A PHENOMENOLOGICAL STUDY OF GRADUATED NURSING STUDENT ATHLETES’ EXPERIENCES BALANCING ACADEMICS AND ATHLETICS

by

Robert E. Steed

Liberty University

A Dissertation Presented in Partial Fulfillment Of the Requirements for the Degree Doctor of Education

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ABSTRACT

The purpose of this transcendental phenomenological study is to describe the lived experiences of eleven graduated nursing student athletes who completed traditional, four-year nursing programs while concurrently finishing four years of athletic eligibility in their respective sport at three private, Christian, Midwest universities and across three different competitive collegiate athletic divisions. The theories guiding this study are Tinto’s Theory of Individual Departure from Institutions of Higher Learning, Astin’s Theory of Student Involvement, and Lazarus and Folkman’s Transactional Model of Stress Response, as they relate to student athletes’ persistence to graduation and to nursing students who reportedly experience higher levels of stress than other college students. Participants were purposefully selected to answer the following: How do graduated nursing student athletes describe their experiences in balancing sports and academics while completing a traditional, four-year nursing program and participating in intercollegiate sports? Data collection was conducted using journaling, semi-structured individual interviews, and focus groups. Confidentiality was maintained by using pseudonyms for all colleges and participants. Data analysis was conducted via pattern, theme, and content analysis. Validity and trustworthiness were established via expert and member reviews, as well as triangulation of participant groups, data sources, audit trails, enumeration tables, and inclusion of participant quotes.

Keywords: athletics, balance, nursing school, nursing students, stress, time management
Dedications

First, I would like to dedicate this research to the students who made it possible: nursing student athletes. In working with these graduated nursing student athletes, the gifts bestowed by God were apparent. I thank Him for allowing me to see the wonderful abilities each of these individuals possesses. Caring professionals with a healing presence now, they shared their gift of athletic skills with their universities while enrolled. As I Corinthians 12:4-7 (NRSVCE) says:

Now there are varieties of gifts, but the same Spirit; and there are varieties of services, but the same Lord; and there are varieties of activities, but it is the same God who activates all of them in everyone. To each is given the manifestation of the Spirit for the common good.

I also dedicate this to my family for supporting me and putting up with this effort. Having to clear all the papers, books, and computer from the “big table” for Sunday night meals was an inconvenience for everyone. On the other hand, it gave us something to disagree about—other than who got the last scoop of mashed potatoes. I love you guys!

Finally, I would like to dedicate this to two people who consistently displayed lifelong learning. My father provided an example for all of his children to continue their education, no matter how late in life. My mother was a treasure trove of information, which she gleaned from reading, whether it was learning about antiques or architecture, historical artifacts or interesting folklore associated with whatever location the military decided to move us. I ask God that I, too, provide such an example to my children.
Acknowledgements

I have felt God’s presence for the duration of this process. When it seemed that the parts would never fit together or that some of the pieces just couldn’t be found, He was there to “smooth my feathers.” I have always been encouraged by Matthew 6:27, “And can any of you by worrying add a single hour to your span of life?” Still, I did worry I may never finish, but He was there. As written in Isaiah 40:31, “They shall mount with wings like eagles, they shall run and not be weary, they shall walk and not faint.” I thank God for being with me for the entire trip.

I would like also to thank my dissertation committee: Dr. Chris Taylor, Dr. Ron Lupori, and Dr. Holly Sandhurst. My chair, Dr. Taylor, has been a calm, guiding hand throughout this journey, very gently (but insistently!) moving the process along and providing positive encouragement. Dr. Lupori was ever-ready to give suggestions for improvement, even when I imposed on his holidays. I chose Dr. Sandhurst to be my cheerleader and nursing sounding board; she never let me down.
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List of Abbreviations

Accreditation Commission for Education in Nursing (ACEN)
American Association of Colleges of Nursing (AACN)
American Nurses Association (ANA)
American Nurses Credentialing Center (ANCC)
American Organization of Nurse Executives (AONE)
Amstel University (pseudonym) (AU)
Bachelor of Science in Nursing (BSN)
Carlsberg University (pseudonym) (CU)
Central Question (CQ)
Cumulative Index to Nursing and Allied Health Literature (electronic database) (CINAHL)
Department of Education (DOE)
Department of Health and Human Services (DHHS)
Division One (highest of three levels of NCAA athletic competition) (D-I)
Division Two (D-II)
Grade Point Average (GPA)
Institutional Review Board (IRB)
Master of Science in Nursing (MSN)
Molson University (pseudonym) (MU)
National Association of Intercollegiate Athletics (NAIA)
National Collegiate Athletic Association (NCAA)
National League for Nursing (NLN)
Nursing Council Licensure Exam (NCLEX)
New International Version (NIV)

Qualitative Data Analysis System (QDAS)

Resident Advisor (RA)

Registered Nurse (RN)

Research Question (RQ)

Reserve Officer Training Corps (ROTC)

United States Postal Service (USPS)
CHAPTER ONE: INTRODUCTION

Overview

The purpose of this transcendental phenomenological study is to describe the lived experiences of graduated nursing student athletes who successfully balanced sports and academics while completing a traditional, four-year nursing education and concurrently participating in intercollegiate sports at colleges from three different competitive division levels. To date there has been little known research regarding the experiences of nursing students who participate in intercollegiate athletics. Nurses, nursing educators, and nursing students are all potential audiences for this research, as nursing student athletes may share unique qualities and experiences that could make them valuable additions to nursing programs and nursing staffs. The theoretical framework for this research was provided by the Theory of Individual Departure from Institutions of Higher Education (Tinto, 1993*), the Student Involvement Theory (Astin, 1999), and the Transactional Model of Emotions and Coping (Lazarus & Folkman, 1987). This chapter includes background information about stress in nursing schools, the nursing shortage, and intrinsic and learned attributes student athletes may possess, which could increase recruitment and retention in nursing schools and in the profession of nursing. This chapter also describes the writer’s relationship to the study, the problem, the purpose, and the significance of the study and the research questions.

Background

Nursing school and the profession of nursing are stressful (Beck, Hackett, Srivistava, McKim, & Rockwell, 1997; Biggers, Zimmerman, & Alpert, 1988; Gibbons, 2010). Gibbons (2010) indicates that burnout in nursing school occurs as a result of stress. Due to a major nursing shortage in the United States (Huber, 2014; U.S. Department of Health and Human
Services, 2010), strategies are needed that address multiple approaches to increase recruiting, graduate nursing students who are capable of successfully completing licensure exams, and retain qualified nurses. There are a variety of health promotion practices, which are proven to help students manage stress: physical activity, a proper diet, meditation, and cognitive restructuring (Li & Lindsey, 2013). Athletic competition also provides participants the opportunity to develop skills that help mitigate stress (Pate, 2015). Finally, involvement in the college experience helps keep students engaged and results in higher graduation rates (Astin, 1999). Astin (1999) lists athletic participation as a notable factor in “involvement;” Tinto (1993) argues that involvement can lead to greater social acceptance and satisfaction, which in turn can translate to higher levels of persistence.

The nursing shortage in the United States is currently estimated to be nearly half a million positions, and by 2025, some estimates predict this shortage will inflate to as many as one million positions (Huber, 2014; DHHS, 2010). To reduce this shortage, numerous strategies have been suggested, including increasing the numbers of seats in nursing schools, providing greater retention incentives for current nurses, and developing staffing models that decrease workload (Huber, 2014). Other studies have examined the efficacy of stress management programs during or after nursing education (Billingsley, Collins, & Miller, 2007; Galbraith & Brown, 2011; Jones & Johnston, 2000; Klainberg, Ewing, & Ryan, 2010; Moscaritolo, 2009; Warnecke, Quinn, Ogden, Towle, & Nelsen, 2011). Pate (2015) suggests that participation in sports provides individuals with self-confidence and stress management skills- qualities which are highly beneficial to professional nurses. Furthermore, in order to graduate from college, students must remain engaged in completing all degree requirements. Astin (1999) suggests that involvement, in academics as well as extra-curricular activities- such as athletics- is positively
correlated to graduation. Tinto (1993) describes athletic involvement as way to develop social acceptance; Armstrong and Oomen-Early (2009) support this argument, proposing that student athletes have a greater sense of “social connectedness” than students who are non-athletes.

Increasing the number of seats in nursing schools could provide more nurses that are qualified; however, one must also consider that increasing availability does not necessarily equate to an increased number of graduating nurses. Academic rigor is required to ensure graduates of accredited nursing programs can successfully pass the Nursing Compact Licensure Exam (NCLEX); therefore, admission standards may make filling these added seats difficult (ACEN, 2017). Additionally, nursing students typically experience greater stress than students in other fields of study, including medical, dental, and law schools (Beck et al., 1997). Stressors take many forms, but they include pressure to earn high grades; perceived lack of support from faculty, friends, or family; bullying by instructors, hospital staff, fellow students, and patients; and often, overwhelming workloads. These stressors may result in students making the decision to leave nursing school (Gibbons, 2010). Many of these stressors, including bullying and workload, are also reported by licensed, professional nurses (Goldberg, Beitz, Wieland, & Levine, 2013).

Collegiate athletes face stressors as well. Many cite issues that are similar to nursing students, such as lack of perceived support and heavy workloads (Weigand, Cohen, & Merenstein, 2013). However, collegiate athletes also report self-perceptions that are conducive to resisting stress, such as increased self-efficacy, ability to overcome obstacles, and successful history of dealing with performance-related stress (Pate, 2015). Deuster and Silverman (2013) indicate that physical fitness is a major influence in the ability to manage stress successfully. Additionally, by its very nature, participation in athletics provides the students a sense of
involvement (Astin, 1999).

The schools selected for this study were chosen because they offer nursing programs and athletic scholarships. To adequately assess nursing student athletes, colleges from three competitive levels – National Collegiate Athletic Association (NCAA) Division I (D-I), NCAA Division II (D-II), and National Association of Intercollegiate Athletics (NAIA) – were chosen for sample selection. As a general rule, NCAA D-I schools have the most intense competition level, and NAIA has the least intense. This is not to imply that NAIA student athletes are less competitive, but NCAA D-I colleges tend to recruit athletes from the highest predictive level of collegiate athletic success; the expected level of performance, therefore, tends to be higher at the NCAA D-I schools. An additional consideration was the level of initial financial support offered – or not offered – to nursing student athletes. This support is explained below, as each institution is described.

An attraction for students applying to Molson University (pseudonym) (MU) is the opportunity for financial support via athletic scholarships. The school offers scholarships in 31 varsity sports at the National Association of Intercollegiate Athletics (NAIA) level. Over 60 percent of MU students are on athletic scholarships. While the school does not provide specific support to nursing student athletes, the administration highly values the student recruiting potential provided by athletic scholarship offers. For this reason, the university’s leadership insists that all athletic activities, regardless of which academic program the student athlete is enrolled, be afforded “all reasonable accommodations.” MU is the smallest of the three schools in this study, with an enrollment average of 1,250 undergraduate students since 2011 (MU [pseudonym] website, 2016).

Carlsberg University (pseudonym) (CU) has a specific strategy to entice nursing student
athletes. CU is a NCAA D-I school and offers nursing student athletes a BSN completion program that includes an optional additional semester of education. This extra semester results in a longer period of study, but allows the students greater flexibility to complete their four year NCAA eligibility while accommodating variable, required practicum schedules. The student athletes at CU must choose between finishing college in four years while participating in sports or adding a semester of school to reduce conflicts between athletic and academic schedules. CU is the largest of the three schools in this study, reporting an average undergraduate student population of 4,100 students from 2008 to present (CU [pseudonym] website, 2016).

Amstel University (pseudonym) (AU) is a NCAA Division II (D-II) college. Scholarship opportunities are slightly less numerous than at D-I schools (Athnet, 2019). The nursing school has no special strategies to meet nursing student athlete needs. Due to low numbers of nursing student athletes each year, this writer anticipated that AU will provide the greatest challenge in identifying and locating participants for this study. The average enrollment at AU is 1,800 undergraduate students (AU [pseudonym] website, 2016).

MU, CU, and AU have certain characteristics which serve to aid student retention and student persistence. Astin (1999) states that attendance at a school which provides a similar environment to their hometown and upbringing assists in helping students feel comfortable and persist. All of these schools have a religious heritage and provide both non-denominational and specific denomination ministry support to their students. MU is located in a town of less than 25,000; AU’s local population is 165,000; CU is in a city of nearly 1.1 million. MU and AU serve student populations from predominantly rural parts of Midwestern states. CU has a more national appeal, but 60-65 percent of students are from less densely populated Midwestern regions. Astin (1999) indicates that students at schools with religious ties have higher retention
rates, especially if students generally share that religious heritage. Further, Astin (1999) states that students who attend colleges which are demographically similar to their homes – for example, schools which have ethnic, population density, and political similarities – tend to be more likely to graduate.

Astin (1999) also predicts that students who are involved in their college experience via athletic participation are more likely to graduate. Tinto (1993) reports that one piece of the complex retention and persistence puzzle is commitment to a specific institution, especially as evidenced by participation in school-sanctioned activities- to include athletics. The NCAA agrees that athletic participation ensures greater persistence to graduation than occurs in non-athletes; however, US government data, computed using a different calculation method than the one used by the NCAA, indicates that this is true for D-II and NAIA schools but not at D-I institutions (Carroll, 2014).

Nursing schools are inherently stressful (Beck et al., 1997; Biggers, Zimmerman, & Alpert, 1988; Gibbons, 2010). This stress can lead to problems with student retention in nursing schools (Huber, 2014). There is little known research that addresses the experiences of nursing student athletes. Research does support the idea that student athletes’ involvement in college activities may better position them for successfully completing their studies (Astin, 1999); they may also possess stress management characteristics, which could serve them well in the nursing academic and professional environments (Mahiri & van Rheenan, 2010; Storch, Storch, Killiani, & Roberti, 2005). This study proposed to examine the perceptions of nursing student athletes who have successfully graduated, in order to determine if there were common perceptions regarding the experience of balancing academic and athletic workloads and if these common perceptions might lead to strategies to improve nursing student athlete recruitment and retention.
To date there has been little known research focusing specifically on nursing student athletes. Few schools offer nursing students who wish to participate in athletics alternate scheduling options to assist with meeting the demands of an academically rigorous program, as well as the time commitments of a college sport. The purpose of this study was to examine the lived experiences of nursing student athletes and open the discussion on how to keep these students engaged in both nursing school and athletics.

**Situation to Self**

During my seven years working as a nursing instructor, I have had the opportunity to teach 44 nursing student athletes. In some nursing courses there were as many as six student athletes; no class has had less than one athlete. Prior to arriving at MU, I completed a Bachelor of Science (BSN) program and a Master of Science in Nursing (MSN) program at separate large, state universities. Nursing students were discouraged from athletic participation at one school; at the other, a signed statement of understanding was required regarding non-participation in intercollegiate athletics while enrolled in the nursing program. I believe that student athletes have qualities which are of value both during school and after graduation, and I further believe nursing schools may be in position to accommodate student athletes easily to the benefit of both the school and the students.

My worldview for this research is eclectic. It has transformative features (Creswell, 2013), as I believe that there is often a power struggle between nursing faculty and students whose other interests may require substantial give-and-take by both parties to achieve mutual success. It also has overtones of pragmatism (Creswell, 2013), as it is my hope that one result of this research is finding an additional leverage point from which to combat the nursing shortage. Ultimately, then, my paradigm for this research is largely post positivism (Creswell, 2013). I am
normally more drawn to quantitative inquiry, and prefer a “logical, empirical, cause-and-effect” (Creswell, 2013, p. 24) approach to research. In my opinion, this research is the first step in a series of studies regarding the value of graduated nursing student athletes in the professional field of nursing.

Philosophical assumptions regarding this study are axiological (Creswell, 2013). I recognize my personal, positive biases regarding the value of nursing student athletes. It is also highly apparent in nursing education that academic rigor cannot be sacrificed to accommodate athletes, and that time accommodations for athletes present multiple logistical obstacles to instructors and their given institutions. I am, therefore, highly cognizant of the need to exercise extreme caution in not allowing personal biases to influence the results of this study (Creswell, 2013).

As previously stated, MU allows students athletic opportunities in 31 different NAIA sports; CU and AU offer more limited numbers of D-I and D-II scholarships, respectively, for student athletes. Many nursing students at MU are receiving scholarships to participate in sports; still others receive scholarships for participation in the arts (dance, drama, band, and choir). This study will focus on nursing student athletes, because sports training and competition times are more rigidly scheduled and less flexibly administered, in general, than the arts. This writer’s experience with MU nursing student athletes indicates high performance: four of the last seven MU Nursing Students of the Year – awarded for academic achievement and school involvement – have been athletes. During this writer’s time at MU, two nursing student athletes were in danger of failing a course; one left the program, while the other worked extraordinarily hard over the final four weeks of the course to earn a passing grade. The first-time pass rate on the NCLEX exam for graduated nursing student athletes at MU is eight percentage points higher
than the overall school average (Rhonda Beister (pseudonym), personal communication, January 15, 2018).

The profession of nursing approaches patient care through holism, which emphasizes the “interrelationships of the bio-psycho-social-spiritual dimensions of the person” (Halter, 2014, p.676): treating patients not only based on their diagnosis, but on the whole person concept of mind, body, social connections, and spirit. Holism is based, at least in part, on the theoretical framework of Hildegard Peplau, who suggested that nursing is both an art and a science in which nurses “care for the person as well as the illness” (Peplau, 1995, as cited in Halter, 2014, p. 25). It has been this writer’s experience with nursing educators, both as a student and as a faculty member, that nursing schools do not always exhibit the same holistic attitude towards their students, especially as it relates to encouraging extra-curricular activities separate from student nurse group endeavors. As Astin (1999) suggests, high interest in academics and participation in other areas of campus life help drive retention of students. Additionally, Tinto (1993) would agree that faculty support of students’ needs and interests, both academically and within the social constructs of the institution, should net higher persistence to graduation. Nursing schools strongly encourage academic involvement; perhaps a more accommodating approach to other campus activities would help with retention.

**Problem Statement**

“A problem might be defined as the issue that exists in the literature, theory, or practice that leads to a need for the study” (Creswell, 1994, p. 50). A problem statement summarizes “the context for the study” and the main problem the study seeks to address (Wiersma, 1995, p. 404). As noted above, there is little known research regarding nursing student athletes, although theoretical support exists to indicate that these individuals may be in optimal position to succeed
in nursing school (Astin, 1999). Allowing nursing students who may have intrinsic or learned stress resilience to withdraw from nursing school or discontinue their respective athletic programs may result in the profession of nursing losing potential superior performers. By exploring the experiences of nursing student athletes who successfully complete their education, this study attempted to identify issues that may facilitate matriculation and persistence to graduation by more nursing student athletes.

The problem is that no significant research on nursing student athletes has been identified. This is not surprising, as not all nursing schools provide students the opportunity to participate in athletics. There is much research on nursing school stress (Gibbons, Dempster, & Moutray, 2011), the stressors related to working as a nurse (Goldberg, Beitz, Wieland, & Levine, 2013), and the stress mitigation aspects of sports and fitness on perceptions of stress (Deuster & Silverman, 2013; Pate, 2015). The goal for this study was to have twelve graduated nursing student athletes – four each from MU, CU, and AU – participate. The focus of the research is the experiences of graduated nursing student athletes in successfully balancing sports and academics while completing a traditional, four-year nursing education program and concurrently participating in intercollegiate sports at colleges from three different competitive division levels. By examining the experiences of four students from each of three competitive levels, it was hoped that thicker, richer information could be gathered to define more fully the graduated nursing student athletes’ experience.

**Purpose Statement**

According to Creswell (2013), the purpose statement “provides the major objective or intent, or ‘road map,’ to the study” (p. 134). The purpose of this transcendental phenomenological study was to describe the experiences of graduated nursing student athletes in
successfully balancing sports and academics while completing a traditional, four-year nursing education and concurrently participating in intercollegiate sports at colleges from three different competitive division levels. All three universities have religious ties and are located in the Midwestern United States. Graduated nursing student athletes are defined for the purposes of this study as students who have graduated from their respective four-year nursing programs while concurrently completing their NCAA or NAIA sports eligibility.

The study was guided primarily by Astin’s (1999) Theory of Student Involvement. In its simplest form, this theory postulates that “student involvement refers to the amount of physical and psychological energy that the student devotes to the academic experience” (p. 518). The theory continues, “. . . the greater the student’s involvement in college, the greater will be the amount of student learning and personal development” (p. 529). If the primary goal of nursing school is to train competent, knowledgeable professional nurses, then the theory would suggest that schools should allow the students greater opportunities to become involved in the academic experience. Athletic participation is one of several strategies schools can use to enhance the involvement of students.

Additionally, theoretical support for strategies that aid persistence to graduation was taken from Tinto’s (1993) Theory of Individual Departure from Institutions of Higher Education. Tinto argues that involvement or “the impact that the organization has on the socialization and satisfaction of students” (p. 89) is but one facet of a larger process of persistence or departure. He adds that individual psychological factors, financial influences, and organizational differences all influence persistence to graduation. Drawing on Emile Durkheim’s work on understanding factors influencing suicide, Tinto likens departure from higher education as analogous to “egotistical suicide” (Durkheim, 1951), or suicide as a consequence of the
individual failing to find acceptance or belonging in any segment of society.

A final, but still important, theory to consider when exploring the experiences of nursing student athletes was Lazarus and Folkman’s (1987) Transactional Model of Emotions and Coping. The transactional theory proposes that an individual’s response to stress is based on that individual’s evaluation or “appraisal” of the situation (Lazarus et al., 1987). Combined with the resources available to the individual, this evaluation provides a reasonable outcome expectation. Research in the United States and other countries repeatedly supports the contention that nursing school is stressful (Beck et al., 1997; Biggers et al., 1988; Gibbons, 2010). Athletes have social support and physical fitness attributes which assist with stress management (Deuster & Silverman, 2013; Pate, 2015). Nursing student athletes, therefore, may have the requisite resources to handle the high stress environment of nursing school.

**Significance of the Study**

This study is significant because there is little known current research which specifically focuses on nursing student athletes. It provides insights for nursing school administrators that could assist with student retention. For student athletes, the study provides an impetus for more nursing schools to employ strategies that would facilitate nursing school attendance by athletes. The study also has implications for the profession of nursing, as it provides insights into additional factors that could positively influence recruitment and retention of qualified nurses.

