs located in institutions designated as Military Friendly®. Participation in this study will require a 30 to 60-minute interview and a possible additional brief follow up interview for clarification purposes. The second interview will occur via phone or Skype. With your permission the interview will be digitally voice recorded. The information from the recording will be transcribed and reviewed for accuracy. In addition to the initial interview and follow up, your assistance will be requested to review the transcripts of the interview and the findings.

While there are currently no identified risks associated with this research study, resources will be made available through the institution's counseling center if needed. The information obtained from this research will assist with identifying the experiences of student veterans in baccalaureate nursing programs. Furthermore, this will identify potential needs of this growing population. Additionally, each individual agreeing to participate in the research study will receive a \$15 gas card at the completion of the initial interview and an additional \$5 gas card upon completion of the findings verification phone call. This additional gas card will be mailed to study participants.

You are encouraged to contact the primary investigator with any questions regarding participant rights, questions, or concerns. The primary investigator contact information is:

Heather Zonts
Email: gqnk@iup.edu
Phone: (814) 736-5027
146 Dodson Drive
Portage, PA 15946

Confidentiality will be maintained at all times through the use of password protected computer files and locked file cabinets. Your name and identity will not be used during the study. Participation in this study is voluntary. You can choose to withdraw from the study at any time without negative consequences. If you decide that you do not want to participate in the study or wish to withdraw from the study your information will be destroyed. Your decision to not

Informed Consent Form (continued)

participate will not result in any penalties or loss of benefits you were otherwise entitled. If you choose to withdraw from the study, please contact the principal investigator via email or phone or in person indicating your desire to withdraw from the study.

The results from this study may be published in research journals or presented at conferences. All identifying information will be removed to maintain confidentiality.

If you are willing to participate, please sign the statement below. An additional copy has been supplied for your records. If you do not choose to participate, please return the unsigned documents to Heather Zonts, Primary Investigator.

Primary Investigator: Heather Zonts MSN, RN

Doctoral Student, Indiana University of Pennsylvania

Faculty Sponsor: Teresa Shellenbarger, PhD

1010 Oakland Avenue, 210 Johnson Hall, IUP

Phone: (724) 357-2559

This project has been approved by the Indiana University of Pennsylvania Institutional Review Board for the protection of human subjects (phone: (724) 357-7730).

Voluntary Consent Form:

I have read and understand the information provided in the Informed Consent. I understand that my information will remain confidential at all times. I also understand that I can withdraw my participation at any time. I have received a copy of the Informed Consent Form. I understand that if I have any questions throughout participation in the study I am able to ask the primary investigator.

Print Name: _____

Signature: _____ Date: _____

Phone number: _____

I certify that I have explained the purpose of the research study, implications of the results, and the rights of the study participants. I have answered any questions related to the research study.

Date: _____ Primary Investigator's Signature: _____

Appendix F
Demographic Sheet

1. Gender
 Male
 Female

2. Age _____

3. Race
 White
 African American
 Asian
 American Indian
 Alaska Native, Native Hawaiian, other Pacific Islander
 Other: _____

4. Branch of service
 Army
 Navy
 Marines
 Coast Guard
 Air Force

5. Military rank _____

6. Number of years in the military _____

7. Mobilizations (**Select all that apply**)
 Operation Enduring Freedom
 Operation Iraqi Freedom
 Operation New Dawn

8. Number of times mobilized _____

9. Number of years in college prior to pursuing degree _____

10. Previous degrees attained _____

11. Number of semesters enrolled in college courses _____

12. Number of semesters enrolled in nursing courses _____