The study is also significant for expanding current theories. Both Tinto (1987) and Astin (1997) provide theoretical constructs regarding attrition and retention in colleges. Tinto (1987) proposes that students fail to complete college because they have limited interactions with the institution and fail to find value in the experience. Participation in sports may provide student athletes with organizational interaction in an activity they value, thereby reducing attrition.
Astin (1997) proposed that students remain in college because they feel “involved.” Competing for the institution in a sport enhances students’ perceptions of involvement.

Multiple studies on nursing school stress (Gibbons, 2010; Gibbons et al., 2011; Goldberg et al., 2013), stress reduction initiatives at nursing schools (Billingsley et al., 2007; Klainberg et al., 2010; Moscaritolo, 2009), and the benefits or risks (emotional and academic) of pursuing an education other than nursing while playing sports have been conducted (Armstrong & Oomen-Early, 2009; Mahiri & van Rheenan, 2010). This study provides additional avenues of exploration in these areas.

For nursing student athletes at MU, CU, and AU, the study provides data for decisions regarding student athletes and the nursing program. It may lead to encouraging only applicants with higher high school or college transfer Grade Point Averages (GPAs) to enroll in the nursing program; conversely, it may provide an impetus to grant more schedule accommodations for student athletes. Retention is a concern at many nursing schools (Huber, 2014), and this study could have a positive impact on strategies to keep students in these programs.

Many of these students seek attendance at MU initially because of the athletic scholarship reimbursement system. Prospective nursing students at MU are required to meet with a member of the nursing faculty to discuss program admission requirements. Diana McCallister (pseudonym), Associate Professor of Nursing at MU, summed up a recent meeting with a nursing student candidate this way:

I met today with an excellent nursing school candidate who is coming here on a cheerleading scholarship. The twinkle in her eyes when she spoke of continuing in cheerleading warmed my heart. Still, I couldn’t help but worry if she could handle the time commitment of school and cheer practices. (personal communication, January 28,
Research Questions

Research questions help define the aim of a study. The main research question reflects the focus of inquiry, based on “practical experience, critical appraisal of the scientific literature, or interest” (Lobiondo-Wood and Haber, 2018, p. 24). In qualitative research, Creswell (2013) suggests a central research question supported by several sub questions that explore the factors surrounding the central phenomenon.

Central Research Question (CQ): “How do graduated nursing student athletes describe their experiences in balancing sports and academics while completing a traditional, four-year nursing program and participating in intercollegiate sports?”

Both Tinto (1993) and Astin (1999) theorize that participation in official school activities, such as sports, provides a sense of belonging and motivation to complete an educational program. Athletic participation and nursing school are time-intensive (Carroll, 2014; Gibbons, Dempster, & Moutray, 2011). This question explores the graduated nursing student athletes’ perceptions of balancing both activities while persevering to completion of nursing school.

RQ #2: “What challenges do graduated nursing student athletes report facing while concurrently completing nursing school and playing intercollegiate sports?”

Nursing students report higher levels of perceived stress than any other professional school (Beck et al., 1997). College athletes report that practices and competitions often add to the stress of the college student experience (Wyshak, 2001). This question explores the graduated nursing student athletes’ perceptions of balancing these potential stressors.

RQ #3: “To what specific factors do graduated nursing student athletes attribute their ability to be successful in balancing sports and academics?”
Pate (2015) suggests that athletes have greater innate or learned abilities to overcome demanding situations, including problem solving, overcoming setbacks, and the ability to focus on specific task completion. Participation in sports may add an additional stress management component (Cai, 2000; Deuster & Silverman, 2013; Li & Lindsey, 2013). This question explores the graduated nursing student athletes’ perceptions of factors or attributes which allowed them to complete nursing school successfully while participating in collegiate athletics.

RQ #4: “How do graduated nursing student athletes perceive their experiences balancing sports and academics as influencing their post-graduate experiences?”

The current nursing shortage requires that the profession of nursing examine techniques to attract nursing students and retain licensed nurses (Huber, 2014). Pate (2015) suggests that athletes have innate or learned abilities that may be beneficial in the stressful professional nursing environment. This question explores graduated nursing student athletes’ perceptions of the influence their college athletic and educational experiences bring to their professional practice.

There is little known research on nursing student athletes or their experiences in nursing school at the present time. The selected research questions attempt to explore graduated nursing student athletes’ lived experiences in relation to theories of college persistence, stress, and athletic participation. The questions are open-ended to allow the graduated nursing student athletes’ voices to provide insight into what would appear to be a challenging lived experience. The open-ended format also attempts to avoid steering the graduated nursing student athletes to preconceptions of the researcher (Moustakas, 1994).

**Definitions**

The following is a list of definitions of terms important to understanding this study.
1. **Graduated nursing student athlete** – A graduate of a four-year nursing program who also concurrently competed in NCAA or NAIA athletics (ACEN, 2017; NCAA Clearinghouse, 2012). This will include students who did and did not receive athletic scholarships.

2. **Involvement** – The level of physical and emotional effort devoted to education and related university activities. According to Astin (1999), students who participate in various campus activities become more engaged with the school and tend to perform at a higher level than those students who do not participate.

3. **Nursing school** – The period of specific focus on nursing classes during the completion of a four-year degree (ACEN, 2017). At MU and AU, this includes the sophomore, junior, and senior years; at CU, it includes the final four semesters (five semesters for nursing student athletes).

4. **Persistence** – The motivation, drive, or ambition to complete a four-year degree. Persistence is a student-focused term, contrasting with the institutional view of student “retention” (Tinto, 2012, p. 127).

**Summary**

Chapter One provided the background to this proposed transcendental phenomenological study, focusing on the experiences of graduated nursing student athletes in successfully balancing sports and academics while completing a traditional, four-year nursing education and concurrently participating in intercollegiate sports at colleges from three different competitive division levels. It also detailed the writer’s perspectives on the topic, the problem and purpose statements, significance of the study, research questions and research design, and delimitations and limitations of the study. Chapter Two will provide greater background regarding the study’s
basis in current, available research.
CHAPTER TWO: LITERATURE REVIEW

Overview

The following chapter provides a review of literature related to the nursing shortage and nursing school stress. Also included are discussions of theories about student retention, student involvement, and stress moderation. Additionally, research related to collegiate student athletes is presented. This literature review helps focus this study of graduated nursing student athletes by identifying what is known, unknown, or emerging in literature regarding these subjects; this focus, then, provides the basis for the study. Although literature reviews may be done before, during, or after data collection (Creswell, 2013), this study uses the literature review as a foundation for guiding the research design.

To determine the extent of research literature regarding nursing student athletes or graduated nursing student athletes, searches were conducted using multiple on-line databases at two universities. Databases searched included CINAHL, Military and Government Collection, Papers First, Proceedings First, Professional Development Collection, Psychology and Behavioral Sciences Collection, Regional Business News, Science and Technology Collection, WorldCat, WorldCat Dissertations and Theses, and digital book collections. Queries were also submitted through public-access sites, such as Google and Dogpile.

Parameters were set for “nursing students,” “nurses,” “nursing schools,” “nursing school stress,” “student athletes,” “college athletes,” “nursing student athletes,” and variations of these terms or term groups. These searches yielded multiple returns for “nursing students,” “nursing schools,” and “nursing school stress;” similar multiple returns were noted for “college athletes” and “student athletes.” However, searches for any of the various combinations of “nursing student” and “athletes” yielded no results.
Additional searches were conducted to find basic theoretical and theory support research. These searches focused mainly on works by or about Tinto (1987) and Astin (1999). These theories provided foundations for exploration of graduate nursing students’ ability to persist to program completion and success on the nursing licensure exam. More limited searches were conducted for original stress research by Selye (1937, as republished by Neylan, 1998) and later theories by Lazarus and Folkman (1987). These theories informed discussions of stress experienced by nurses, nursing students, and athletes.

Some search patterns yielded strong results. Nursing school stress has been widely researched. Stress among professional nurses has also been the focus of many studies. Theoretical and practical studies of student retention are also found in large numbers. Multiple studies about the relationship of student athletes and stress, retention, mental health, and sense of belonging have been conducted. What is not found in literature searches is research regarding nursing student athletes. To date, little known research on this small subset of nursing students has been reported.

**Theoretical Framework**

Several theoretical frameworks are applicable when examining student athletes and nursing students. These theories provide insight into stress, student retention, and persistence in attaining a college degree. Each theory discussed has a specific application to nursing student athletes.

While no theories currently focus specifically on nursing student athletes, several specific theories provide insight into the design of this study. These are the Transactional Model of Stress Response (Lazarus & Folkman, 1987), the Theory of Individual Departure from Institutions of Higher Education (Tinto, 1987), and the Theory of Student Involvement (Astin,
1999). These frameworks provide a backdrop for exploring the experiences of graduated nursing student athletes. All three theories shed light on circumstances, attributes, and behaviors of nursing student athletes that may predict their ability to successfully complete their education.

**Lazarus and Folkman (1987): Transactional Model of Stress Response**

Given that nursing school is highly stressful (Gibbons, 2011), this study of graduate nursing student athletes is grounded in part in stress theory. Mild stress, or anxiety, is necessary for motivation; however, numerous studies indicate that nursing school presents students with higher-than-average stress (Beck et al., 1997; Gibbons et al., 2008; Hsiao, Chen, Wu, Chang, & Huang, 2010; Junious, Malecha, Tart, & Young, 2010; Yucha, Kowalski, & Cross, 2009). Higher levels of stress can result in catastrophic emotional collapse, and over time, even moderate levels of stress can lead to illness or exhaustion (Selye, 1956), which may, in turn, lead to dropping out of school. Understanding how individuals assess and allocate emotional resources to work through stressful situations is useful when exploring topics related to nursing education.

Lazarus and Folkman (1987) proposed that an individual’s ability to cope with stress is based on their evaluation of the situation followed by an evaluation of the possibility of controlling or adapting to the stressor using available resources. The individual approaches the stressful event, which is a relational issue between the individual and his or her environment, and determines how significant the stressor is. Once the individual understands the impact of the stressor, a secondary evaluation is made regarding the resources available to handle the stressor. These resources include experience with similar stressors, personal stress coping abilities, and social support- all of which the individual could bring to mitigate or eliminate the stressor. Rating the stressor and available resources allows the individual to estimate their ability to
control the outcome of the situation (Lazarus & Folkman, 1987). This is consistent with Halter’s (2014) view that an individual’s response to a specific stimulus is related to whether or not the individual has a realistic perception of the stressor.

Dealing with the stress involves employing various coping techniques. Depending on the nature of a specific stressor, appropriate coping might include efforts to manage the problem or it might involve thinking of the stressor as a chance for positive personal growth. Most people exhibit specific coping tendencies in the face of stressful situations. These can range from displaying a general optimism about challenges, monitoring the situation over time to see if it will spontaneously resolve, or avoiding the problem altogether. Specific coping strategies that lead to positive outcomes cause the person to feel more favorable about facing stressors in the future (Lazarus & Folkman, 1987).

To summarize, the following example is proposed: An individual is hiking alone in the forest and hears what sounds like a large animal. The primordial stress response is activated. A novice hiker may experience high levels of stress based on uncertainty; however, if the individual is an experienced hiker and is familiar with the territory, an assessment of known animals in the locale might rule out any dangerous animals, leading the individual to feel more curious than anxious. Conversely, if the forest is known to be frequented by bears, then a different response and assessment must take place even for the veteran hiker. For example, the first stress rating might include known bear species in the area. If black bears are the only inhabitants, then the experienced hiker may make noise to avoid surprising the animal and eliciting a defensive response; if brown, or Grizzly, bears have been seen in the area, then the prudent hiker will look for a different passage. The novice hiker may be fearful to enter these woods again without ever having discovered the source of the noise, while a veteran hiker may
view the experience as a unique brush with nature. The perspectives of the novice versus the experienced hiker shape the overall stress response and the hiker’s reaction to it.

Theories Regarding Students’ Completion or Withdrawal from College

Examining the common life experiences of graduated nursing student athletes requires some understanding of the pressures faced by students to complete or drop out of higher education. Specifically, understanding the forces or influences that lead students to persist in their education until graduation or to abandon their education provides a platform from which to view students who graduate after completing both a difficult field of study and who expend many hours practicing for and competing in intercollegiate sports. To gain this viewpoint, this writer will ground this study in theories that approach college completion from different vantages. The first is Tinto’s Theory of Individual Departure from Institutions of Higher Education (1987), which helps define the major factors that lead students to withdraw from college or a particular institute of higher education. The second is Astin’s Theory of Student Involvement (1999), which proposes that students who are involved in various aspects of the college and educational experience are more likely to persist in their quest to graduate.

Tinto (1987) and student departure from institutions of higher education. Much research has focused on determining what factors may influence students to continue or discontinue their educational journeys, and the results have yielded a plethora of possibilities. A wide variety of psychological and environmental factors have been studied. Tinto (1987) analyzes and organizes these factors into an overarching theory regarding student departure. He argues that theories which focus on the impact of psychological or environmental topics are ultimately of limited utility because they cover too wide a range of possibilities and do not reflect enough emphasis on individual decisions.
Psychological characteristics, for example, are cited as a major influence in students leaving higher education. Tinto (1987), in his work on attrition among college students, found that previous research identified academic ability and other personal qualities needed to meet educational demands, such as personal determination and temperament, played a dominant role in students’ decisions to leave college (Marks, 1967). He later (1993) added additional factors from other studies (Rossman & Kirk, 1970; Waterman & Waterman, 1972), such as students’ perceptions of the value of a college education and their belief that achieving a specific degree would make them successful. Tinto (1993) argues because “over half of all institutions of higher education admit virtually everyone who applies” (p. 86), these factors provide little strategy to improve retention or student persistence.

If psychological theories focus on intrinsic qualities, then environmental theories focus on extrinsic considerations. These include social, financial, and organizational considerations that the individual must weigh. Each theoretical approach has appreciable merit (Tinto, 1987; Tinto, 2015).

Social theories, as the name implies, focus on students’ perceptions of the social value of college. Tinto (1987) states that social value can be the social advantage of completing an educational program at a specific institution, or it could be reflective of students’ social “fit” at a given college. He goes on to discuss the variance in views among social theorists. Some researchers (Karabel, 1972; Pincus, 1980) see student departure as a result of social conflict. Institutions of higher learning are geared toward the socially or educationally elite, and student departures are reflective of ongoing social stratification. Others (Duncan & Featherman, 1972) view persistence or departure as a result of the individual student’s ability to succeed in social situations rather than the student’s social or economic standing.
Financial theories focus predominantly on the economic factors in a student’s choice to leave college: these factors appear to affect those from lower socio-economic groups more dramatically (Tinto, 1993). Economic fluctuations, such as recession or revocation of financial aid, can influence individuals across the economic strata. Ultimately, financial decisions to leave college reflect the individual student’s perception of value versus cost. In his theory, Tinto (1987) accepts that financial concerns have an impact on retention and attrition. Stampen and Cabrera (1986; 1988) further quantify these concerns, especially as they relate to students receiving financial aid.

A third environmental category encompasses organizational theories. These center on the impact the institution has on the individual. Factors of note can include “bureaucratic structure, size, faculty-student ratios, and institutional resources and goals” (Tinto, 1993, p. 89). General colleges, which have no particular affiliation or career pathway, may have higher levels of student departure than universities that cater to specific occupations or to particular groups—such as religious affiliation. Some students may equate college completion with a personal goal or value set (Kamens, 1971), so they persevere to graduation for that reason rather than loyalty to a specific institution or field of study. Tinto (1987) found that Bean (1983) took a different view: students remain where they perceive higher levels of personal satisfaction. Often, this is a result of participation, communication with other students or faculty, earning higher grades, and the practical value of the institution—all of which positively influence retention.

Tinto (1987) argues that these theories, while establishing specific causes of individual departures, do not provide a basis for a global perspective on departures in general. To do this, Tinto (1987) borrows from a seemingly disparate theory: Emile Durkheim’s Theory of Suicide (1951). Tinto (1987) states that the analogy between Durkheim’s theory and student departure is
not intended to evoke thoughts of “educational suicide” (1990, p. 104), but to highlight how social and intellectual systems influence individual behaviors. Durkheim’s theory postulates “four types of suicide: altruistic, anomic, fatalistic, and egotistical” (Tinto, 1987, p. 100).

Durkheim claimed that the first three were directly related to society. Altruistic suicide, for example, is an act that people may perceive as serving a greater good; an example might be one of the Vietnamese monks who immolated themselves to protest against war. Anomic suicide refers to an act that occurs when societal norms are disrupted; this type of suicide may be seen in times of chaos, such as war or natural disasters. When looting or other anarchic activities occur in reaction to widespread strife, there is a greater risk of anomic suicide. In contrast, fatalistic suicide occurs when societal norms are made arbitrarily stringent and untenable. According to Durkheim, this type of suicide might occur in strict, totalitarian systems in which the individual feels no hope for self-determination (Durkheim, 1951).

Tinto (1987) is most concerned with egotistical suicide, as this provides the most applicable analogy to departure from an institution of higher education. Durkheim (1951) refers to egotistical suicide as those acts that result from an individual’s failure to “integrate and establish membership within the community” (Tinto, 1987, p. 101). Durkheim (1951) stresses, and Tinto (1987) agrees, that two phenomena must occur to result in egotistical suicide: first, the individual fails to interact, or has personally meaningless interactions with the community; second, the individual holds values that are not common to the community. In the latter phenomena, the individual may not value the common values of society or may not develop common values due to lack of interaction with society.

In establishing the theory of student departure, Tinto (1987) holds the characteristics of interaction and shared values to be vitally important. He states that egotistical suicide provides a
viable analogy to departure from higher education because it “highlights the ways in which the social and intellectual communities that make up a college come to influence the willingness of students to stay at that college” (Tinto, 1993, p. 104). Tinto points out that Durkheim’s “egotistical suicide” is only comparable to a point; he states that although “institutions of higher education may often be thought of as small societies unto themselves, they are more bipolar in structure than society in general, being made up of distinct academic and social components” (1987, p. 105). It is not necessary that the student interact or share values with all aspects of the college community, but that they interact effectively with the academic subculture and find meaningful value in associating with at least one sub-community in the college at large. Whether or not that “sub-community” is formal or informal is, for the most part, irrelevant.

Tinto (1987) does not discount the impact of the factors other theorists have proposed as having impact on student departure. The model, as detailed in Figure 1 (Tinto, 1987, p. 114), shows interactions of multiple influences over time. The individuals’ pre-admission characteristics – family background, personal attributes, and academic ability – provide the base from which to proceed or deviate from college completion. Other important influences, even before taking classes, are the individuals’ commitment to the college itself, personal goals, and commitments outside the educational system. As the student progresses, interactions with the faculty, academic performance, involvement in extracurricular activities, and involvement with social groups determine the individuals’ academic and social “integration.” This integration, or lack thereof, is then reflected against the goals and college commitment held by the individual prior to matriculation. It is this confluence of background, goals, interactions, sense of integration, and subsequent alignment or misalignment with goals and commitment, which influence the students’ decision to remain in school or depart.
A summary of Tinto’s (1987) Theory of Individual Departure from Institutions of Higher Education, then, would include multiple possible internal and external influences, interactions with the institution of higher education, and student’s perception of shared values at some level within the college community. There are parallels between institutional departure and egotistical suicide (Durkheim, 1951). And, finally, while the model is somewhat complicated, it relies heavily on the interplay between the individual student’s goals and commitment to the particular institution and the impact on those goals and commitments as a result of interactions with the institution, its representatives, or within the institution’s subcultures.

**Astin (1999) and college student involvement.** Astin (1999) proposed the Theory of Student Involvement to help provide a roadmap for increasing student success at the college level. The theory, according to Astin, is easy to understand, can be used to explain many of the factors that motivate students towards college success, encompasses tenets of “such widely divergent sources as psychoanalysis and classical learning theory” (p. 518), and can provide a blueprint for researchers, faculty, and administrators to develop improved settings which facilitate student success. In its distilled form, Astin states, “Quite simply, student involvement refers to the amount of physical and psychological energy that the student devotes to the academic experience” (p. 518).

The Theory of Student Involvement is comprised of five core concepts. (a) “Involvement” (Astin, 1999, p. 519) applies to the level of physical, emotional, or mental effort an individual expends in an activity or towards an object. The activity or object is not necessarily important: studying for a particular exam or attending student government meetings may provide equal platforms for involvement. (b) “Involvement occurs along a continuum” (p. 519). Identifying one activity will not elicit the same level of effort from every student, but
every student may find a focal point for high level of effort. (c) Involvement may be measured objectively (quantity) and subjectively (quality). Time expenditures for studying are measurable on a recognized scale; comprehension related to time expenditures may not so easily be rated. (d) “The amount of student learning and personal development associated with any educational program is directly proportional to the quality and quantity of student involvement in that program” (p. 519). And, (e), the effectiveness of policies and practices designed to improve educational outcomes is directly related to the amount of improvement in student involvement, which those policies or practices produce.

Students who study regularly and with great attention are generally more likely to stay in college until graduation. Other activities also have a positive impact related to retention. These include membership in sororities and fraternities, participation in sports, ROTC, and other extracurricular activities. Other research also suggests that these types of social support or group activities enhance retention through social connectedness (Darling, McWey, Howard, & Olmstead, 2007). Students who remain socially connected tend to feel more supported and generally have better academic outcomes.

According to a longitudinal study (Astin, 1975, as cited in Astin, 1999), student involvement can include environmental factors, such as place of residence. Living on campus is one such environmental factor that is positively correlated with retention. Astin suggests that this is a basic model of involvement in the college experience, as the student will live, sleep, eat, and study on campus.

To summarize the major points Astin (1999) posits that student involvement is a measure of behavioral effort in the educational experience; this effort can be applied to academics or ancillary facets of college life; it is not “one size fits all,” and involves both quantity and quality.
of effort; and, the more policies and practices increase student involvement, the greater the
effectiveness of the policies or practices. Involvement can be as simple as living on campus or
applying oneself in academics. The list of other activities in which students become involved,
and thereby improve their chances of graduating, include a myriad of on-campus activities
outside of the classroom.

Although Tinto (1987) and Astin (1999) differ in their perspectives on college students-
with Tinto focusing his theory on why students leave and Astin primarily looking at factors
which influence students to continue working towards graduation- both agree on some key
points. First, involvement in college activities, both formal and informal, help the student
develop or lose commitment to the particular college. Second, both agree that interactions with
faculty and staff – to include dealing with institutional policies or procedures – can provide a
decision point for students regarding remaining or departing. Additionally, both believe that in
order to successfully complete college, the student must develop some meaningful sense of
belonging; this need not be to the college at large but must include some level of “membership”
(Tinto, 1987, p. 105) or “investment” (Astin, 1999, p. 519) in some group or activity either
informally or formally aligned under the institutional community as a whole. Failure to develop
this attachment results in departure, while success in this area yields persistence.

These theories – Lazarus and Folkman (1987), Tinto (1987), and Astin (1999) – shed
light on the current study of graduated nursing student athletes. Lazarus and Folkman provide
insight into the students’ ability to view and negotiate stressful situations successfully. Tinto and
Astin both describe the importance of student involvement and some sense of connection or
membership in the social subcultures of the academic community. Student athletes may have a
greater feeling of belonging than the general student population. Athletic participation and
nursing school present the student with different, and sometimes greater, stressors than the general college students.

**Related Literature**

The theories above provide the framework and rationale for this study. The related literature, below, includes research regarding the nursing shortage, stress in nursing and nursing school, student athletes’ abilities to cope with stress, and proposed strategies for retaining nurses and nursing students. The related literature helps explain how accommodating the scheduling needs of nursing student athletes may yield professional nurses who are better prepared to handle stress and thus help ease the nursing shortage.

Colleges and universities, as well as the federal government, have placed college completion, student retention, and student success to perhaps their highest attention levels ever. In 2009, in an address to Congress, President Obama challenged the United States to focus on college graduation rates and make the United States the leader in the world. The Department of Education then set out to track data to ensure that Obama’s message was being taken to heart (Miller & Bell, 2016). However, as Tinto (1987) suggested, identifying a single data point from which to ascertain college departure or persistence is virtually impossible. Institutions of higher education, which receive federal funding, are now focused on recreating and retaining students not simply for the immediate revenue of enrollment but to ensure future federal funding and avoid federal fines (Miller & Bell, 2016).

Nursing programs are also under scrutiny from multiple sources. Nursing continues to be one of the most respected professions (Jones & Phillips, 2015). This makes nursing programs particularly attractive in terms of recruiting new students to colleges that offer nursing majors. This can be a two-edged sword: college administrators expect enrollments in nursing programs
to be at or near capacity, but external accrediting agencies require specific national exam pass rates for all nursing graduates (ACEN, 2017). Therefore, while many nursing schools have adequate numbers of applicants, those applicants may not meet predictive requirements to pass the course work and the subsequent national exam and may therefore not be admitted.

Consistent with other university and college recruitment concerns, nursing schools often compete with each other for available, qualified students. For example, in the Omaha, Nebraska, metropolitan area there are six baccalaureate and four associate degree nursing programs. State schools and community colleges have the advantage of offering substantially lower tuition rates. Lower cost yields higher numbers of applicants, and these schools can be more selective among qualified students. In order to attract and retain qualified applicants, some schools provide additional incentives to lure prospective applicants. These include, but are not limited to, lower faculty to student ratios, perceived better clinical experiences, and athletic or activity scholarships. This latter category, the focus of this study, provides an incentive to many students but simultaneously presents the student with additional stressors and time commitments (AACN, 2016).

Little research conducted to date has focused on nursing student athletes. Few schools provide nursing students with the opportunity to participate in intercollegiate sports. The dearth of research may be strongly related, therefore, to the low frequency of competitive athletic participation by nursing students.

**Nursing School Stress**

Nursing school has long been reported to be the most stressful professional school, with nursing students reporting greater perceived school stress than medical, dental, or legal students (Biggers et al., 1988). Stressors come from a myriad of sources, including academic workload,
clinical training schedules, clinical placements (Beck et al., 1997), bullying by classmates, teachers, and physicians and nursing staff at clinical sites (Cooper et al., 2009; Goldberg et al., 2013), and lack of support from instructors (Junious et al., 2010). Of note, stress is not limited to nursing education; most students report experiencing some level of stress due to changes in living arrangements, eating habits, workload, and social interactions (Tinto, 2012). Additionally, many collegiate athletes report experiencing stress due to time commitments and expectations in both academics and athletics (Storch et al., 2005). However, nursing students report higher perceived levels of stress than students in any other programs (Biggers et al., 1988).

As Selye (1956) postulated, long-term stress can lead to exhaustion. This can take different forms and may be evident when a student withdraws from nursing school, quits a favorite sport, or develops a related mental health problem—such as depression, an eating disorder, or an anxiety disorder (Hsiao et al., 2010; Sawatsky et al., 2012). Perhaps one of the more predictable sequela of long-term stress in nursing school is poor academic performance (Yucha et al., 2009).

In addition to potentially being caused by stress, poor academic performance is an additional stressor with which the individual must contend. Tinto (1987) differentiates student withdrawal based on academic performance; however, he contends that low grades often result in the student leaving college; this is not a personal choice but an institutionally directed action. Due to accreditation considerations – specifically, review of national exam success rates –, many nursing schools set the “poor grade” scale at a higher level than other schools. MU, for example, sets C+ (77%) as the minimum passing grade requirement in all nursing courses (MU Nursing Student Handbook, 2016). These higher-grade requirements are based on national research that
reveals that grades below this requirement net lower than required licensure exam pass rates (Herrera & Blair, 2015).

Nursing schools have recognized the impact of stress on students and have attempted various means to help students find suitable stress management techniques. Several studies have proposed meditation, relaxation techniques, or health promotion activities—such as exercise and diet changes (Galbraith & Brown, 2011; Jones & Johnston, 2000; Moscaritolo, 2009; Sawatsky et al., 2012; Warnecke et al., 2011) to alleviate or mitigate perceived stress. While the authors of these pilot programs often claim statistically significant changes in the reported stress levels of the volunteers in their study groups, it must be noted that interventions of this sort often require additional time commitments from the students. In a population that already reports stress from workload, these activities may be perceived as an additional time drain and may increase stress levels for many individuals. Also, some sources of stress, such as bullying, are harder to identify and quantify, at least partially because the offending parties come from divergent settings: nursing instructors, fellow nursing students, staff at clinical sites, and other students, faculty, or staff at the respective institution (Rehling & Bjorklund, 2010; Rowe & Sherlock, 2005).

Pate (2015) believes that athletics provides a crucible for preparing individuals to overcome difficulties off, as well as on, the field. Sports require that an individual push past what would normally be his or her comfort zone in order to achieve success. This, in turn, exacts a level of mental toughness that results in a stronger body and mind. The transformation enabled through training and competition may provide similar benefits to the stress mediating programs suggested by nursing school stress researchers (Cai, 2000; Hsiao et al., 2010; Jones & Johnston, 2000; Klainberg et al., 2010; Warnecke et al., 2011). Athletic participation is “... a training ground for leadership and experience in handling life’s challenges” (Pate, 2015, p. 11).
Stress is necessary for survival (Selye, 1956), and nursing school is inherently stressful (Biggers et al., 1988). Efforts to reduce stress in nursing school may be effective, but they also result in some additional stressors. Collegiate athletes may be better able to handle stress, as suggested by Deuster and Silverman (2013), but athletic participation may add some measure of stress to the student’s life (Storch, 2005). In addition, while nursing schools generally recognize the impact of stress on nursing students, there are specific clinical rotation and grading requirements, which result in stressors that cannot be easily mitigated (ACEN, 2017).

Stress for nurses continues after graduation. Long hours, less-than-adequate staffing, perceived lack of support from administration, and vicarious trauma caused by working with seriously ill or injured people every day can all add to overall stress levels (Huber, 2014; ATI, 2017). The suicide rate among nurses is believed to be at or above national averages (Rizzo, 2018). The cost of suicide and suicide attempts is high, but when lost productivity is added to the equation the costs skyrocket. Lost productivity results in fewer nurses available to work, which then adds to the stress of the nurses who remain at work.

Social Connectedness

Both Tinto (1987) and Astin (1999) agree that some level of social attachment with the institution is a strong predictor of student success. Tinto suggests that this attachment comes in the form of some perception of formal or informal group membership. Astin views this attachment more from the standpoint of the student’s involvement.

Astin (1999) theorized that students who were physically and emotionally involved were more likely to persist through to graduation. He stated that involvement could be seen in diligent academic pursuit or could encompass a myriad of formal and informal college activities. These activities could include athletics, the arts, sororities or fraternities, dormitory living, volunteer
organizations, or even groups of students who meet to share common interests outside of normal college channels. Darling, McWey, Howard, and Olmstead (2007) found this to be true. Their study found that college students face increased stress, as compared to high school students— including greater workloads; roommate conflicts; change in living, sleeping, and eating habits; public speaking; and moving from home. Those students who associated closely with a social group—in sports, the arts, academics, or informal groups—reported lower stress and greater overall life satisfaction, and they were more likely to graduate.

Civitci (2015) corroborates the findings regarding these associations. This study indicated a strong correlation between sense of belonging and both decreased stress and increased life satisfaction. However, this study did not suggest any correlation between participation in extracurricular activities and either stress level or life satisfaction. It should be noted, however, that Civitci’s study population was located in southeastern Europe; cultural implications of extracurricular participation may differ from the experiences of students in the United States.

Both of these studies support Tinto’s theory that a sense of “membership” is predictive of a student choosing not to depart from a particular institution. Civitci (2015) and Darling et al., (2007) found perceived membership to decrease stress and increase life satisfaction. Civitci did not find any evidence to support involvement in extracurricular activities as a moderator for these issues. This is an important concept to review, as many colleges in the United States provide an external source of “membership” to scholarship athletes. At MU, for example, all scholarship students are assigned to the same dormitory as their teammates and receive academic advising from a consistent member of the advising team. Additionally, coaches and assistant coaches are required to meet with athletes at least monthly—aside from routine practices—and
report any problems or concerns via a central university database. Finally, all scholarship athletes are required to attend organized study sessions every weekday evening (J. E. Timmons [pseudonym], personal communication, May 25, 2016).

A sense of belonging or connectedness can also come more formally in the guise of faculty support. A pilot program for at-risk students – that is students from lower socio-economic groups, first-generation college students, and students experiencing academic difficulty – found that increased communication with students in these sub-groups increased retention rates nearly 90% over the preceding three years (Miller & Bell, 2016). While the results of this study support the idea that interactions with faculty, as suggested by both Tinto (1987) and Astin (1999), increase student persistence, it should be noted that the sample was comprised primarily of adult, distance learners.

Tinto (2015) also found that informal interactions with faculty were more closely linked with students who persisted at one institution through graduation. He did not discount the importance of office hours, but he reported that students tended to view these interactions as more confrontational or corrective than supportive. Interactions that occurred spontaneously, such as hallway encounters or conversations at college sporting events, were far more valuable in making faculty seem accessible and increasing students’ perceptions of belonging.

**Collegiate Athletes**

College athletes face academic pressures similar to other college students. Additionally, performance expectations, scheduling difficulties, and time constraint issues provide additional potential stress sources. However, athletes often describe stressors more positively than other students (Gilham & Gilham, 2014). Lazarus and Folkman (1987) suggest that individuals who view stress from a challenge versus barrier approach are often better equipped to handle the
stress successfully. Furthermore, athletes may view academic or time constraint stressors as analogous to athletic opponents. While college athletes are not impervious to mental health issues, they may have innate or learned abilities in greater measure than non-athletes (Pate, 2015). As an example, collegiate athletes tend to exhibit fewer diagnosable mental health symptoms than their non-athlete classmates (Storch et al., 2005).

While psychopathology rates among students are similar to that of the general population, the rates among collegiate athletes are generally lower. Severe psychiatric illnesses, such as schizophrenia, major depression, and bipolar disorder, all tend to have higher diagnosis rates in late adolescence and early adulthood (Halter, 2014); these are the same rough age groups as the traditional college student population. Of the disorders mentioned above, depression is the diagnosis most frequently noted among college students. Collegiate athletes have a lower incidence of depression than the student population at large (Storch et al., 2005); however, after leaving their sport for any reason, rates of depression among former student athletes increases to near that of the general population (Weigand et al., 2013).

An interesting finding in the research, which relates most closely to nursing students, concerns psychopathology in female athletes. Females represent approximately 90% of the nursing student population nationwide (NLN, 2016b). Females have a much higher rate of diagnosis with depression than males (Halter, 2014). One study supported the idea that, in general, rates of depression and other mental health problems were lower in female athletes than in non-athlete female students. This is significant when related to the human response to stress (Selye, 1956), as it is the number one comorbidity with depression diagnoses. Participation in athletics, therefore, appears to mitigate some of the long-term sequelae of stress, such as depression.
One notable exception to this trend is among female athletes judged, at least in part, on appearance. The incidence of eating disorders, for example, has been noted to be higher among college cheerleaders and gymnasts (Wyshak, 2001) than among other female athletes. This finding may have significant value to the current study, as most nursing student athletes are female and many compete on cheer and dance teams.

As mentioned above, athletes may be in position to develop a sense of social connectedness more readily than other college students. This connectedness, or sense of belonging to a group, provides the student with emotional support and has been demonstrated to lead to improved academic outcomes (Darling et al., 2007). Athletes generally report higher levels of social connectedness than other students. This is, perhaps, a product of being a member of a team, assigned a specific academic advisor, and having more immediate access to graduate assistants and coaches who can help them navigate difficult situations during their college education (Armstrong & Oomen-Early, 2009). For Astin (1999), this is a win-win situation for the athlete and for colleges: support from teammates, coaches, and faculty, as well as sports participation in itself, add to the student’s sense of involvement and belonging and predict higher-than-average graduation rates.

Halbrook, Blom, Hurley, Bell, and Holden (2012) report that social connectedness and cohesion is not gender-specific. Their study of motivation and cohesion in 135 male and 118 female athletes at a D-I university supports the hypothesis that personality types, rather than gender, drives the perception of teams as supportive or non-supportive. Deriving their sample from athletes in seven men’s and eight women’s sports, they found that gender had no significant impact on team cohesion. The greatest predictor of perceptions of cohesion related to individual
motivation: those who felt intrinsic motivation to be part of a team perceived cohesion, while those who reported low motivation to participate reported low perceptions of team cohesion.

Perceptions of team support are an important factor in developing or maintaining motivation and preventing athlete burnout (DeFreese & Smith, 2013). Team members who play a more supportive, rather than a key, role in the team’s success and players facing a long rehabilitative period following an injury, report much greater likelihood to remain on the team if they feel that coaches and teammates recognize their efforts. Those “role” players or post-injury athletes who feel forgotten often lose their initiative, resulting in these individuals refocusing their efforts away from sports.

Overcoming conflicting societal messages may also be facilitated by supportive team membership. Pate (2015) points out the multiple dichotomies of high-level competition, such as winning at all costs versus good sportsmanship, winning is the only way to have fun versus playing one’s sport of choice for enjoyment, and the “who’s the greatest” versus the “no ‘I’ in team” concepts. Pate suggests that teams that do not support players, regardless of race, religion, or economic status, do not have the ability to achieve high levels of successful competition.

The idea that athletes, either because of their stress management abilities, involvement, or campus support, are more likely to graduate appears to be borne out by statistics. The NCAA contends that D-I student athletes graduate at a much higher rate – 82% compared to the 65% of the general student population. This figure is based on a six-year standard and may include enrollment at more than one college. Conversely, because the federal government calculates rates differently – using a one-school measure – they report lower graduation rates among NCAA D-I athletes than for non-athletes - 62% compared to 65%.
These different measurement techniques result in data discrepancies; these discrepancies bring the contention that D-I athletes graduate at a higher rate into question in some circles. Factors other than measurement techniques may also affect graduation rates. Sports which may adversely influence graduation rates in D-I are football and basketball; students in the top programs in these sports sometimes leave school prior to graduation to compete in professional leagues. Additionally, some D-I athletes arrive at college poorly prepared for the rigor of specific university courses and leave due to academic difficulty or frustration.

For D-II colleges, the NCAA and the federal government agree that student athletes graduate at a higher rate than non-athletes, based on a six-year enrollment standard (Carroll, 2014). They report insufficient data for D-III schools. NAIA schools generally offer far more scholarships, but these generally cover less of students’ overall costs. NAIA estimated graduation rates are lower- 56%- than at NCAA schools (Kretzschmar, 2016), but graduation rates for athletes are higher than at NCAA D-I or D-II schools (NCAA Clearinghouse, 2012). NAIA schools are generally smaller, which can aid in student involvement in activities other than athletics for students from smaller communities (Astin, 1999).

One further point about athletes and stress is attitudes about challenges. Most people are familiar with the saying found on posters in many gyms, “No pain, no gain.” Athletes learn that pushing themselves to the limit is not pleasant, but effort results in improvement. From the Transactional Stress Model (Lazarus & Folkman, 1987), athletes view those stressors in a more positive, challenging light. In Romans 5: 3-4 (NCRSV), we are reminded to “boast in our sufferings, knowing that suffering produces endurance, and endurance produces character, and character produces hope.”
Collegiate athletes may be either less susceptible or more resilient to stress. This is most evident when examining rates of mental illness that are typically much lower among college athletes than among the general college population. Athletes are afforded multiple sources of support during college which may enhance their feeling of connectedness or belonging, which, in turn, predicts a greater propensity to complete their education. The NCAA reports higher graduation rates for athletes than non-athletes, although this may not be true at the D-I level. Finally, athletes may handle stress more effectively because they have a different outlook regarding challenging situations.

Correlations between collegiate athletes and stress, sense of belonging, retention, and mental health have been widely studied. Various researchers (Halbrook et al., 2012; Wyshak, 2001) have found that female athletes share similar traits and experiences with male athletes. Wyshak (2001) also noted some distinct dissimilarities, especially in sports that judge athletes, at least in part, according to their appearance. Following decades of efforts to recruit more males into nursing (US Census Bureau, 2013), female nursing students still represented between 85 to 90 percent of the U.S. national nursing school population (NLN, 2014), so research regarding gender differences and similarities among collegiate athletes may be significant to this study.

**Connecting Nursing Student Athletes and Involvement**

Nursing students perceive high levels of stress, often manifested as anxiety disorders or other mental health issues (Beck et al., 1997; Biggers et al., 1988; Gibbons, 2010). Collegiate athletes demonstrate the ability to handle stress and continue their academic progress through graduation at higher rates than non-athletes (Deuster & Silverman, 2013; Pate, 2015). This protective benefit diminishes after the athlete “retires” from their collegiate sport (Weigand, Cohen, & Merenstein, 2013). Nursing student athletes, therefore, may be able to handle greater
stress without sequelae and sustain progress towards graduation. One area of concern in regards to these suppositions is with females in sports such as gymnastics or cheerleading. These activities do not seem to offer the same resiliencies to stress that are afforded by other endeavors (Wyshak, 2001).

Preventing stress burnout related to nursing school (Gibbons, 2010) may provide a major impetus to sustained academic success. Offering athletic scholarships may provide an avenue to increase nursing student recruitment (AACN, 2016). By recruiting and retaining more nursing students, the nursing education system could provide one avenue to help combat the national nursing shortage.

Multiple studies support the contention that sports and fitness play a strong mitigating role in the stress response (Cai, 2000; Deuster & Silverman, 2013; Li & Lindsey, 2013). One stress producing aspect of athletic participation is the time commitment; this may be mitigated by the stress management effects of physical fitness. In nursing school, the additional difficulties of scheduling practices and competitions around clinical experiences can feel insurmountable.

Pate (2015) supports the contention that athletic participation can provide current and former athletes with the ability to manage stress, overcome setbacks, and be successful in other endeavors. Rather than focusing on the positive benefits of physical fitness, Pate indicates that it is often the setbacks that athletes experience which translate into success. Pate specifically cites academic success as a result of athletic participation.

The relationship between nursing school – and the profession of nursing – and stress has been widely studied. There are multiple potential sources of stress; many of these stressors are similar before and after graduation from nursing school. Potential strategies to reduce this stress or mitigate the effects of stress have been proposed, but to date nothing universal has been
accepted. Much of the stress has to do with academic rigor, and academic rigor is absolutely necessary for nursing programs to remain successful, respected, and accredited. Athletes may possess greater stress resilience than non-athletes; athletes may also arrive with a level of physical fitness that helps offset the stress experienced by nursing students. The relationship between athletes in nursing schools and stress has not been examined.

**The Nursing Shortage**

A secondary goal of this study is to begin to consider a potential strategy to assist in alleviating the nursing shortage in the United States through recruitment and retention of nursing students. Nursing school stress was addressed, above. The profession of nursing shares many of the same stressors as nursing school: pressure to perform well in what is often a life-or-death situation, concerns about the potential for accidents leading to financial penalties or loss of licensure, difficult interpersonal interactions with doctors, administrators, coworkers, patients, or family members, and rotating work hours. All can be perceived as adding to the stress of daily life. Often, these stressors lead nurses to seek employment outside of the hospital- or even outside the health care field altogether.

The most recent statistics released by the National League for Nursing (NLN) indicate that nearly 20% of 4-year nursing program students did not make it to graduation in 2006 (NLN, 2016a). This represents a potential loss of approximately 80,000 graduate nurses. As Tinto (1993) suggests, some of these students leave due to academic difficulty; others leave voluntarily. Astin’s involvement theory suggests that facilitating greater involvement by these students – those who depart voluntarily – in the college experience could increase retention (1999).
The nursing shortage is estimated to be 500,000 positions as of 2012 (Huber, 2012; US DHHS, 2010). This is predicted to increase to 1,000,000 positions by 2025 (Huber, 2014). The current and predicted shortages reflect changing demographics, especially the average age of the nursing work force. It is predicted that over half the current nurses will have retired by 2020. Additionally, substantive realignment in the allocation of nursing resources due to changing federal and budgetary constraints have challenged researchers by making it more difficult to identify the actual supply and demand of the nursing work force. Despite regulations and fiduciary trends that appear to have decreased the number of required nursing positions by approximately 2% coupled with a similar increase in the number of nursing programs (2%), the gap between positions and qualified nurses has increased by approximately 3% per year. Additionally, the number of nursing students has decreased by 3.7% (AACN, 2016).

The National League for Nursing (NLN), the American Nurses Association (ANA), the American Organization of Nurse Executives (AONE), and the AACN have proposed a number of strategies to increase the number of qualified nurses and reduce the predicted shortage. These methods include innovations in the following areas: nursing education, with the emphasis placed on graduate education and marketing of the profession to 12-18 year olds; work environment, with focus on improving compensation for needed skills sets, increasing autonomy, and maximizing interdisciplinary partnerships; legislation and regulation, with better educational funding and education-level recognition by Medicaid and Medicare at the fore; and technology, research and data collection, with priorities placed on maximizing effectiveness of the available workforce through technological innovations and developing consistency in data collection to accurately define the nursing shortage (AACN, 2016).
The first item on this list of strategies, which includes the most specific and numerous recommendations, is nursing education. Nursing school is the pipeline through which prospective nurses enter the profession. Strategies that increase the number of students must include appeals to the widest variety of potential applicants. Recognizing the “whole person” through athletic scholarship offers is one aspect of nursing education that has been largely overlooked.

An additional consideration for nursing education is retention of students once admitted. Facilitating participation in activities of interest seems intuitive. Astin (1999) might agree: increasing involvement seems a logical step to increasing numbers of graduates. By assisting student athletes with scheduling issues that might interfere with traditional nursing education, more nursing students primed for success with intrinsic involvement could be one step toward reducing the nursing shortage.

One important key to consider when examining strategies for increasing the number of nursing students is academic rigor. By design, nursing classes must be challenging enough to prepare individuals upon graduation to pass the NCLEX or state licensure exams. Schools are evaluated and accredited based on meeting minimum pass rates on licensure exams (ACEN, 2017). Reducing academic rigor or lowering admission standards could increase the number of nursing students; however, this would not result in an increase in qualified nurses.

In general, once admitted to a nursing program approximately 80 percent of students remain until graduation. Many of those who do not remain are removed due to poor academic performance. No research to date has examined nursing student athletes and retention in nursing programs. Balancing both sports and school can be a challenge; because very few nursing schools have large numbers of student athletes, capturing data on retention might be problematic.
According to D. MacNamara (personal communication, May 15, 2016), Associate Professor of Nursing:

A fairly large number of students choose to attend MU because they are offered lucrative athletic scholarships. Still, it is difficult for students to continue both academically and athletically all four years. Seniors, especially, often choose to give up their last year of athletic eligibility in order to focus on academics.

In an effort to retain nurses, hospitals often seek designation as “Magnet” facilities. These institutions must meet specific leadership and organization criteria in order to gain this recognition. Additionally, institutional policies must outline a climate that encourages trust, autonomy, interdisciplinary communication, and synergistic teamwork, and staff interviews and surveys must support the achievement of these ends (ANCC, 2011). These qualities provide organizational validation for a professional community that is highly respected by the general public and indicate to prospective employees that the facility is serious about nurse retention.

As evidence of this respect, irrespective of the institution, the profession of nursing has been voted by the public as the most honest and ethical profession for 14 consecutive years (Gallup, Inc., 2015, as cited in Jones & Phillips, 2015). Nurses provide individual care to patients, lead other nurses and ancillary staff, and act as a full-time liaison between physicians who may visit hospitalized patients for a few minutes each day. Nurses also work long hours under highly stressful conditions.

Pate (2015) discusses leadership as an attribute of athletes. Graduated nursing student athletes may be in a prime position to use learned leadership skills to help retain nurses. The ability to motivate, inspire, and move towards common goals are characteristics of both athletic leaders and of strong nurse managers (Armstrong-Stassen, Cameron, Rajacich, & Freeman,
In addition to these more traditional leaderships skills, Armstrong-Stassen et al. found that managers who instilled a sense of belonging in their staff yielded higher retention rates than units led by managers who were more task focused. Pate (2015) argues that athletes who participated in team sports have experience in developing bonds that might transfer to the work environment. Graduated nursing student athletes, therefore, might influence greater retention or be more inclined to remain in nursing themselves.

An additional strategy in which graduated nursing student athletes might potentially improve retention is cross-training. Some nurses find this concept difficult to master, as each day could require working in a different area. However, cross-training benefits the employer as nursing resources can be reallocated quickly to reduce the effects of absenteeism and can be shifted efficiently when certain areas of the hospital are over- or under-staffed. For patients, nurses who routinely work in different areas report less complacency, and raised awareness levels result in a reduction of nursing errors. For the nurse employee, cross-training has been shown to improve morale and cohesion between different units in the hospital. It also helps retain more experienced nurses by preventing burnout (Paul & McDonald, 2014). Athletes, who have often had to change strategies in dealing with challenges on the field of competition, may be able to effectively handle the requirements of moving from one area of expertise to another (Pate, 2015).

Multiple nursing publications attempt to quantify and qualify the characteristics of successful nurses. Among these are communication, empathy, emotional stability, physical endurance, problem solving skills, and interpersonal skills (NursingLink, 2017; Kapoor, 2016). Pate (2015) states that participation in team sports results in similar attributes: trust, reliance, accountability, communication, empathy, and synergy. Additionally, passionate pursuit of
athletic excellence – or passionate pursuit of any art, according to Pate – requires mental
toughness, sacrifice, and perseverance, resulting in maturity, personal growth, and the ability to
rebound from setbacks. These traits and abilities appear to be a good match for those interested
in the nursing profession.

Summary

There is a current and growing nursing shortage in the U.S. Research on nursing schools
and stress find the two are heavily enmeshed; this stress does not necessarily abate after
graduation. While stress is a motivator and a necessary factor for day-to-day success and
survival (Brosnan-Waters, 2010), prolonged periods of stress can be physically and mentally
damaging (Selye, 1956). Stress can and does directly relate to nursing student and nurse attrition
(Huber, 2014).

Involvement in the college experience, including participation in collegiate athletics,
promotes student progress towards graduation (Astin, 1999). Participation in athletics leads to
the development of stress management strengths (Deuster & Silverman, 2013; Pate, 2015),
which may also positively impact graduation rates. Because nursing schools are the pipeline for
professional nursing, all viable retention strategies should be explored to help reduce the current
and predicted nursing shortage. By understanding the experiences of graduated nursing student
athletes, and by appreciating the stress-reducing benefits of physical fitness and athletic
participation, nursing schools may be able to affect changes to support more student athletes.
Graduated nursing student athletes may also be in a better position to withstand the stressors of
the profession of nursing, thereby improving retention of qualified nurses. Retaining these
nurses would be a method to reduce predicted nursing shortages.
Chapter Two discussed the theoretical basis for the current study, the nursing shortage, stress levels experienced by nursing students and nurses, research regarding college athletes and stress, student sense of connectedness, and applicability to the current study. An overview of research regarding theories of student departure and persistence were presented. Chapter Three will present the methods to be utilized in conducting this study.
CHAPTER THREE: METHODS

Overview

This study explores the experiences of graduated student athletes, having established that: nursing students perceive high levels of stress; student athletes may be uniquely able to complete courses of study due to university involvement and stress management capabilities; and nursing student athletes may have a role to play in combatting the larger, nation-wide nursing shortage. The goal is to identify common experiences and perceptions, which may provide insight for nursing schools attempting to improve retention. The study takes place at three private, religiously affiliated universities in the Midwest.

In this chapter the design of the study, data collection methods, and data analysis methods are presented. This includes the specific procedural steps, setting, participants, techniques, and attempts to ensure validity and reliability. Ethical and logistical considerations are also discussed.

Design

This transcendental phenomenological study explored the life experiences of three groups of graduated nursing student athletes. Qualitative research involves close interaction with a participant or group of participants in order to develop a complex view of an issue from the participants’ perspectives, with an end goal of contributing to the body of research and literature or call for some change (Creswell, 2013). The phenomenon in question in this study was the experience of successfully completing nursing school while concurrently participating in an NCAA or NAIA sport. The study employed journals, focus group interviews, and semi-structured individual interviews. The three sources of data and three groups of participants allowed two methods of triangulation during data analysis.
A phenomenological approach was selected in order to provide insight into the experience of participating in intercollegiate sports while enrolled in the stressful and academically challenging study of nursing. “. . . A phenomenological study describes the common meaning for several individuals of their lived experiences of a concept or a phenomenon” (Creswell, 2013, p. 76). Phenomenological research attempts to identify both the “what” and “how” of a shared experience (Moustakas, 1994). The particular phenomenon of interest in this study was nursing student athletes attempting to balance athletics and academics; the study attempted to find the “what” – common experiences – and the “how” – how the participants lived or perceived this experience – of the phenomenon. Answering the “what” and “how” questions provided insight into the overall “essence” of the experience (Creswell, 2013, p. 79). Transcendental-Phenomenological Reduction and Imaginative Variation helped the researcher arrive at the “textural-structural synthesis of meanings and essences” (Moustakas, 1994, p. 36) of the phenomenon of successfully balancing sports and nursing school.

Transcendental phenomenology provided an excellent methodology for this study. According to Moustakas (1994), transcendental phenomenology involves conceptual concepts of intuition, intentionality, and intersubjectivity. Additionally, this method requires three “core processes that facilitate derivation of knowledge: Epoche, Transcendental-Phenomenological Reduction, and Imaginative Variation” (Moustakas, 1994, p. 33). While the researcher’s post positivism might have led him to a more quantitative style, he recognized that that approach might unduly influence the findings and overlook or discount important aspects of the phenomenon. Transcendental-Phenomenological Reduction and Imaginative Variation provided the basis for arriving at “textural-structural synthesis of meanings and essences” (Moustakas, 1994, p. 36) of the phenomenon of successfully balancing sports and nursing school.
The underpinnings of phenomenological research are based on the writings of Husserl, a German mathematician and philosopher. This type of research is frequently used in nursing and education research (Creswell, 2013), as well as other human science research (Moustakas, 1994). Phenomenological studies attempt to “suspend all judgments” (Creswell, 2013, p. 79) about the phenomenon and tell the story in the participants’ voices. Moustakas describes this refrain from presuppositions as “a new way of looking at things,” or “Epoche” (1994, p. 33). In transcendental phenomenology, the researcher discusses his or her own experience with the phenomenon, thereby bracketing himself or herself out of the study (Creswell, 2013). The researcher sets aside all current views on the phenomenon, then revisits it in a truly open, fresh, and naïve manner (Moustakas, 1994), thus allowing the participants’ experiences to be the focus of the study (Creswell, 2013).

Twelve graduated nursing student athletes – four each from MU, CU, and AU – were chosen to participate in the study. Data collection was conducted using journaling, semi-structured individual interviews, and focus group interviews. Data analysis was conducted via pattern, theme, and content analysis as described by Patton (2002). Validity and trustworthiness were established via expert and member reviews and triangulation of participant groups and responses, audit trails, enumeration tables, and inclusion of participant quotes (Creswell, 2013; Patton, 2002).

**Research Questions**

In this study there was one central research question supported by three sub-questions. According to Moustakas (1994), the research questions must be stated in “clear and concrete terms” (p. 104). In phenomenological research, the questions that arise from “intense interest” are inspired by the “researcher’s excitement and curiosity,” and the key facet of the study is
focused by the researcher’s “personal history” (Moustakas, 1994, p. 104). Thus, the proposed research questions are:

Central research question (CQ): “How do graduated nursing student athletes describe their experiences in balancing sports and academics while completing a traditional, four-year nursing program and participating in intercollegiate sports?”

RQ #2: “What challenges do participants report facing while concurrently completing nursing school and playing intercollegiate sports?”

RQ #3: “To what specific factors do participants attribute their ability to be successful in balancing sports and academics?”

RQ #4: “How do participants perceive their experiences balancing sports and academics as influencing their post-graduate experiences?”

Setting

The setting for this study was three private, religious-affiliated universities in the Midwest. Molson University (MU), Amstel University (AU), and Carlsberg University (CU) (all pseudonyms) are located in cities with populations of approximately 25,000, 165,000, and 1.1 million people, respectively. Each serve students from primarily smaller (less than 25,000) communities. Approximate school enrollments are 1,250 at MU, 1,800 at AU, and 4,100 at CU, according to the respective college websites. Many of the graduates no longer live near their respective campuses; therefore, semi-structured individual interviews and focus groups were intended to be conducted at locations familiar and convenient to both the interviewer and participants. Due to the extreme post-graduation geographic distribution, including locations as far away as the Republic of Korea, all individual interviews were conducted by phone, and focus groups were conducted via e-mail based “chat” formats.
Selecting from three separate university cohorts of nursing student athletes potentially limited the sample size selected from each school, but allowed for triangulation of data during the analysis phase of the research (Creswell, 2013). Selecting participants from graduated nursing student athletes from NCAA D-I, NCAA D-II, and NAIA schools enabled comparisons of commensurate lengths of time in academics and athletics. Evaluating data from three data collection sources, and allowing participants to review those findings and offer concurrence or rejection, helped validate findings.

Students from all three universities tended to be Caucasian, middle class, Christian, and from rural communities. Minorities are representative of the area, but this representation is less than that of demographics across the United States; “Christian” faith is not a requirement for admission to the universities; and “rural community” backgrounds relate to the proximity of these three colleges to largely agricultural areas. According to school websites, all students must have at least a 2.75 GPA (4.0 scale) to gain admission to these nursing programs; however, MU has been more lenient with granting waivers for this requirement than either AU or CU.

Both MU and CU were selected as study settings because of the athletic opportunities they represent to students. An attraction for students applying to MU is athletic scholarship opportunity. The school offers scholarships in 31 varsity sports at the National Association of Intercollegiate Athletics (NAIA) level. Over 60 percent of MU students are on athletic scholarships (MU website).

CU also has a strategy to entice nursing student athletes. CU is a National Collegiate Athletic Association (NCAA) Division I (D-I) school; by law, D-I schools are limited to specific numbers of scholarships. CU offers nursing student athletes a completion program, which includes an optional, additional semester of education. This extra semester allows the students
some flexibility to complete their NCAA eligibility- four years- while accommodating variable, required practicum schedules and moderating credit load during sport seasons. The potential nursing student athlete at CU has the option of attempting to finish college in four years while participating in sports or completing an additional planned semester of school (CU website).

Amstel University (AU) is an NCAA Division II (D-II) college. There are slightly fewer scholarship opportunities D-II colleges than at D-I schools (Athnet, 2019). The nursing school has no special strategies to meet nursing student athlete needs.

It should be noted that, in addition to athletic participation opportunities, all three universities share certain characteristics that serve to aid student retention. All of these schools have a religious heritage and provide both non-denominational and specific denomination ministry support to their students. The student body at all three private universities is generally middle-class and Christian, although all websites state that they are welcoming to all applicants regardless of religious affiliation. All students in this study were traditional Bachelor of Science in Nursing (BSN) students and completed four-year degree programs. MU and AU are small campuses and are described by students as having a “small town” feel. Students at each university are required to live on campus during their freshman year; CU, due to its urban location, allows some freshman students to live in university-owned, off-campus apartments. Because many students at these colleges are from rural areas, Astin (1999) suggests that they will feel more involved because the campus setting feels more like home. Astin also predicts that students attending schools which meet their spiritual needs tend to continue to graduation at higher rates. Finally, living on campus is a factor in involvement which Astin (1999) emphasizes.
Participants

Following receipt of Institutional Review Board (IRB) approval, the researcher requested permission from MU, AU, and CU to contact graduated nursing student athletes. These permissions were received prior to initiation of research. Additionally, the researcher obtained contact information for potential participants from the three universities. See Appendix A for IRB information.

Purposeful selection of participants was based on successful graduation from a nursing school while concurrently participating in a scholarship-related sport. Purposeful sampling is described by Patton (2002) as a process of seeking participants who are likely to provide robust information. Potential participants who are reluctant to talk with an interviewer, who do not wish to participate, or who are only willing to do some of the data collection activities were not invited. However, one graduated nursing student athlete who agreed to fully participate, and then completed only the initial journal, was included to bring gender demographics close to the average at AU, CU, and MU. This method was used to seek six to seven participants from each of the universities; the goal was to attain a target of four contributors from each school to achieve a total of 12 participants. Creswell (2013) suggests that groups of participants who have experienced the same phenomenon can “vary in size from 3 to 4 individuals to 10 to 15” (p. 78).

During the search for participants, one school provided inadequate or outdated contact information for graduated nursing student athletes. The researcher serendipitously met several current nursing student athletes from this school at a clinical site, and they contacted recently graduated friends who they thought might be willing to participate in this study. One such graduated nursing student athlete contacted the researcher and participated in the study. Additionally, one participant agreed to complete all three data collection phases but later failed
to do so. This individual agreed to allow the researcher to use the completed journal questions; this inclusion resulted in a more commensurate gender demographic in the study compared with MU, AU, and CU gender demographics. The final participant total included five individuals each from AU and MU, and one respondent from CU, for a total of 11 participants. This sample size is acceptable according to Creswell (2013).

An additional benefit of having three groups of graduated student athletes was data source triangulation. Gathering information from different sources, methods, or investigators on the same phenomenon provides different perspectives, which helps validate themes and content (Patton, 2002). Creswell (2013) states, “When qualitative researchers locate evidence to document a code or theme in different sources of data, they are triangulating information and providing validity to their findings” (p. 251).

Participants were purposefully selected from successfully graduated nursing student athletes from the three schools. Efforts were made to include both male and female athletes, starters and substitute players, a variety of sports, and recipients of differing levels of financial support for athletic participation. In most cases, these efforts were successful. However, only one participant was not a starting player. Students who participated in NCAA or NAIA sports without scholarship compensation were eligible to participate; some of these participants were recruited for athletics but chose to elect more lucrative academic scholarships.

**Procedures**

The study began by obtaining IRB approval (see Appendix A for IRB approval). Following receipt of IRB approval, the researcher requested and received permission from MU, AU, and CU Offices of Student Affairs and the Athletic Departments to contact graduated nursing student athletes to solicit participants. Prospective participants were provided with an
information letter regarding the purpose of the study, the voluntary nature of participation, and the freedom to withdraw from the study at any time (see Appendix B for Explanation of Study and Invitation to Participate letter). The researcher then used purposeful selection of graduated nursing students indicating willingness to participate. This purposeful selection attempted to garner a variety of graduated nursing students by gender and particular sport. Each selected participant then completed a participant consent form prior to participating in the study (see Appendix C for participant informed consent form). Participants were sent letters of instruction regarding journal completion (see Appendix D for journal instructions and questions), semi-structured individual interviews (see Appendix E for interview protocols and questions), and focus group interviews (see Appendix F for participant instructions).

Data collection was conducted using journals, focus group interviews, and semi-structured individual interviews. Participants were allowed to review information to determine if they agreed that the essence of the experience had been captured (Moustakas, 1994). Confidentiality regarding participant responses was ensured via the use of pseudonyms and by transcription either by the researcher or by a private transcriptionist who had no affiliation with MU, AU, or CU and who was located in a different city than MU, AU, or CU. Data collection was conducted over a 14-month period; therefore, the researcher had ample time to conduct transcription (see Appendix G for a sample of a transcribed interview), and a hired transcriptionist proved unnecessary.

Data analysis proceeded in the same order as data collection, with participant journals analyzed prior to conducting semi-structured individual interviews or focus group interviews. Transcriptions of interviews are in a locked file in the researcher’s office; the researcher analyzed and coded data in an effort to identify themes. An expert reviewer provided
suggestions to the researcher regarding data analysis. Focus groups allowed participants to add
to the analysis of data and provide clarification of experiences and themes. Details are provided,
below.

Confidentiality and privacy were guaranteed by identifying graduated nursing student
athletes and universities only by pseudonyms in journal submissions, interview transcripts, and
focus group transcripts, and by having all transcriptions of focus groups and interviews
performed by the researcher. The researcher transcribed all interviews conducted during this
study. The use of pseudonyms allowed the researcher to collect and analyze data without
violating the privacy of any participants.

**The Researcher’s Role**

The researcher in phenomenological studies is the “key instrument” (Creswell, 2013). This
writer conducted all data collection and analysis. This included development of questions
to be answered through journaling, individual interviews, and focus groups.

It must be noted that the researcher worked as an instructor with all MU students
involved in this study. He feel that it is necessary to include MU nursing graduates, despite the
potential appearance of conflict of interest, because MU has combatted falling enrollment by
marketing heavily to athletes. This is true for all MU students, including nursing students. There
are now 31 NAIA sports at MU, and 60% of students receive some level of tuition assistance in
the form of athletic scholarships.

As previously mentioned, the researcher’s bias is that nursing student athletes contribute
positively while in the nursing program and to the profession of nursing, and that nursing schools
should work with student athletes to help accommodate their scheduling needs without reducing
academic rigor. He consulted an expert reviewer to assist in data analysis to ensure this bias did
not unduly influence analyses. He also clearly bracketed his own beliefs, perceptions, and attitudes prior to beginning data collection using journaling and memoing.

Two methods to bracket beliefs are journaling and memoing. Through journaling, the researcher provides details about opinions and judgments about the study as the data is analyzed and reanalyzed. In memoing, the researcher makes notes regarding emerging ideas as the data is analyzed and theories about the meaning of the data “evolve” (Creswell, 2013, p. 89). Both processes allow a more transparent view of the researcher’s progression and arrival at an overall theory of the essence of the lived experience. Both techniques were used in this study. Journaling was conducted during initial readings of journals, during transcription of individual interviews, and during readings of focus group results. Memoing was conducted during repeated reviews of composite documents which included all data sources from all participants.

**Data Collection**

Data collection using three different methods facilitated triangulating data (Creswell, 2013; Patton, 2002). These methods were deployed in sequence. The first method, journals, informed the focus of the second, semi-structured individual interviews; the first two then informed the third collection technique, focus groups. Personal interviews are the primary means of data collection in phenomenological studies, and personal interviews comprised the majority of the data collected in this study of graduated nursing student athletes.

**Journals**

The first data collection method was journaling. Participants were asked to write a retrospective, autobiographical account of their journey as nursing student athletes, guided by three, broad, open-ended questions. The journal also included one question providing brief information about the participant’s sport of choice and scholarship amount. While self-reported
journals may vary in scope and focus and may reveal strong personal biases regarding athletics or the nursing program, these documents aided in providing minor revisions to personal interview and focus group questions (Patton, 2002).

Providing open-ended questions to guide journaling and having participants complete the journals before the personal interviews or focus groups helps in two ways. Journals are normally open-ended and conducted concurrent with research (Creswell, 2013); however, in this study they were designed to help the participant focus retrospectively on their experiences. Because the study is retrospective, participants may have trouble remembering certain facets of the experience. Additional recollections may result by allowing time after the journals are submitted and before personal interviews. Patton (2002) cites one potential barrier to data collection in focus groups is fear of speaking in public or being overshadowed by other group members. The journals were intended to help some participants present information more comfortably, prior to sharing in the interview or during focus groups.

Standardized Open-Ended Journal Guide Questions

**Background Question**

1. In which sport did you participate during nursing school, and what amount, if any, scholarship support did you receive for this participation (you do not need to indicate a specific dollar amount; you can simply give a percentage or percent range)?

**Questions to Guide Journal Completion**

2. How did the opportunity to participate in a NCAA or NAIA sport contribute to your decision to attend nursing school at MU/CU/AU?

3. How did participation in sports while attending nursing school affect your nursing school performance?
4. When considering the entire experience of completing nursing school while playing an NCAA or NAIA sport, what positive and/or negative experiences do you remember most?

Answers to question one provided information about the variety of sports played by graduated nursing student athletes in this study. It also highlighted the variance in amount of tuition assistance received by the students. This helped provide some information about differences in time commitments, individual versus group sport participation, and financial incentive for participants in this study.

Question two was designed to shed light on the motivating effect of sports participation on students’ desire to attend one school versus another. This question also related indirectly to the central research question (CQ) about graduated nursing student athletes’ experiences. Question three related directly to the central research question (CQ), while also addressing research question two (RQ #2). Question four is more indirect but also elicited information to help answer research question two (RQ #2).

**Semi-Structured Individual Interviews**

The second step of data collection involved semi-structured interviews. The researcher conducted all interviews, at times convenient to both the participants and the researcher. Due to logistical difficulties presented by diverse work schedules and geographic distribution of respondents, all interviews were conducted via recorded phone conversations. All of the graduated nursing student athletes interviewed gave written permission to record interviews and verbal permission to the researcher to record the telephone interviews, for the purpose of accurate transcription. Interviews lasted no longer than an hour. An interview guide, based in part on the results of journal analyses, was used with each participant to help ensure consistent
lines of inquiry. Each question provided enough detail to ensure each participant is asked the same question “in the same way and in the same order, including standard probes” (Patton, 2002).

Questions were broad and open-ended. The focus of these questions was soliciting information about the nursing student athletes’ experiences during nursing school. Questions were related to the questions the study hopes to answer (Patton, 2002).

All interviews were recorded via audio device. The content was transcribed verbatim for review by the researcher (see Appendix G for a sample of transcribed interview). Copies of recorded interviews on a flash drive, and copies of the transcripts will be kept in a locked file in the researchers locked office for three years, after which they will be erased and destroyed, or shredded, respectively.

The following are the questions that were included in the semi-structured, individual interviews. Some minor modifications were made after data analysis of the journal responses. Data analysis of journals and interviews informed the final questions included in the focus groups (Patton, 2002).

Standardized Open-Ended Interview Questions

Background Information

1. Please tell me the following:
   a. Where you attended nursing school;
   b. Where are you currently working?

2. What sport did you play during nursing school, and how long have you been playing (including college)?

3. To what extent did your university offer financial support for athletic participation?
4. Would you have attended nursing school at (location) if you had not been allowed the opportunity to play your sport?

*The Nursing Student Athlete Experience*

5. Please describe your typical day in nursing school during your active athletic season.

6. How would you describe the challenges of balancing sports and nursing school to a friend considering doing the same?

7. How would you describe situations or times during which you considered withdrawing from nursing school or quitting your sport?

8. What aspects of the nursing program, athletic department, and university helped you balance sports and school?

9. What aspects of the nursing program, athletic department, and university made it difficult for you to balance sports and school?

10. What impact do you believe being a nursing student athlete has had on your nursing career?

The initial questions provided additional background information on the graduated nursing student athletes, including their nursing school, sport, scholarship assistance, and current nursing employment. The question about the amount of scholarship funding the student received was included, as this might have influenced decisions to continue playing sports even if academic difficulties within the nursing school arose. Astin (1999) suggests that students who receive money from schools may be more inclined to stay for financial dependence reasons. These are background questions that allow the researcher to “locate the respondent in relation to other people” (Patton, 2002, p. 351).

Questions five and six were directly related to the central research question (CQ): what
are the experiences of nursing scholarship athletes? Question five was designed as an icebreaker to allow the participant to describe freely the experience of actively participating in sports while attending nursing school. Given the stress related to nursing school (Gibson, 2010), question six allowed the student to consider the challenges they faced in light of another student requesting advice. Balancing athletics and academics is often an issue for student athletes (Storch et al., 2005), so this question also allowed for exploration in this area.

Question seven referred to research question two (RQ #2), and was predicted to relate to research on stress in nursing schools (Gibson, 2010; Gibson et al., 2011). This open-ended question was posed to allow students to discuss variables that may have caused them to consider withdrawing from school or quitting their sport. Probing questions here included asking how the student resolved the situation to remain active in their sport and in nursing school.

Questions eight and nine both addressed support issues for student athletes. These were opinion questions that allowed the researcher to explore what students think (Patton, 2002) about the support or obstacles presented by the nursing program and their respective sport, coach, or team. Research indicates that student athletes who feel supported by coaches, faculty, or friends often have better academic outcomes than do students who do not have these supports (Armstrong & Oomen-Early, 2009), and Astin (1999) concurs. These questions are more indirect, but also refer to research question two (RQ #2).

Question ten related directly to research question three (RQ #3), what positive or negative professional effects do graduated nursing student athletes perceive about their overall college experiences? This is a key aspect of the study in terms of nursing student athletes’ value to the profession of nursing. For more recent graduates, this may have been the most difficult to answer, as it required the participant to make a prediction of the impact of their experience on
their professional lives (Patton, 2002). However, recently graduated participants focused on how their competitive focus in sports helped them with the anxiety of completing job interviews.

Focus Groups

Following analysis of journal submissions and review of completed transcripts of the semi-structured interviews, focus groups were held with each university graduate nursing student cohort. Participants had the option of participating in a focus group with other students from their respective university, or completing questions individually. One graduated nursing student athlete from AU opted to complete the questions independently; the participant from CU also completed this independently. One individual from MU did not participate in the focus group. Four participants, each, from AU and MU participated in an on-line focus group discussion. Complete sets of individual and group discussions of the questions included in the focus groups are in the researcher’s private office in a locked file cabinet; they will be shredded after three years.

Focus groups allow participants to share ideas that may not have occurred to them during journaling or interviews. While primarily an interview with specific questions, the focus group allows participants to hear other people’s answers and add their own responses. Focus groups often yield additional information because of peer support (Patton, 2002). Krueger (1994, as cited in Patton, 2002) stresses good planning to ensure the correct phenomenon is addressed.

The following questions were anticipated to be included in the focus group interviews. Data analysis of journals and individual interviews yielded a slightly different set of questions. Participants were provided the opportunity to read and provide feedback to the journal and interview analyses.

Standardized Open-Ended Focus Group Questions
**Question Related to Journal Analysis**

1. What are your impressions of the journal analysis, and do you concur with the current findings?

2. Since completing your journals, can you please describe issues about participating in sports while attending nursing school which you may not have previously had a chance to address?

**Focus Group Questions**

3. Question 3 was added based on analysis of journals and individual interviews: Prior to starting college, what preconceptions (ideas) did you have about balancing college academics and college athletics?

4. How would you describe the overall experience of attending nursing school while concurrently participating in NCAA or NAIA sports?

5. What are your perceptions of your experiences compared to nursing school classmates who did not play sports?

6. What do you think were the most difficult aspects of being a “nursing student athlete”?

7. What was the best aspect of being a “nursing student athlete”?

8. What advice might you offer to a prospective athlete who also wanted to attend nursing school?

Questions one and two allowed participants to offer suggestions about the general themes identified in the journal analysis. They also provided an opportunity for the participants to add any information they may have recalled in the intervening time between journals and focus groups. Patton (2002) suggests that a potential difficulty with retrospective journals is memory: question two provided an opportunity to add information remembered later.
Question three, which was added based on analysis of journal and interview responses, related directly to the central research question. It reflected comments made by five participants regarding their lack of insight with regards to the difficulties they might experience trying to balance sports and school. Question four related directly to the central research question (CQ) and research question two (RQ #2). Question five referred indirectly to research questions two and four (RQ #2, RQ #4). Question six was an indirect reference to research question three (RQ #3). Questions seven and eight related to the central research question (CQ) and research question two (RQ #2).

**Data Analysis**

Data analysis included verbatim transcripts of each interview (see Appendix G for a sample of transcribed interview) and focus group, as well as inclusion of all journal material (Lincoln & Guba, 1985). From these data sources, participant responses were coded based on commonalities with the end goal of identifying patterns, themes, and content (Patton, 2002). Coded responses were grouped and sorted using Excel spreadsheets (see Appendix H for samples of Excel spreadsheets). The researcher intended to use, as Auld et al. (2007) suggest, a QDAS system. Systems such as NVivo facilitate data organization and analysis. Hilal and Alabri (2013) state that NVivo simplifies organizing responses to allow “the researcher more time to discover tendencies, recognize themes and derive conclusions” (p. 185). Woods, Paulus, Atkins, and Macklin (2015) reported that the use of QDAS systems to support data analysis is increasing in qualitative studies, most notably in studies described as ethnographic. They stated further that these data analysis tools were useful for “extending paper-based techniques for coding, retrieving, and analyzing ‘beyond the feasible manual limits’ (Richards & Richards, 1991, p. 319, as cited in Woods et al., 2015, p. 2)”
From these data sources, participant responses were grouped based on commonalities-with the end goal of identifying patterns, themes, and content (Patton, 2002). Data collection related to identification of participants progressed slowly, but this procedural delay allowed the researcher to use a less sophisticated system and still easily organize and sort data. Additionally, by not contracting transcription services, the researcher was able to identify potential areas of inquiry while typing verbatim transcripts of interviews. Standard word searches validated initial observations. Responses were grouped and sorted using Excel spreadsheets (see Appendix H for samples of Excel spreadsheets).

Participant reviews were also conducted to ensure that the researcher “presented the ‘essence’” (Creswell, 2013, p. 82) of the phenomenon. Each data set—journals, interview transcripts, and focus group transcripts—was analyzed. Journal data and interview transcript data helped inform the selection of carefully planned interview questions for focus groups (Krueger, 1994, as cited in Patton, 2002). Participants comments were solicited to concur or not with the findings.

Journals

After receipt of all anonymously returned journals, entries were grouped by content. Each content group was coded. These codes guided the researcher in identifying any patterns of participant statements. From these patterns, the researcher attempted to identify common themes in the participants’ recollections of their experiences as nursing student athletes (Patton, 2002). These themes helped inform question development for the individual interviews. An expert reviewer, followed by participants, reviewed conclusions for concurrence or to offer feedback to the researcher for potential different lines of inquiry.

Semi-Structured Individual Interviews
Using a semi-structured list of questions, the verbatim transcripts of interview recordings were subjected to the same pattern of bracketing, coding, and pattern and theme identification. When new patterns or themes emerged, these helped inform question preparation for the focus groups to follow. Reviews by experts and participants were employed again to ensure credibility (Creswell, 2013).

**Focus Groups**

Verbatim copies of this final phase of data collection were analyzed using content groupings, coding, and pattern and theme identification (Creswell, 2013; Patton, 2002). An expert reviewer assisted the researcher by providing feedback about theme identification. Participants were allowed an additional opportunity to provide feedback to the researcher.

**Overall Data Analysis**

During all phases of data analysis, the researcher maintained notes- on how patterns were identified- and enumeration tables- to determine frequency of specific themes. All transcripts and journals are stored in a locked file in the researcher’s private office, and an audit trail will be kept to ensure all source data is accounted for (Creswell, 2013). Printed data will be shredded and electronic data files will be destroyed after three years.

**Trustworthiness**

While achieving true objectivity in qualitative research is at least partially related to the researcher and the readers’ points of view, trustworthiness may be more measurable by striving for credibility, transferability, dependability, and confirmability. Lincoln and Guba (1986, as cited in Patton, 2002) describe this as “being balanced, fair, and conscientious in taking account of multiple perspectives, multiple interests, and multiple realities” (p. 575).

Trustworthiness was established via data triangulation- providing thick, descriptive data;
utilizing the participants’ voices and feedback on content, pattern, and theme identification; keeping an accurate audit trail, using enumeration tables; and consulting an expert reviewer (Creswell, 2013; Patton, 2002).

**Credibility**

Credibility relates to the study’s internal validity. A frequently used method of establishing credibility is data triangulation (Patton, 2002). In this study, triangulation was achieved through participant selection and data sources. Graduated nursing student athletes from three different universities with potentially different perspectives of the phenomenon of being nursing student athletes were purposefully selected. Data sources from the three groups of students included retrospective, autobiographical journals, individual semi-structured interviews, and focus groups.

**Dependability and Confirmability**

Dependability indicates that a study’s findings could be repeated if another researcher followed the same methodology. To ensure dependability, an audit trail will be performed. All source documents are filed in the researcher’s private office in a locked file. Information on all questions asked of participants, as well as process notes used for bracketing, coding, and identifying patterns and themes, have been maintained (Lincoln & Guba, 1985).

Confirmability relates to the neutrality of the conclusions of a study (Lincoln & Guba, 1985). More specifically, it refers to the conclusions reached matching respondents’ views more greatly than the preconceptions of the researcher. When the researcher, expert reviewers, and participants all concur about the identified patterns and themes, then the study’s conclusions are more confirmable (Patton, 2002). As described in the data analysis section, participants had multiple opportunities to evaluate and offer feedback regarding the conclusions reached by the
researcher. An audit trail was maintained, and, again, the data analysis was built on triangulation (Creswell, 2013).

**Transferability**

Transferability refers to the ability to apply the study’s results to other groups. One of the limitations of this study is the sample size. By providing a thorough and detailed description of emerging patterns and themes, supported by the participants’ voices, greater generalizability was achieved. “*Rich, thick description*” (Creswell, 2013, p. 252) provides a basis for readers to determine the generalizability of the study. Stake (2010, p. 49, as cited in Creswell, 2013) states, “‘A description is rich if it provides abundant, interconnected details.’” (p. 252).

**Ethical Considerations**

Researchers requesting Institutional Review Board (IRB) approval help ensure the well-being of all participants and the governing organization. IRB approval was granted before any participant identification or data collection proceeded. Approval was sought from MU, AU, and CU Offices of Student Affairs and the respective Athletic Departments to allow university and athletic department staff to ensure confidentiality of the school and participants.

All potential participants received an information letter about the nature of the study and scope of participation. This letter addressed the purpose of the study and an invitation to participate (see Appendix B). All participants received notices of the purpose of the study, the voluntary nature of participation, and the freedom to withdraw from the study at any time in an informed consent letter (see Appendix C).

Privacy and confidentiality were ensured by providing students e-mail delivery of journals directly to the researcher. The researcher grouped and coded journal content. An expert reviewer provided feedback on content grouping and provided suggestions, as indicated, for
additional lines of inquiry. Interviews and focus groups were transcribed verbatim by the researcher. All study documents are stored in a locked file cabinet in the researcher’s locked, private office on the MU campus; after three years, these will be destroyed.

Creswell (2013) warns against the possibility of putting two groups into a potential conflict relationship. In this study, there is a possibility that nursing faculty could feel “attacked” by graduated nursing student athlete comments about schedule flexibility. Discretion and diplomacy was necessary to attempt to avoid this conflict.

The researcher has detailed his biases, above. To recap, these included being prohibited from participation in collegiate athletics during his own nursing education, observing some level of inflexibility among nursing instructor peers vis-à-vis nursing student athletes, positive interactions with student athletes, and a belief that these athletes may provide benefit to the nursing community at large due to their intrinsic and learned stress coping abilities.

In addition to the researcher’s personal biases and viewpoints, a final area of concern is the potential power relationship between MU graduated nursing student athletes and the researcher who is a member of the nursing faculty. Confidentiality was ensured with pseudonyms, and all participants were volunteers given informed consent and the option to withdraw from the study at any time. MU graduates were selected only from willing, fully informed participants.

**Summary**

The purpose of this study was to examine the experiences of graduated nursing student athletes in successfully balancing sports and academics while completing a traditional, four-year nursing program and participating in intercollegiate sports at colleges from three different competitive division levels. Chapter Three presented the research design, research questions,
setting, participants, procedures, and data collection and analysis methods. Chapter Four will
delineate the findings of the study.
CHAPTER FOUR: FINDINGS

Overview

The purpose of this transcendental phenomenological study is to describe the lived experiences of graduated nursing student athletes in successfully balancing sports and academics while completing a traditional, four-year nursing education and concurrently participating in intercollegiate sports at colleges from three different competitive division levels. Different competitive levels may change the school’s emphasis on athletics versus academics; also, having participants from three different competitive levels allowed for greater triangulation of results. Triangulation allows a more thorough explanation of intricate behavioral phenomena by examining it from multiple viewpoints; gathering data from participants from three competitive levels is an example of data source triangulation (Patton, 2002). The following central research question and three support questions inform the study:

Central Research Question (CQ): “How do graduated nursing student athletes describe their experiences in balancing sports and academics while completing a traditional, four-year nursing program and participating in intercollegiate sports?”

RQ #2: “What challenges do participants report facing while concurrently completing nursing school and playing intercollegiate sports?”

RQ #3: “To what specific factors do participants attribute their ability to be successful in balancing sports and academics?”

RQ #4: “How do participants perceive their experiences balancing sports and academics as influencing their post-graduate experiences?”

The research findings presented in this chapter are drawn from three sources of information. After giving informed consent, participants filled out short questionnaires. Next,
they participated in semi-structured interviews. Finally, they answered several follow-up questions to provide more clarity and depth to previous answers. Two groups of four participants answered these follow-up questions in small focus groups; two individuals choose to answer these follow-up questions in a more private, questionnaire format.

By filling out questionnaires, participating in semi-structured interviews, and answering follow-up questions, participants describe their lived experiences as nursing students and collegiate athletes. The focus of questions is to derive graduate nursing student athletes’ perceptions of balancing athletics and academics, exploring the role of the school and sports programs in facilitating or hindering that balance, and providing their impressions of if and how the experience of being a nursing student athlete has influenced their role as a professional nurse. Follow-up questions are developed after reviewing questionnaires and interview transcripts to provide deeper exploration of the participants’ experiences.

This chapter presents the findings of the research. The findings are organized by participant institution affiliation and provide a thorough description of each participant’s responses to questionnaires and comments during personal interviews and follow-up. Themes which emerged were time constraints and the need for prioritization and time management skills, sacrifice of social life, development of teamwork skills, passion about athletic participation, and the necessity of good communication between athletic and academic departments.

**Participants**

The participants in this study are from a limited population; not all nursing programs support athletes’ participation in both nursing studies and athletics. To be eligible to participate, all individuals were required to have been nursing students while competing in NAIA or NCAA athletics at their respective colleges. All participants are graduates of four-year nursing
programs; all earned Bachelor of Science degrees in Nursing (BSN). Nine are female; two are male (4.5:1 female: male ratio). This represents a slightly higher percentage of males than the 9.5:1 ratio of females to males in professional nursing in the U.S., but is very close to the ratio of 3.9:1 (female: male ratio) in the Midwest region where all participants attended college (Rappleye, 2015). All participants lived in nursing compact states at the time they took their exams, and all successfully passed the National Council Licensure Exam (NCLEX) to obtain their state licenses. All those involved in the study are currently employed as registered nurses.

Eleven individuals took part in this study. Ten participants completed the initial questionnaire. One participant submitted a blank journal form twice; when asked about this, she stated that she had completed it but saved it without changing the name and could not find her original document. This participant was allowed to continue in the study, and additional information was gathered during the semi-structured interview. One participant only completed the initial questionnaire, and his written comments are included in the study.

Ten participants completed the interview process. All interviews were conducted by telephone, were recorded with participant’s knowledge and permission, and transcribed by the researcher. The original intent was to conduct as many interviews in person as possible, but at the time the interviews were conducted only three participants lived within one hour of the researcher. Participants live as far away as the Republic of Korea.

Ten participants completed the follow-up questions. Eight were involved in “virtual” focus groups, conducted via on-line forums. One participant requested to complete the follow up questions in interview format, and this was accomplished via telephone, recorded with the participant’s knowledge and permission, and transcribed by the researcher. The final participant
answered the follow-up questions without the benefit of a focus group, as she was the only participant from her college.

All participants are presented using pseudonyms to protect anonymity. All pseudonyms were selected from a list of characters found in fictional detective and mystery novels enjoyed by the researcher. The master list of pseudonyms for each graduated nursing student athlete in this study is maintained in a locked file in the researcher’s private office.

**Molson University**

Molson University (MU) is a member of the National Association of Intercollegiate Athletics (NAIA) for sports. It serves approximately 1,400 students. While the nursing school does not provide any specific support for student athletes, the school offers 31 sports and uses athletic scholarships as a primary recruitment tool. Each year over half of the declared nursing majors are athletes during their freshman year. By graduation, between 10% and 20% of nursing students have completed four years of eligibility. Brief information about each MU participant is included below.

**Clarice.** Clarice was a four-year starter in soccer during nursing school and an honor graduate at MU. She was also team captain her final two years. After graduation, Clarice worked for seven months in an intensive care unit prior to being commissioned as a Second Lieutenant in the United States Air Force Nurse Corps.

Clarice did not receive any tuition assistance for playing soccer. Her tuition was offset mainly by merit-based academic scholarships and grants. The opportunity to play collegiate soccer, however, was her main attraction to MU. She had a high school teammate who had travelled to MU to play soccer and a high school classmate who was being recruited for the soccer team by MU, but in a different major. Clarice says, “The opportunity to play soccer at the
college level while also being able to attend nursing school was the number one reason why I decided to attend MU.”

Like other participants, Clarice discussed prioritization, time management skills, and support as being paramount for success. Clarice began her freshman year with six other nursing students who were also on the soccer team; two of these students changed majors, and one fell behind and graduated a year later. “This was a great support system, as we were all going through it together,” says Clarice.

Knowing where and when to sacrifice were keys to balancing academics and athletics, according to Clarice. She said her teammates would jokingly say, “Eat, sleep, play soccer, study, have friends: pick three.” Those who did not figure this out did not finish in the nursing program, or finished later, “a test of how challenging it [managing both soccer and nursing school] can be.”

One consideration that Clarice mentions, which other participants did not, was financial stress. The time constraints involved with soccer and nursing school did not allow the opportunity for part-time work during the academic year. Her academic scholarship helped offset tuition costs, but they did not provide any money for personal spending on items such as clothes, food, phone, internet, or the occasional movie. Careful budgeting and allocation of money earned at summer jobs or tutoring on campus allowed her to manage, but her perception is that her financial strain in these areas may have been more than that experienced by nursing students who had time for jobs.

According to Clarice, another major consideration in her success was having coaches and professors who were understanding of the challenges faced by her, her teammates, and other nursing student athletes. Having a large group of nursing students on the soccer team helped:
“There was such a huge group of us on the team, we’re all doing nursing, and we’re all having the same kind of conflicts that the coach had to work around.” She also reports that nursing professors were more accommodating with clinical times, allowing nursing student athletes to attend day shift clinical rotations.

As previously mentioned, Clarice was an honor student during nursing school. Her advice to students considering playing a sport during nursing school concerns the academic and time difficulties encountered by nursing student athletes:

The first thing I would tell them is be ready to sacrifice social life... and set priorities... because a lot of the people who struggled playing soccer and doing nursing put a priority on social life. Being able to know that it’s ok not to go out on a Friday night or Saturday night in order to get stuff done. Also, if high school was challenging and you’re not the greatest test taker, maybe consider doing a five-year plan if you wanted to play intercollegiate sports because it is so, you know, nursing is hard in itself and adding a collegiate sport on top of that makes it even more difficult. It’s not for everyone, so I’d really consider if you’re able to make the sacrifice of social life and being able to set your sights on sports and your academics.

Mattie. Mattie is currently working for a traveling nurse company in Texas. Immediately after graduation and licensure, she gained employment as a surgical nurse. During her time at MU she played women’s soccer; she and Clarice were teammates.

Mattie states that even though she wanted to become a nurse, she would not have attended MU had she not had the opportunity to play soccer. She started playing when she was three years old, and she “still loves the sport.” She travelled 1,500 miles to attend MU, and
reports that she could not have afforded MU without the scholarship money provided by playing soccer. She writes:

My decision to attend MU was almost solely due to my opportunity to participate in NAIA sports and because of the athletic scholarship I would receive. I knew I wanted to go into nursing and the fact that MU had a great program made my choice easier. However, I also was focused on sports. I knew I both wanted and needed to play sports in college. I love the game of soccer, but more than that I needed the scholarship to allow me to attend a university like MU, one I would not otherwise be able to afford.

Like other participants, Mattie describes long days and high levels of stress. She lists the repetitive nature of her in-season life during the Fall semester, and the inconvenience of travelling directly from clinical to soccer practice and changing clothes in small bathrooms at the field. Off-season practices were fewer in number, but there was also weight training. Weekends in the Spring semester were generally open.

Overall, the cumulative requirements left little time for social activities. “The stress that I can remember feeling was unbearable at times,” she says. She reports feeling “sleep deprived, hungry, and physically and mentally exhausted.” Trying to have the same “normal college experience” that non-student athletes have proved to be “too much at times.”

Her advice to prospective nursing student athletes includes “learning to pack your books in your soccer bag.” Time management was essential, and that meant having resources readily at hand in order to utilize any available free time to study or complete school assignments. Planning ahead and prioritizing were essential to Mattie’s success, as was learning not to procrastinate. “It is hard at first to figure that out, but once you kind of get the hang of it, it’s not as bad,” she says.
Possibly the biggest key to successfully balancing her academics and athletics was communication between the athletic department and the nursing department. Ensuring that communication occurred was sometimes difficult, and Mattie felt there was “a constant struggle between getting professors and coaches to see the importance in the other half of my life. I was not just a student, and I was not just an athlete.” Generally, the communication between coaches and teachers took place early and clearly; often, this was as simple as providing the coaches with a course schedule and syllabus, and providing the instructors with a schedule which included travel days. When the communication lines were open, she says, “It was awesome. It was the reason we were able to make it work.”

Mattie states that being a nursing student athlete has had a major impact on her abilities as a professional nurse. She believes she has traits, developed through athletic participation during nursing school, which help her stand out from her co-workers in a positive way. Specifics include teamwork, accountability, prioritization, and time management.

Teamwork tops her list. She believes strongly that she can’t do her job alone. At the same time, she is more than willing to stand up and assist a teammate, even if she isn’t asked to do so. “I know that I can’t be successful without them, and so I just want them to know that I’m there for them,” she says. This willingness to share the workload has led to co-workers praising her for “being a good teammate.” She continues:

Team work is huge and I don’t know that there’s a good way to really learn that except by being part of a team. . . There’s gonna be people that you may not get along with outside of work, and you may not see eye-to-eye with them on every topic, but that doesn’t matter, you know, you’re still a team. And you have to put that aside and you have to help each other. And, you know, if you want the institution as a whole to be
successful, then you know that those are things you kind of need to push aside. Again, I don’t know that there’s a really good way to really teach that to people without just being part of a team.

Accountability may be as important as teamwork for a professional nurse, according to Mattie. She relates that as an athlete, each person had a role to play to ensure the success of the team. If she didn’t perform her role, her teammates would hold her accountable. She says that in her job she has the attitude that, “I’m accountable for the things that I say that I’m gonna do; I’m gonna do them. And if I don’t, then I know that I need to take responsibility for that.”

**Amos.** Amos, a four-year tennis player and honor graduate, is currently working as a registered nurse in an intensive care unit. He says that he probably would not have chosen MU for its nursing program had he not been allowed to participate in sports. However, the opportunity to complete another major while in his BSN program was another key factor: he double-majored in Nursing and Business. He was offered an athletic scholarship at MU, but turned it down in favor of a more lucrative academic scholarship package.

Amos was involved in more than just academics and athletics during college. In addition to completing a double major and participating in tennis, he was active in student government and was elected student body president during his junior year. He also served as a Resident Assistant in his final three years. “In the end, all of those extra activities are what helped prevent me from getting burnt out of nursing and having that extra drive to succeed in the classroom,” he explains.

The time commitment for tennis, as described by Amos, is similar to other sports, but the nature of the sport resulted in some fundamental differences. First, there are two tennis
“seasons”: a shorter season during the Fall semester, and a longer season in the Spring semester. Both involve travel to meets. Therefore, Amos was always in a “competitive” season.

A second difference is practice times. The practice schedule described by other participants in this study involved afternoon or early morning sessions; study time was usually the last part of their daily routine. Amos explains that in order to gain access to the tennis facility used by the team for practices, practice sessions had to be held after the evening meal; they concluded at approximately 10:00 PM. Therefore, free time earlier in the day had to be used for school work. Additionally, strength and conditioning workouts were held in the morning, “But when I had clinicals I never really got to go to those,” he says.

He describes communication as a major factor in successfully balancing sports and school. He was able to deflect or reduce many potential conflicts between coaches and professors by giving them as much advance notice as possible. One of his coaches was very easy to work with, because he felt that the tennis players “were students first.” This was not universal, however, as he explains: “Later on I had a coach who was not as flexible and had much different expectations about involvement in sports and the classroom. The bad part was, the later you got into nursing school the less flexible professors were to make accommodations for your sport.”

It was during the transition to this new coach that Amos describes wanting to quit tennis. Although he was able to work through these feelings and address certain issues with the coach, there was brief period during which he felt that he might have to give up the sport he loved. “He wasn’t very flexible and didn’t understand that I couldn’t get out of class or clinical for various tennis activities.” Changing majors was never a consideration for Amos. “The priority was always on nursing school, so I never considered withdrawing from that in order to play tennis.”
Also, unlike other participants who were able to afford their nursing programs because of athletic scholarship compensations, Amos did not feel compelled to continue his tennis career for any reason other than enjoyment of the sport; his major tuition offset was based on an academic scholarship.

Amos says that one of the best aspects of being a member of a sports team was the sense of “belonging.” This was important to balance out some of the stress he felt from being in a demanding academic environment. “I always felt that there was a lot of drama and tension that built up from always being surrounded by the same group of people.” Sports provided relief from that environment according to Amos. “Having an outlet of people who understood the excessive time requirements for studying and being a nurse was so necessary to succeed in studying. But at the same time having an outlet for people ready to work hard and be at the tennis court or in the weight room was a natural transition after lots of studying.”

Amos feels that overall the nursing faculty did a good job of helping him succeed in both nursing school and tennis. Most nursing professors were aware that athletics was a huge part of the recruitment effort at a time when enrollments at MU were at a historic low. “There were policies in place that were pretty cut and dry...practice or non-competitive event, then the school or the classroom would take priority...but if there was ever a competition then the class would be secondary to the sport as long as grades were adequate.” However, as the percentage of athletes in the nursing program was never above 40%, and less than that in the upper level classes, Amos says, “At times the nursing faculty needed reminders about the policy and some of them weren’t as flexible as others.”

Time management is the most prominent skill set Amos feels is necessary to successfully balance nursing school and athletics. As previously mentioned, Amos was heavily involved in
multiple facets of campus life. “Excellent time management essentially became a harsh reality check after my first semester of mid-term grades came out,” he says. His focus was on obtaining a nursing degree, but he didn’t want to give up the other activities he greatly enjoyed, “So I made some major adjustments in my studying efficiency and late night social activities.”

As for his career, Amos feels that being a nursing student athlete provided him with excellent experiences and skills. Time management is first and foremost, but leadership and conflict resolution are also high on the list:

Being able to step up and overcome that fear of kick back from the provider on night shift, or other nurses when I’m the charge nurse, or whoever the conflict is with, and advocating for your patient is like being in nursing school and being a student athlete and kind of having to advocate for yourself. I think that experience makes it a lot easier to be a nurse at the hospital and advocate for my patients.

**Dana.** Dana graduated within the last five years and currently works as a pediatric nurse. She was an honor graduate at MU. She participated in both indoor and outdoor track, as well as cross-country throughout her four years at MU. Dana’s written responses were among the most thorough of any participant. Each answer was well-written and covered a broader range than the basic question required, while remaining focused on the intended message. Each answer was at least three paragraphs long, as opposed to the average one to two paragraphs in most other participants’ responses.

Compared with other participants, Dana was a relative latecomer to her sport. Most respondents had participated in their respective athletic endeavors since before junior high school, but Dana did not start track until the second half of her freshman year of high school. Still, her commitment to track in college was evident. “I only got paid $2,500 to run. I could
have earned that working part time for a few months, but running lasted all year. And I got $2,500 for all year. I did not run, obviously, for the money.”

Dana also reported difficulties keeping up with the time commitments of both sports and nursing school. She indicated that she felt some resentment towards her classmates because they had more time to study: “I also just hated the sheer amount of more time some students would get to study for tests than me because I would have practice and track meets that took up time.” Clinical rotations also caused her discontent because she had to go to track practice, travel to a hospital approximately 45 minutes away, research her patients, return home, study, and then be at her rotation the following morning at five o’clock. “It was not conducive to getting much sleep. And I found it unfair.” She continued:

I had clinicals on Tuesdays and Thursdays in (city location), and I would have to drive to (city location) on Monday and Wednesdays (after practice ended at 6:45 pm) from (MU) to prelab. That was four trips to (city location) in one week. I could never carpool with anyone to prelab as well because no one else wanted to go that late because then they would have to stay up late doing the paperwork. I did not blame them, but it was a lot of gas money that semester for me and a lot of late nights.

On the whole, however, Dana clearly felt that the overall experience was positive. When asked about the positive experiences of completing nursing school while playing a sport, she stated, “There are probably too many positive experiences to list, so I will just list a few.” These included forming close, long-lasting friendships with teammates and the nurturing bonds she developed with her coaches and their families. She indicated how good she felt when professors or other staff members recognized her from the track team. She also reported that MU helped
her “realize that there is a lot more to your experience there other than getting good grades in the classroom.”

Dana is also open and honest about the differences in managing particular sports:

I would say my sport was probably one of the easiest to manage with nursing school . . . if nursing school caused me to miss practice for any reason, I could always just run on my own, versus, you know, volleyball or basketball where you have to . . . practice together more. So, I’d say they (distance running and nursing school) worked very well together. . . I had a teammate prior that had just gone through nursing school so he was used to [balancing] your preceptorship, and not making practices.

Dana also described a specific positive influence participating in competitive athletics had for her nursing career: “. . . it’s made me realize how important your health is to you, like staying fit.” She indicates that this is especially important when providing health education to patients regarding fitness and diet. She believes that if she can more honestly portray someone who “practices what they preach” then she can be a more effective nurse educator.

Norm. Norm completed the written questionnaire, but did not participate further in the study. Norm competed in soccer for four years and is now employed as a nurse on a medical-surgical unit. Norm says that the opportunity to play soccer was definitely a large factor in choosing MU: “It made school more affordable and allowed me to play the sport I enjoyed.”

Echoing most other participants, Norm says that balancing soccer and nursing school forced him to learn time management. “Honestly, the biggest thing I learned was time management. I mean yes, I learned a lot of medical and patient care information and still continue to learn today. But I couldn’t be where I am today without learning time management
very early.” He also noted that being on a team helped him develop a cadre of supportive
group of supportive friends. “I met a lot of great friends on the way, whom I continue to communicate with today!”

Norm writes that not all of his coaches were supportive:

I believe the biggest negative was not from the Nursing aspect but the athletic aspect.

Sometimes, the coaches just did not understand how much work, and how hard the work

I did day in and day out. I put so many hours into playing on the first team for soccer, but

had to put even more hours in studying and sometimes I did get burnt out due to them not

understanding.

In Norm’s experience, the nursing faculty was very supportive. “There would be times

we would not be back (from a soccer game) until two or three in the morning and have to be up

at five to travel to clinical. The instructors were great in working with me and giving me an

appropriate amount of time to complete work.” He agreed with other participants that

communication was vital to success. “Communication between us was key to getting

assignments in on time and making sure I had quality work.”

Amstel University

Amstel University (AU) is a Division II athletic institution serving approximately 1,800

students. The nursing school provides no specific support for student athletes. This writer

anticipated that the low overall numbers of student athletes in the nursing program, as reported

by faculty, would make it difficult to find participants. However, AU proved to be the easiest

school at which to recruit volunteers. Additionally, word-of-mouth from participants led to

finding one additional volunteer for the study. Brief information about each AU participant is

included, below.
Michelle. Michelle is a full-time nurse working in pediatrics. She graduated within the past three years and competed in track and field during college. She attended AU for nursing because they offered her a 100% tuition scholarship; an academic scholarship covered 20% of her tuition, and the remaining 80% was paid for via an athletic scholarship. She indicated that had she not had the opportunity to continue in track she would not have attended Amstel University but would still have sought a degree in nursing elsewhere.

Michelle’s written responses to the initial questions were brief, but thorough and well-written. She answered the entire survey and provided an interesting insight into the day-to-day life of a student athlete. When asked about any positive experiences associated with being in nursing school and participating in sports, she concluded her answer with, “I also enjoyed the well-wishes and ‘good lucks’ I received from my instructors and classmates.”

Michelle was candid about the stress level of being both a nursing student and an athlete. She fully described her daily life during the competitive season and training during non-competition periods. For most of the participants in this study there was no “off-season;” there was a competitive portion of the year and conditioning or practice during a non-competitive part of the school year. As Michelle describes the experience, “Participating in track added stress to an already demanding program.”

Competitive running has been a passion for Michelle since the age of ten. She competed during junior high and high schools and wanted to continue competing during college. She indicated that her school work sometimes suffered because she often prioritized in favor of track over her nursing studies. “I personally put track first because that was my passion at the time. And, looking back, maybe that wasn’t the best decision since nursing is now the rest of my life.”
She also reflected that participating in a sport which required a great deal of travel placed her at odds with some of her nursing faculty:

But it was really hard for me because the professors at AU take nursing very seriously and they are not always flexible. With track in particular we go out of town a lot because (at AU) the weather is cold and miserable for the majority of the season and we don’t have an indoor track. And so for indoor we were traveling a lot and for outdoor we were also traveling very frequently and the nursing professors were very difficult to work with as far as missing class and missing clinicals and making things up.

Easing this difficulty was Michelle’s coach. She stressed the importance of having a good relationship between academic and athletic departments. “My coach had to meet with them (the nursing professors) pretty frequently and, you know, make them understand the importance of this particular meet or this particular place that we were going.” Even with the support of her coach, she often felt that the faculty and coaching staff were pulling her “in two different directions at the same time.”

**Lara.** Lara is currently employed in an emergency department as a registered nurse. She was a volleyball player for four years at AU and received both athletic and academic scholarships. These essentially paid her entire tuition, but she readily admits she would have “looked elsewhere” for her nursing education had Amstel not offered her the opportunity to play volleyball.

Volleyball season required acutely honed time management skills. Nursing classes were offered Monday, Wednesday, and Friday, at 8:00, 9:00, and 11:00 AM. On Mondays and Wednesdays, the 10:00 hour was used for team weight training. Practices were held every weekday from 3:00 PM to 6:00 PM, but players were required to be in the gym at 2:00 PM to
prepare the courts. Clinical rotations were attended on Tuesdays and Thursdays, but Lara reports that her coaches were considerate of clinical requirements, and nursing students were allowed to show up 30 minutes late for practice on these days. Games were typically on Friday or Saturday, and Sundays were “days off.”

Even during the “off” season, the Spring semester for volleyball players, Lara describes days of at least 16 hours’ duration. The team had practice three days each week- Monday, Wednesday, and Friday; players were to arrive at the gym at 5:00 AM in order to prepare the playing area. Classes were held at 8:00 AM and 9:00 AM, with weight training at 10:00 AM. Classes would resume at 11:00 AM, and there were two to three hours of study time in the afternoons. Clinicals were either on Tuesdays or Thursdays, and the coaches were supportive of the nursing students’ schedules; practices on Tuesdays or Thursdays were typically arranged to offer the least interference with clinical times. The team typically played three “away” tournaments each spring, and hosted one. However, Lara reports that the Spring semester offered much more flexibility than the Fall semester, when volleyball was in season.

Her advice to anyone wanting to play volleyball during nursing school is to work on developing time management skills. Finding a balance between various activities and developing good working relationships is crucial:

I would say nursing school is pretty demanding and you have to learn how much social time you can have, how much time you need to spend studying, how much time you’re going to spend with athletics, and finding a balance between all three of those. I think that would be my biggest advice, is just learning to time manage early on and just making good relationships with your professors.
This relationship with professors was a key to success. Lara acknowledged that because Amstel is a small university, the coaches and professors knew each other well and communicated between departments. Her coaches, as previously mentioned, were very accommodating with practice times and understanding about clinical commitments. Additionally, she noted that some of the nursing professors at Amstel seemed somewhat more understanding of athletic time commitments, as they had college-age children who were also balancing athletics and academics.

Amstel also provided academic advisors who facilitated communication between athletes, coaches, and professors. They were available to assist in coordinating meetings, as needed, to work out scheduling issues. They also played a pivotal role in gaining access to tutors for specific learning needs.

Being a student athlete during nursing school helped Lara learn to prioritize, which is a skill she uses routinely as an emergency department nurse. She indicates that in order to acclimate to the “demanding environment that volleyball presented” she was forced to prioritize her daily activities, and adjust her priorities as the situation demanded. She states that being forced to learn that skill “helped me become a better emergency department nurse.”

An additional benefit of playing competitive sports during nursing school was learning the value of teamwork:

I was taught the importance of teamwork as a student-athlete. I see myself using teamwork skills in my profession every day. I would not be able to get through a shift without the help of my coworkers. I always try to lend a helping hand when others are struggling with their assignment, just as I would when I was playing volleyball. One of the core values my hospital stands for is teamwork and that is the value that I identify most with today because I was a student athlete.
Claire. Claire currently works as a registered nurse on a telemetry unit. She played soccer in college and was a team leader as the starting goalie. She did not choose AU based on athletic scholarship assistance, as she received full tuition remission based on her father’s employment at the university. She states she received a “small scholarship” for playing soccer, but the tuition remission was her main consideration.

Claire states that AU was her first and only choice for nursing school because she received full tuition remission. Although she was recruited during high school to attend AU as a soccer player, she decided to decline an athletic offer and focus exclusively on her nursing studies. However, after one year away from soccer, she decided she truly missed the competition and camaraderie; she joined the soccer team as she entered her sophomore year.

Claire reports that her days during the Fall semester, which is soccer season, were very long and offered little personal time. Days typically started no later than 7:00 AM, and before 6:00 AM on Tuesdays and Thursdays. Classes, or clinical rotations, would be followed immediately by practice. Practice ended at 6:00 PM, then players generally showered, went to dinner as a team, and finished their days with study time. She reports routinely getting to bed between 10:00 PM and midnight, depending on the amount of studying that was necessary each day.

There was very little time for social activities outside of her athletic sphere. Most of her “social time” was spent with other members of the soccer team. She says, “my dream in life is to be on ‘Dancing with the Stars’ (laughs), so on Tuesday nights I would host the team . . . I lived in this house, and we would watch ‘Dancing with the Stars’ from the night before, and then do homework, and then hang out and go to bed.”
Claire would advise students considering participating in athletics while attending nursing school to have realistic expectations for themselves, especially when it comes to social involvement. “The school and the sport can kind of consume a lot of your time,” she explains, so prospective nursing student athletes should talk to coaches, teammates, and professors before making the commitment. Trying to add more to an already packed schedule can be overwhelming, but it is not impossible if you are prepared for it. “If you are still very interested in a lot of other involvement areas, then you really need to be on top of your time management skills,” she explained.

Stress in nursing school has been clearly identified, and the time commitments of competitive athletics also exerts a stress toll. Claire had the added stress of serving as a resident assistant during her junior year. She describes it this way:

My junior year I was an RA, so I lived in the dorm where I lived as a freshman, and I had 31 freshman residents. That was an incredibly stressful time in my life . . . it was my first time being ‘in season’, it was my first year of major nursing classes and clinicals, and I had to take care of 31 freshman women. So, freshman year I think is stressful enough, but many of them struggled with mental health issues as well; so that year was probably one of the most stressful years of my life.

Unlike most of the students interviewed for this study, Claire did consider changing majors. She admits that this was mainly due to the high level of exposure to non-nursing subjects she experienced during her freshman year. She describes her feelings this way: “Sometimes I would wonder, ‘Am I in the right major, because I also really enjoy this subject area.’” She satisfied her need to explore other areas of study by declaring as a triple-major.
Claire credits much of her success in balancing sports and school on two factors: the communication between her coaches and nursing professors and the timing of her chosen sport. Her coaches were diligent in advising the nursing department about commitments with the soccer team, and her professors were always available to answer questions, even when she was traveling. The position of soccer in the school calendar year was also a bonus, as she describes:

Soccer is fortunate because it’s in the beginning of the school year. I think that the sport that is incredibly tough to be in, in that has so many games and a heavy travel schedule, would be basketball. Because their season is at the end of the semester, they’re missing all their finals for travel and games . . . as well as the beginning of a new semester. So, the sport that I was in (soccer) also made a big difference with the amount of games and our travel schedule.

According to Claire, her time as a nursing student athlete has been “invaluable.” She is a leader at work, a skill she learned from directing her soccer team as goalie. She has a strong work ethic, as her soccer team’s philosophy was, “Always do more.” Communication and resource utilization are two other skills she says were honed as a member of a competitive athletic team. She also learned the necessity and value of self-care, as AU offered free counseling. She reports that this service helped her with time management, and it was a resource which, as an RA, she often guided her freshman students to utilize.

Jane. Jane was another AU volleyball player who tread a unique path to graduation. She started her volleyball career at an NCAA D-I school, but transferred to AU because her first college’s nursing program’s policies made athletic participation almost impossible. She transferred early enough to maintain all four years’ eligibility at AU. Both schools offered her 100 percent tuition scholarships for her participation in volleyball.
Jane works at a primary care office as a nurse. She took some personal time after graduation, a delay which she believes caused her to have some difficulty successfully completing the nursing licensure exam. Still, she feels that the abilities she developed as a nursing student athlete, such as being able to overcome setbacks and then refocus on goals, helped her persevere during this trying time. She reported that having been a collegiate athlete was a positive factor during job interviews, alleviating some of the concerns raised by earning licensure almost two years after graduation.

During her initial recruitment to play volleyball for the D-I university, Jane was told she would be able to compete in her sport and seek her nursing degree without conflict. However, during her freshman year she discovered that nursing school practice and policy did not provide any flexibility for any conflicts. Any travel to games would require her to make private arrangements to get to games on her own after classes or clinical rotations. She understood the gravity of the situation: even though she was a student first and an athlete second, “athletics was how [she] was paying for [her] schooling.” The lack of support caused her to reconsider nursing as a major. She spoke with an advisor who suggested and facilitated a change of major to Elementary Education. While this seemed to fit more easily with her athletic schedule, she found herself unhappy with this course of study. Hearing that AU might be able to more fully accommodate volleyball and nursing school, she decided to transfer. “The opportunity to participate in NCAA volleyball contributed to my decision to attend nursing school at AU because I was finally a part of two programs that understood each other,” stated Jane.

However, Jane shared that she continued to have some difficulty balancing athletics and academics:
I constantly felt like I just needed a little more time to prepare or finish an assignment. If I wanted to sleep that set me back in school, but if I stayed up, that made it more difficult to perform on the court. . . By the end of my career I did figure out the balance for the most part. It was never perfect, but I grew as a person and as an athlete because of the stress and demand of being a nursing student athlete.

What helped Jane was the communication between her coaches and her nursing professors at AU. She felt the nursing instructors and volleyball coaches were flexible and accommodating, saying, “They were always super helpful, and they always came up with a way that I could still participate [in games or practices] or a different route I could take to complete [an assignment].” She continued, “They worked really well with each other and they always found a way for us to be as involved in nursing school and involved in volleyball as possible.”

Jane acknowledged that having multiple nursing students on the volleyball team contributed, at least in part, to the great communication between the athletic and academic realms at AU. Throughout her career she had at least one teammate who was also in nursing school; sometimes there were as many as four nursing student athletes on the volleyball team. One specific classmate was her teammate all four years. Having multiple volleyball nursing student athletes, she believes, encouraged the faculty and coaching staff to look for “work-arounds.”

Additionally, having the support of another student who was facing the same stressors helped make her feel that she was not facing these challenges alone. She shared that during her time at the D-1 university, “I was on my own trying to figure out if I was going to go to clinical and be late to the game or cut clinical in two parts and be in time for the game but still have to travel by myself.” While matriculating at AU, she felt that her advisor, having worked with
other nursing student athletes who played volleyball, was able to hear her concerns, listen to her opinions, offer alternatives, and work with her to develop strategies for academic and athletic success. This did not happen at the D-1 school, according to Jane.

Jane definitely understands that her goal was to finish nursing school: volleyball was her method of paying for her education. However, competing in a sport while negotiating the academic rigors of nursing school required a great deal of sacrifice and added stress. Her days, during the competitive season often lasted 19-20 hours: arrive at the gym at 5:00 AM, practice, attend classes and conditioning sessions, and study often until after midnight. “A typical day,” she says, “was just, always felt long.”

Along with time management skills and work ethic developed as a student athlete, Jane believes that another one of the benefits of being a nursing student athlete evidenced itself during nursing job interviews and orientation. When she mentioned that she had competed in volleyball for four years during nursing school, prospective employers were often interested in talking more about that experience than in following a scripted, pre-employment questionnaire. “Their eyes would get like really big and they were like, ‘Oh, an athlete?’, and we’d talk about volleyball.” She also stated that having this background helped her fit in with her coworkers “from the very beginning.”

Ellen. Ellen, an emergency department and cardiac catheterization lab nurse, participated in track and field during college. The opportunity to participate in this sport and receive a scholarship for doing so were the major influences in her choosing to attend AU. “I was able to afford a private school education at about the same price as a public school because of my participation in track,” she says.
Ellen was recruited by two D-I schools, run by her state, to participate in track, but only one offered a scholarship which was “very small.” The other school offered her only the opportunity to “walk on” for track. AU offered her academic, as well as athletic, scholarships, which made the cost as affordable as attending either of the less-expensive D-I state colleges.

During the Spring semester, which was Ellen’s season for track, school days would start with classes in the morning and afternoon, followed by practice at 3:15 PM. After practice ended at 5:30 PM, many athletes would stay for therapy sessions, including ice baths or stretching. Dinner would end at about 7:00 PM, and then she had free time. Tuesday and Thursday mornings were “plyometric” days; training sessions began at 6:30 AM and involved short, intense periods of jumping to strengthen leg muscles.

Balancing sports and school wasn’t an external challenge for Ellen; she set high expectations for herself in both track performance and grades. Still, Ellen reports that she “didn’t study a lot. But if there was a test coming up then, yeah, there was a little bit of cramming.” She reports that she was a fairly strong student, but less gifted students would also be able to successfully balance athletics and academics if they understood their strengths and weaknesses. She states,

I think it depends on how good of a student you want to be and how good at track you want to be. For me, I wanted to be very good at both of them and so I think I put maybe a little bit more stress on myself than I necessarily needed to. But if you want to do track just because you loved it, and you just wanted to be involved in the sport I think it wouldn’t be as demanding; same with nursing school. Say, if you were ok with getting B’s and C’s, you might not have needed to study quite as much or quite as hard. So, it kind of depends on what you’re looking to get out of it and what your goals are.
Although she never considered quitting nursing school, Ellen did have an experience that caused her to rethink her commitment to track. During both her junior and senior years, Ellen suffered hip injuries which required surgery, adding physical therapy appointments to an already packed schedule. Interestingly, it was the first injury that caused her to consider giving up running. After experiencing her teammates’ support and positive results, she says the second injury was not as disheartening. “I kind of recovered about two months faster because I knew what I was doing. So that year (senior year) I didn’t have as big of an obstacle to overcome when I had that surgery because I knew what I was doing,” she explains.

Early in her academic career, Ellen feels AU did a good job of helping student athletes balance academic and athletic requirements. “My freshman year we had study tables. That really helped you kind of sit down and really devote some time to studying,” she says. The university at large and her coaches also emphasized the need to focus on studies in order to be eligible to participate in athletics.

She did not feel the professors were as accommodating as she needed them to be. Unless the team was physically removed from campus – for an “away” meet, for example – she reports that the instructors were very demanding and did not understand that local activities also required time commitments. This was true even if the commitment was travelling to a meet. She explains:

[I was] required to stay and take a day’s worth of clinical instead of going to the indoor national track meet in Alabama. My clinical was on a Thursday and we were supposed to compete on Friday. She required me to stay at that clinical unit 3 PM on that Thursday, which I did, but then I had to get myself to the airport and get myself from there to Dallas. There was a delay in Dallas, which finally got me to Birmingham, Alabama, at
about three in the morning. I didn’t get the greatest sleep, obviously . . . So, I wasn’t necessarily ready to do my best because of the situation I kind of had to go through.

Before this situation, I had to sit down with my teacher, with the academic advisor, and with the nursing department chair, and they all, I guess, agreed that I had to do these clinical hours. The funny part is, the Tuesday clinical group had a snow day that Tuesday and had to make up the clinical the following week. So, I kind of argued, why the heck am I not able to make up the clinical the following week if we have something built in for weather? It still kind of bothers me to this day because no one could actually tell me why I wasn’t allowed to go with my teammates and make up those clinical hours later.

Competing in a collegiate sport has helped her as a nurse, Ellen suggests. She feels the stress level of nursing school and competing in sports helped prepare her to deal with the stress of working in an emergency department. The ability to multitask and stay on task also has had a positive impact. She also suggests that she developed a sense of self-efficacy during the process of learning to balance sports and school. “You have a lot of pressure on you, and you have this and that going on all at the same time, but you still have to perform and you still have to do your job . . . I kind of look back and say, ‘Hey, I already did that.’ I can take that and apply it to my career.”

**Carlsberg University**

Carlsberg University (CU) is a NCAA D-I school. CU is the largest of the three schools in this study, reporting an average undergraduate student population of 4,100 students from 2008 to present (CU [pseudonym] website, 2016). CU offers nursing student athletes a BSN completion program, which includes an optional additional semester of education. This extra semester results in a longer period of study, but allows the students greater flexibility to complete
their NCAA eligibility - four years- while accommodating variable, required practicum schedules. The student at CU must choose between finishing college in four years while participating in sports or adding a semester of school to reduce conflicts between athletic and academic schedules. Brief information about CU’s lone participant is included, below.

**Stephanie.** Only one CU participant provided feedback for this study. Stephanie Plum, who started as a walk-on- non-scholarship- athlete in fencing (sport pseudonym to protect anonymity), did not participate in this sport in high school. She made the team and earned a scholarship beginning in her sophomore year. She was one of three of eleven participants who stated that they would have attended their respective college regardless of the opportunity to participate in athletics. She is currently working as psychiatric nurse.

Stephanie also changed her major to nursing at the end of her freshman year. She had some interest in nursing prior to college but began her college career as a psychology major. She says, “I think that I always knew that I wanted to do nursing, but it just kind of took me that first semester to go, like, yeah, I want to commit to this. So I applied after my first semester and I had to wait until the next school year, so I just got my minor in behavioral and cognitive psychology.”

Personal expectations drove Stephanie to complete nursing school while participating in a D-I sport. “I wanted to be the first person to successfully graduate from CU’s nursing program and complete all my eligibility as fencer. That desire to be the ‘first ever’ kept me going even when I wanted to give up fencing and focus exclusively on nursing school.”

She describes days beginning as early as 3:30 AM, although most days she did not have practice or team activities until 5:00 or 5:30 AM, and having all waking hours accounted for
until after eating dinner at 6:00 PM. That is when her study time began. She routinely studied until near midnight.

Stephanie says that one of her keys to success was learning to advocate for herself. “If I foresaw an issue or time conflict between fencing and nursing, I addressed it as soon as possible. . . I think that because I handled situations, especially time conflicts, sooner than later, that worked to my advantage. But I will say it added to my stress.” That ability to advocate for herself also enabled her to advocate for teammates and, she reports, after graduation for her patients.

She also says that the support offered by teammates, who are now some of her best friends, helped her balance sports and school:

I think that in competing, with some of my best friends, and being able to share in victories together, as well as be there for each other when there were losses, you get stronger. You go through a lot of emotions with others that I think make you stronger and create stronger bonds. You see each other at very vulnerable points when you’re on a team, whereas when in class and in nursing you might not see each other at your lowest point. Or, at your highest point, but you definitely see that when you’re on a team. You develop really strong friendships.

Results

Data for this section was obtained via the generous support and invaluable time offered by eleven nurses who are graduates of four-year Bachelor of Science in Nursing (BSN) programs. To be eligible, participants were required to have completed four years’ athletic eligibility during their BSN program, have passed their state nursing licensure exam, and be employed as a Registered Nurse (RN). Each participant met all requirements for participation.
Theme Development

Analyzing data from journal submissions, semi-structured individual interviews, and follow-up focus groups yielded five major themes. Four key themes emerged regarding the ability to balance academics and athletics for graduated nursing student athletes: time management, perception of support, communication, and personal commitment. A fifth theme which emerged was the benefit to the individual post-graduation of playing sports during nursing school.

By carefully looking at common words, phrases, and themes expressed by eleven participants in three data collection sets, the core meanings of the participants’ experiences emerged. A transcendental phenomenological approach, in which the researcher suspended all preconceived judgments of the experience, was used to categorize responses and look for emerging themes (Moustakas, 1994). Data were evaluated by individual participant using all data sources, and then by all participants in relation to the three data sources. As the data were analyzed and categorized, common themes began to emerge which were relevant to each research question.

After all recorded interviews and follow-up questions were transcribed (see Appendix G for a sample of transcribed interview), repetitive and careful readings were conducted of questionnaire responses, interview transcripts, and follow-up questions. Initially, readings focused on individual respondents. Commonly occurring words were noted on spreadsheets. These included time, support, communication, sacrifice, commitment, succeed or success, stress, and fatigue. A sample of the frequently-occurring words spreadsheet can be seen in Table 1. Frequently occurring words were initially coded and then combined into categories based on similar concepts. For example, “support from coaches,” or “support from professors” were
grouped together under the common category of “positive support.” Other common categories included time management, time commitments, prioritization, negative support, and communication between departments. A second spreadsheet, based on the frequently occurring words spreadsheet, was then compiled consisting of commonly occurring phrases. A sample of this spreadsheet is found in Table 2.

Table 1

*Word Frequency in All Data Sets (Questionnaires, Interviews, Focus Group/Follow-up) (sample)*

<table>
<thead>
<tr>
<th>Word</th>
<th>Frequency</th>
</tr>
</thead>
<tbody>
<tr>
<td>Time</td>
<td>310</td>
</tr>
<tr>
<td>Time Management</td>
<td>43</td>
</tr>
<tr>
<td>Priority/ties/tize</td>
<td>46</td>
</tr>
<tr>
<td>Team/-mate/-work</td>
<td>191</td>
</tr>
<tr>
<td>Professors</td>
<td>46</td>
</tr>
<tr>
<td>Teachers</td>
<td>21</td>
</tr>
<tr>
<td>Faculty</td>
<td>7</td>
</tr>
<tr>
<td>Coach/-es</td>
<td>72</td>
</tr>
<tr>
<td>Practice/-s/-ing</td>
<td>110</td>
</tr>
<tr>
<td>Clinical/-s</td>
<td>106</td>
</tr>
</tbody>
</table>

The commonly occurring words and phrases were found across all data sets: questionnaires, interviews, and follow-up questions. The themes that emerged from consideration of these words, word comparisons, and common categories, were consistent with only minor variation of word choice (i.e., Stephanie stated, “They [nursing faculty] really want you to succeed in college,” Ellen said, “My coaches did what they thought was best for us, but
there was support from the college also.” These phrases were combined under the theme “perception of support.”

Table 2

<table>
<thead>
<tr>
<th>Phrase</th>
<th>Frequency</th>
<th>Participants Using Phrase</th>
<th>Q-SSI-F*</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Positive Support</strong></td>
<td>78</td>
<td>10</td>
<td>6-71-1</td>
</tr>
<tr>
<td>Includes: Policies</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Coaches</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Instructors</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Advisors</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Study (Tables)</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td><strong>Time Commitment</strong></td>
<td>73</td>
<td>11</td>
<td>2-65-6</td>
</tr>
<tr>
<td>Includes: Extra activities</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Less sleep*</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Less study time*</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Unfair time*</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Time consuming</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>No time off</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>No free time</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>(*compared to non-athlete students)</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td><strong>Time Management</strong></td>
<td>43</td>
<td>11</td>
<td>6-31-6</td>
</tr>
<tr>
<td><strong>Benefit post-graduation</strong></td>
<td>111</td>
<td>10</td>
<td>6-102-3</td>
</tr>
<tr>
<td>Includes: Leadership</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Failing, recovering</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Efficiency</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Teachable/coachable</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Well-rounded</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Self-Discipline</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Responsibility</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Hard work</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Personal growth</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Advocate for patients</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Advocate for self</td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

* Frequency of phrase use in Q-Questionnaire, SSI-Semi-Structured Interview, F-Follow-up
Table 3 shows the frequency of various themes in different data sets.

Table 3

*Frequency of Themes in Data Sets*

<table>
<thead>
<tr>
<th>Theme</th>
<th>Questionnaire</th>
<th>Semi-Structured Interview</th>
<th>Focus Group/ Follow-Up Questions</th>
</tr>
</thead>
<tbody>
<tr>
<td>Time Management</td>
<td>8</td>
<td>96</td>
<td>12</td>
</tr>
<tr>
<td>Communication</td>
<td>1</td>
<td>35</td>
<td>7</td>
</tr>
<tr>
<td>Perception of Support</td>
<td>20</td>
<td>123</td>
<td>10</td>
</tr>
<tr>
<td>Benefit of Sports Participation</td>
<td>8</td>
<td>120</td>
<td>10</td>
</tr>
<tr>
<td>Personal Commitment</td>
<td>2</td>
<td>31</td>
<td>4</td>
</tr>
</tbody>
</table>

**Theme # 1: Time management.** The necessity of good time management was mentioned by all participants. Practice, travel, and competitions took many hours; academic rigor in nursing education, combined with two full days of clinicals each week, consumed most of the respondents’ time. The ability to maximize available free time for study was key for all individuals in this study.

Nine of the eleven participants described days in excess of 15 hours’ duration during their peak athletic seasons. One participant, Ellen, indicated days that averaged 12 hours of commitment. During the interview she related, “If I had a test I was worried about, then I might study, but most nights I was done by 7:00 PM.” All other participants indicated that their days started before 7:00 AM and lasted until at least 10:00 PM. Norm completed only the questionnaire and did not address specific time commitments; he did indicate that time
management skills were critical to being successful in both endeavors.

Clarice, Dana, Norm, Amos, Stephanie, Shari, Claire, Lara, and Michelle, all indicated that their non-athlete, nursing student classmates had much more time available to study. They also seemed to lack empathy for the nursing student athletes’ struggle to balance time commitments. Clarice said she occasionally heard non-athlete nursing students describe their study habits and recognized that she did not have the same amount of study time as they did. She said, “You would definitely hear them [non-athlete nursing students] talk about the time they spent studying and that amount of time being a lot more than you.” She further explained that she sometimes felt jealous that non-athletes appeared to have more study time. Amos concurred that non-athlete nursing students had more time to study alone or in groups, but wasn’t sure it was completely advantageous. He said, “There were groups of non-athletes who were always getting together outside of class and spent a lot of time studying . . . I think I would have been burnt out if I were to have spent even more time than I did studying.”

Mattie also found this to be true, saying:

I agree with Amos in that the major difference between us student athletes and our non-athlete peers was our time management . . . We did not have as much free time so being able to maximize the time we got was extremely important to our success. There were times we had to study on the busses on the way back from road trips in the middle of the night for a test early the next morning.

Dana added:

I agree with Clarice. My perception was that others had a lot more time to study, by far. I remember my busiest year was my junior year. I would wake up and go to class, tutor in between classes, then I would go to 3:45 practice, then I would go to pre-lab in [city;
approximately a 45-minute drive]. I could never car pool with anyone because no one wanted to wait until 6:30 to leave for pre-lab.

The Amstel focus group discussed the same idea regarding non-athletes having more study time than the athletes. “My roommates seemed to have much more time on their hands. I would come home from practice, and my two nursing major roommates would be done with their homework and settling down for the night to watch the Bachelor. I would sometimes envy them,” said Lara. Michelle added, “I didn’t have many friends that weren’t on the track team, but the few I did have seemed to have all the time in the world. . . I’ll admit, I was a bit jealous, but every time I got on the track that jealously disappeared.”

Stephanie, the only D-I participant, stated, “Probably the biggest negative would be how difficult it was at times to do both [nursing school and athletics] . . . I never really got that kind of time where I was like, ‘now I can devote four or five hours to studying this content.’ It was just, rush-rush, learn it for the test, move on.”

With such long commitments each day, time management became paramount. All participants mentioned developing time management skills. Stephanie, who declared nursing as her major in her sophomore year, said that the transition to nursing school demanded that she learn these skills after developing some less-than-efficient habits during her first year of school. Already competing as a D-I athlete for a year, Stephanie had to “ramp up her game” after changing her major to nursing. During her final year of nursing school, her athletic commitments were reduced, as she was serving as an assistant to the team. She immediately noticed a major decrease in time commitments and said she had a much easier time of maintaining and completing all her responsibilities for school. She explains:

There are a lot of factors to consider, but if we were just gonna look at that [how sports
participation impacted performance in school], my GPA did get much higher that year I was not actively fencing. . . I did have to learn how to time manage and it worked most of the time. But there were times where, you know, you just can’t stay up as late as everybody else [to study] because you’re waking up at 4:30 in the morning, or you can’t wake up early to study or do homework before class because you’re waking up at 4:30 AM and you’re going straight to class after practice. Because I have that comparison, I can say that my grades improved significantly when I was not fencing. But I also can’t say that’s all because I stopped fencing.

During the MU focus group, Amos stated:

My experience as a student athlete required me to be a lot more efficient in my time management and studying skills than some of my non-athlete peers. To me, the challenge of balancing athletics, job, social, and nursing school was the most rewarding and beneficial part of being in college. I’m not under the impression that I worked harder or smarter than anyone else, but it definitely challenged me to become much more efficient and strategic with my time than I had ever been before.

Clarice tagged on to this, “I agree with Amos, doing sports and nursing required a lot more time management and, really, efficiency. We didn’t have time to do long periods of studying. We had to learn the same amount of information in a much shorter time frame.”

An interesting counterpoint, described by four participants, was the admission that their respective sports may have been easier to balance with nursing school than certain other sports. For three subjects, participation in a sport that was based on individual performance (track, tennis, fencing, etc.) allowed conditioning and training exercises at times convenient to the student athlete, assuming the coach would allow individual exercise. This enabled them to
maintain readiness to compete, while working around class and clinical commitments.

Only one participant involved in a more team-focused sport, Norm, responded this way. He indicated that being involved in a competitive sport which ended midway through the Fall semester allowed time to catch up in classes more easily than sports which started in one semester and ended in the next, or which ran late into the Spring semester. “I’m not sure how well I would have handled a sport that was still going on when I was trying to study for finals,” he writes.

**Theme # 2: Perception of support.** A key in balancing nursing education and athletic competition was a sense of support. Participants overwhelmingly reported that a supportive environment was a critical factor in being able to balance sport and school. This support came from faculty, coaches, the institution, and teammates. For some participants, this was as simple as the team providing a study table for athletes; this was not specific to nursing, but it was a helpful tool and enhanced the feeling that school was as important as the sport.

Institutional guidelines also helped provide a feeling of support. Amos said, “There were policies in place that were pretty cut and dry . . . practice or non-competitive event, then the school or the classroom would take priority . . . but if there was ever a competition then the class would be secondary to the sport as long as grades were adequate.”

Nursing instructors often provided support by allowing additional time, or extending deadlines, for specific assignments. Norm, who graduated from MU, noted that his instructors “…were great in working with me and giving me an appropriate amount of time to complete work.” Lara described the small student to faculty ratio at AU as helping the nursing professors provide a more understanding approach to the athletes’ multiple time commitments. And Stephanie described her instructors at CU as very supportive of her desire to participate in
athletics:

The nursing faculty and instructors were very approachable. . . If I needed to meet with them outside of class if I had questions, they always did, and they were very quick with responding to e-mails, phone calls, just really went above and beyond. They always were there for just kind of support and advice and being able to connect me with the right people when I had questions or I needed help or something. Faculty, I’m very grateful and they know I’m very grateful.

Coaches were often more supportive, according to three individuals, if they had multiple nursing students on their teams. When coaches only had to address the needs of an individual nursing student, there was less impetus to provide accommodations. “But,” said Mattie, “with so many nursing students on the roster the coach had to be more flexible. Otherwise, we couldn’t have fielded a strong team.”

Eight of eleven participants indicated that support from teammates helped them continue their academic and athletic careers. Clarice noted that having multiple teammates who were also nursing students made balancing easier. “The coaches and instructors were more understanding because there were so many of us in the same situation,” she said.

Teammates provide support in the form of friendships. Dana, Clarice, Norm, Stephanie, Jane, Ellen, and Lara describe meeting and maintaining strong friendships among their teammates. “These are some of my best friends, and I keep in contact with them still,” according to Jane. Stephanie also indicated that sharing ups and downs with teammates helped her cope in difficult situations. “Competing, with some of my best friends, and being able to share in victories together as well as be there for each other when there were losses, you get stronger.”

Participants either reported that their non-athlete nursing classmates were not supportive,
or that they did not understand the time commitments of student athletes. “Sometimes we would have group projects. If I had to miss a group meeting or a planned study session for an athletic commitment, my classmates would often be upset with me,” said Dana.

Conversely, lack of support hindered participants. When respondents discussed difficulty balancing sports and nursing school, a perceived lack of support was frequently cited as a major obstacle. Ten participants noted that coaches, instructors, or their institution either failed to support their goal of participating in athletics and nursing school or imposed barriers on doing so.

Clinical requirements, more so than class requirements, provided the greatest obstacle to practices and competitions; this was noted by five of the participants, but was addressed only in the interview and follow-up phases. Half of the participants—five—also indicated that coaches did not fully appreciate the time and work involved in completing nursing school, although most coaches were reported to publicly state that all participants were “students first.” Three participants indicated that nursing instructors hindered their participation in sports.

For all but one participant, this lack of support, whether it came from teachers, classmates, or coaches, made them consider quitting their sport. Three participants indicated that they considered quitting their sport, due to advice from the nursing school, due to injury, or due to a change in coaches and coaching philosophy. Only Jane considered changing her major and actually did so for one semester. “I did try elementary education for a whole semester, which doesn’t seem long, but I tried something else I thought I carried a passion for. But, I realized I didn’t.” She transferred to another school, continued her athletic endeavors, and resumed her nursing education.

All participants described some instances in which faculty, coaches, or advisors failed to
provide needed support. Amos, Clarice, Dana, and Michelle, indicated that the coaches were not supportive of their class and clinical time constraints. However, Amos, Clarice, and Michelle indicated that this issue rose after having a new coach appointed for their respective teams. Amos described it this way:

There was a time during my junior year, when we got a new coach. When things initially started, he wasn’t very flexible and didn’t want to listen, or didn’t understand that I couldn’t get out of class for various tennis activities. For a little while, I don’t know, it seemed I might have to give up tennis or not be involved as much. And it would have meant not playing, or it wouldn’t have been worth my time. It wouldn’t have ever been an issue if there hadn’t been that transition from coaches. Since he had never had an athlete who had been in nursing school before, I just had to kind of deal with, that I guess.

Clarice added, “I think the new coaches were less understanding of nursing, but with the large number of nursing school students on the soccer team, you had to make it work or else you weren’t gonna have, you know, half your team there. They had to figure out how to make it work.”

Amos, Clarice, Michelle, Lara, Ellen, and Stephanie, all indicated that they experienced lack of support from one or more instructors. Michelle stated, “Some of my teachers were not always supportive or flexible with meets, and I felt torn between the two commitments.” Stephanie indicated that Carlsberg University is now discouraging nursing students from participating in sports. While not prohibited, coaches and nursing instructors alike are urging greater introspection prior to allowing nursing students to play sports. “The coaches want the athlete to commit to making the team the best; the instructors want the students to be successful.
Both want the student to get the most out of their college careers, and that usually means focusing exclusively on academics.”

Clarice, Michelle, Jane, Stephanie, and Mattie also described situations in which coaches and faculty were at odds on how to schedule the student athletes, and the participants felt “caught in the middle.” Dana describes her situation:

The nursing professors were very difficult to work with as far as missing class and missing clinicals and making things up. My coach had to meet with them pretty frequently and make them understand the importance of this particular meet or this particular place that we were going. And the professors, I mean, they always did come around but it would take them some time. I always felt a lot of pressure from them as well as my coach because I felt kind of like I was being pulled in two different directions at the same time.

Clarice felt a similar “pull”, and described it this way:

Feeling the frustration from our coaches for having to miss stuff like when we did have clinicals that would maybe run late, and we would get to practice late, sometimes you didn’t know you would be penalized so much. They’d think like, “Oh, they were late to practice three times this week versus this player, who was here on time,” so they would take that into account to factor for play time. And then just having them expressing frustration to us, and the instructors expressing frustration to us from their end for us missing things. So you’re kind of caught in the middle, and saying, “I’m sorry, I have school,” or, “I’m sorry, I have soccer.” You know, it’s kind of a delicate balance of prioritizing what’s more important. And then being able to figure out a way around it.

Jane felt a lack of support from her advisors prior to transferring from a D-1 program to a
D-2 program. When she felt like she was struggling to meet requirements of both the athletic and nursing departments, she described feeling as if her advisor was not willing to see her side of the issue. “She would lay it out for me and say, ‘Here’s how it’s gonna go.’ There wasn’t really a lot of how it can work, or giving me feedback, or letting me give my opinion. It was just kind of like, ‘This is how nursing works, and how the athletic program works, and we can’t go around it.’” When she decided to try a different major, she describes her advisor’s attitude as unsupportive. “She basically said, ‘OK, it’s done, changed.’ There was no real conversation, like, ‘Well, what’s going on?’ I felt like she just shuffled me through.”

A specific area noted by participants in which faculty seemed less than supportive was inflexibility with clinical rotations. This course-related work in hospital settings was seen as a far bigger obstacle to sports participation than classes or grade requirements. However, most participants readily conceded that this was an unfortunate but necessary situation. For example, Mattie stated, “I think the biggest challenges when it came to balancing the two (athletics and academics) were clinicals, which I don’t disagree with by any means because you know how hard they are to coordinate.”

Dana also described difficulties with clinicals interfering with athletics, but explained her understanding of the situation:

We only had a set number of days that we could do clinicals and with their being only two big hospitals in (location) that you can do them at, with several different nursing schools trying to get time in those hospitals, it’s hard to make up clinicals if you miss them. So the nursing professors in particular were very adamant about not missing clinicals because it is so difficult to make them up.
Ellen’s story conveys the perceived lack of support by instructors in regards to clinical rotations:

I had one professor that required me to stay and take a day’s worth of clinical instead of going to the indoor national track meet in Alabama. So, my clinical was on a Thursday and we were supposed compete on a Friday. She required me to stay at clinical until 3 PM on that Thursday, which I did, but then I had to get myself to the airport and get myself from there to Dallas. And then there was a delayed layover in Dallas, which finally got me to Birmingham, Alabama. I think it was about three in the morning when I got into Alabama and I didn’t get the greatest sleep, obviously, from 3 AM to 9 AM, when the rest of the team got up and went to the track. And then you have to kind of get up and get moving; I think we competed at around 2 in the afternoon. I wasn’t necessarily ready to do my best because of the situation I had to go through. Before this situation, I had to sit down with that teacher, with the academic advisor I had, and with the nursing department chair, and they all, I guess, agreed that I had to do these clinical hours. The funny part is, the Tuesday group for clinicals had a snow day on that Tuesday. They all had to make up the clinical the following week, so I kind of argued, “Why the heck am I not able to make up the clinical the following week if we have something built in for weather?” And I was never actually answered for that question and it still kind of bothers me to this day because no one could actually tell me why I wasn’t allowed to go with the rest of my teammates and make up those clinical hours later. So, I would say that one professor and the nursing department as a whole weren’t allowing me to, you know, go to that track meet.

**Theme # 3: Communication.** Communication between departments, especially between
the athletic and nursing departments, was vital to participant success in balancing athletics with nursing school. Michelle, Lara, Claire, Jane, Stephanie, Mattie, Norm, and Amos all mentioned examples of positive communication. Amos, in his advice to other students considering nursing school while participating in athletics, stated:

The more communication you can do between your coach and your nursing professors, I would advocate that. That was where a majority of the problems were, because the more in advance that people know things, they don’t think that you’re trying to spring things on them to get out of various things. Then you don’t end up getting behind in either the sports world or in the academic world of nursing.

Stephanie was adamant that anyone considering attending nursing school and competing in intercollegiate athletics has to communicate with their coaches and instructors ahead of time to ensure the best possible outcomes and to avoid conflicts. She describes her approach:

I’m a very big advocate for myself. . .If I ever foresaw an issue between or a time conflict between fencing and nursing, I addressed it as soon as possible, or before it was even approaching because I wanted to make it work. Because I handled situations, especially time conflicts, sooner than later that worked to my advantage. But I will say that that added kind of stress: for example, “Ok what’s my clinical schedule gonna look like a year from now?” People in my class are not even thinking about a year from now but I have to because I know that this week I’m probably gonna be gone for spring break training, I know this week I’m going to be here for competition, so I had to think way far in advance to make it work and nobody was gonna do that for me. . . Nobody from nursing was gonna ask me, “When do you have your competitions?” Or, none of my coaches were gonna say, “When are your big nursing tests?” So, I had to kind of be that advocate and
say, “These are the clinical times that I really need, and these are the locations, or this is the order I really need them to go in.” At times it was difficult to get it perfect, and for the most part it was very manageable.

Other participants emphasized the need for good communication between departments but indicated that coaches, instructors, or advisors were often very helpful with this. Lara pointed out that the advisors at AU helped coordinate meetings to work out scheduling difficulties. In addition to helping coaches and instructors understand conflicting time commitments, the advisors were also instrumental in identifying and referring students who needed assistance, such as tutoring in specific subjects.

Six respondents indicated that coaches were more often mindful of communicating schedules than were nursing instructors. Informing other departments about athletic commitments, such as practice times, travel, and competitions, were coaching practices mentioned by participants. “We had to let our coaches know when we had clinicals or exams,” Dana says. “The coaches were excellent at sharing schedules so the instructors knew ahead of time what was coming.”

**Theme # 4: Personal commitment.** As important as outside influences were, seven participants credited their personal will to succeed for preventing them from dropping their sport or quitting nursing school. For most, this was an intrinsic desire to do what they set out to do regardless of the obstacles. For one participant, it was a desire to show her naysayers that it could be done. Almost all participants indicated that nursing school success was their top priority; sports were their outlet. They sometimes wished their schedules were not so overwhelming, but only one truly considered either leaving nursing school or dropping out of their sport. Personal drive to complete nursing school and continue playing a game they loved
were identified repeatedly.

Amos reports that his “priority was always on nursing school so I never considered withdrawing from that in order to play tennis.” He was receiving an academic scholarship, rather than an athletic scholarship, so he had no financial incentive to continue playing his sport. However, he did not want to give up the activity he enjoyed, so “I made some major adjustments in my studying efficiency and late night social activities.”

“I really wanted to be one of the first people to actually do it . . . and show the girls that this is possible,” said Stephanie. She continued,

I think that when they (nursing instructors) discourage you, it’s hard as a freshman to understand really why …It was very difficult, and I think the most positive thing was that I set my goal that I wanted to complete nursing and I wanted to be a captain by my senior year. And I achieved both of those . . . I think looking back now, that was great. It was a great accomplishment and I’m very proud of that.

As previously mentioned, Stephanie noted that she wanted to be “the first” from her school to complete nursing school while competing in four years of fencing. Amos noted that he considered quitting tennis but continued because he loved the sport and the challenge of balancing multiple sports. Claire and Michelle both noted that they wanted to be the best at everything they did in both sports and school.

**Theme # 5: Benefit post-graduation.** Participants were unanimous that having been a student athlete during nursing school is a value to them in their nursing careers. The major theme, “benefit to post-graduate experience,” was reflected in words and patterns over 100 times during the three data collection phases. Three participants mentioned these benefits six times, two mentioned them 15 times, and two more mentioned them 17 times. All other respondents
brought up these issues nine to ten times.

Several concepts emerged for this question: time management, leadership, teamwork, and communication. These ideas mirror those expressed by Pate (2015) in describing the lessons learned by participation in collegiate sports.

Clarice noted that leadership was a major factor in being selected first out of 350 candidates for her post graduate job. “Leading a team for my final two years, being there to talk with teammates about issues; those experiences really help when trying to work with teammates in the hospital.”

Stephanie also talked about her leadership skills during her interview. “I not only worked with my teammates to ensure they got help when it appeared they were unduly stressed but also with competitors from other teams we would meet during tournaments.”

All participants mentioned the positive impact that intercollegiate athletic participation created in responses from potential employers. These respondents indicated that interviewers appeared to value the work and dedication involved in graduating from nursing school while playing a sport. While the participants stopped short of indicating that the inclusion of active athletic endeavors during nursing school resulted in earning them a particular job, all related that their respective interviewers voiced being impressed that this could be accomplished.

**Research Questions**

The research questions employed in this study were designed to help understand the lived experiences of nursing students attempting to balance the academically rigorous demands of a four-year BSN program while competing in intercollegiate sports. Standardized lines of inquiry were established for the journal and semi-structured interview phases of data collection to ensure that all participants responded to the same leads posed in the same fashion. Follow-up questions
in the focus group phase were developed based on data analysis of the first two phases. All queries helped the researcher gather information to answer the research questions.

**Central research question (CQ).** The central research question for this study was, “How do graduated nursing student athletes describe their experiences in balancing sports and academics while completing a traditional, four-year nursing program and participating in intercollegiate sports?” Time management was the first answer to emerge regarding the CQ. While no specific questions about time commitments or time management were included in any phase of data collection, all respondents indicated a need to effectively manage their available hours. All participants used the term “time management” in describing the balancing act between sports and school. During the focus group with MU graduates, Mattie agreed with her group, saying, “Being a student athlete, time management and being able to prioritize are some of the most important skills you can possess.”

Participants almost universally described extremely long days, often in excess of 15 hours’ dedicated time to classes, clinicals, practices, and team meetings. Only two respondents did not specifically describe such long commitments. Ellen said that school did not absorb as much of her time as reported by other graduated nursing student athletes, and she even indicated that she only occasionally felt pressure to dedicate more time to study. Norm did not specifically mention lengthy time commitments, but he did talk about the necessity of developing good time management skills.

During her interview, Jane talked about her day beginning at 4:00 a.m., spending 2-3 hours in the gym for conditioning, attending classes from 8:30 a.m. to 2:00 p.m., practicing for two and a half hours, eating dinner at the team table at 6:00 p.m., showering, and studying in the
library at 7:00 p.m. She says, “I’d try to leave by eleven so I could be in bed by midnight.” Jane described her perception of these extensive time commitments:

A typical day was just, it always felt long! And multiple classes, back-to-back, and you saw the same people all day long. That was great after we got to know everybody, and I still had my good group of friends, but it was a lot of the same people, the same professors, all day long.

In addition to time management, perception of support, excellent communication, and personal commitment to remaining on a sports team while completing their nursing courses, were identified as key elements of the experience of balancing athletics and academics. The individual’s perception of support, positive or negative, either facilitated or hindered the ability to pursue both nursing school and sports. The better the lines of communication between coaches and faculty, the more positive were respondents’ perceptions of this lived experience. Finally, the participants’ commitment to completing both four years’ athletic eligibility and their four year BSN program, the more likely they were to not question continuation in both endeavors. These topics will be discussed in greater detail in answering RQs # 2 and # 3.

**Research question (RQ) # 2.** The converse view of several themes provided the answer to RQ # 2, “What challenges do participants report facing while concurrently completing nursing school and playing intercollegiate sports?” For example, all respondents addressed the theme of time management because they had such dramatic time commitments. Also, while most participants reflected the theme “perception of support” with a positive perspective, that perception could reflect negative support, which presented an obstacle to successfully balancing sports and school.
Michelle was typical of individuals in this study. She described 14 to 15 hour days throughout her active track seasons, which began in late fall and continued for the duration of the spring semester. After starting the day between 7:00 and 7:30 a.m.,

I would usually have class from 8-10, then chapel hour from 10-1050. . . and then I would have class again from about 11-2, and then practice was every day from about 3 to about 6, and then dinner at 7, and homework from 7:30 to 10-11, however long I had that day, and then go to bed and start it all over again.

With the exception of Anne, who admitted that she “didn’t study a lot,” and Norm, who did not provide a specific daily schedule, all participants indicated long days with little free time. The minimum was 12 hours each day; the maximum, reported by Ellen, was often 18 hours per day. These time commitments were, therefore, a major challenge to individuals trying to balance athletic and academic schedules.

Jane described one instance of “negative support” in which an instructor required her to make up clinical times when she was scheduled to attend a national competition. Her objection was that other students were afforded opportunities to make up clinicals due to weather issues. Ellen indicated that her faculty and advisors failed to provide her proper guidance, resulting in her temporarily dropping out of nursing school.

All participants provided some instance during which they perceived lack of support from teachers, coaches, or the universities during their college careers. Claire described a change in perceived support between recruiting and matriculation. “When they’re recruiting you and they’re schmoozing you they can they have a tendency to have a different personality than when you’re on the training field, and they’re standing there yelling at you to be better or whatever.”

Research question (RQ) # 3. Time management also helped answer RQ # 3, “To what
specific factors do participants attribute their ability to be successful in balancing sports and academics?” Despite the long days described by nine of the eleven respondents, “time management” skills enabled them to fit their work into a finite time frame. All of the individuals in this study reported that they had to develop time management skills to successfully balance sports and school.

Perception of support also helped answer RQ # 3. Having supportive teammates, faculty, and coaches, helped ease the burden of long days and academic rigor. Lara, Stephanie, Mattie, Ellen, and Claire, all discussed the lifelong friendships they developed with teammates. Stephanie, Michelle, Clarice, and Amos, noted that faculty often reached out to assist them when they missed class material due to competitions. Amos, Clarice, Mattie, Stephanie, and Dana, indicated that coaches often arranged individual conditioning sessions to help work around clinical commitments. Amos noted that the university offered specific guidance to support coaches and faculty in making decisions about attendance at practice and classes, respectively.

Two respondents, Ellen and Dana, commented that less formal support contributed to their desire to continue the balancing act. Dana said, “I remember passing professors on campus or other coaches and them just knowing my name and who I was (because of her athletic participation). It was a good feeling.” Ellen added that she “enjoyed the well-wishes and ‘good lucks’ I received from my instructors and classmates.”

Communication between departments was a vital contributor to balancing academics and athletics. Many respondents, such as Amos, Clarice, Jane, Lara, Jane, and Ellen, indicated that either their coaches would reach out to faculty, or vice versa, to ensure that class and competition schedules were available early. Amos and Stephanie indicated that they often were the source of clear communication; they recommend advocating for oneself. As Stephanie stated, “Sometimes
it was difficult to get my schedules to work with each other as best they could . . . but nobody was gonna do that for me.”

Personal commitment as a “specific factor” in this successful balancing act was noted by a number of participants. Two respondents, in particular, stand out as wanting to prove that it could be done. Stephanie says, “People would ask me . . . ‘How can you do this, how are you doing it, how do you do it?’ . . . And I was the only nursing student to successfully do both.” Dana added being in student government and multiple clubs besides sports in high school made her want to excel in multiple areas in college. She states, “Being an athlete made me very competitive in nursing school. I wanted to be at the top of my class, and I did achieve that goal.”

Several respondents also indicated that a factor that contributed to their success was the timing of their sport. Claire states, “Soccer is fortunate, that it’s in the beginning of the school year. I think that the sport that would be incredibly tough to be in that has so many games and the heavy travel schedule would be basketball.”

**Research question (RQ) # 4.** This question asked, “How do participants perceive their experiences balancing sports and academics as influencing their post-graduate experiences?” All respondents indicated a positive benefit to their professional experiences since graduating. These views were shared by nursing leaders during advisory board meetings for MU.

Mattie’s written comments may best describe the impact of being a nursing student athlete on her nursing career and life:

While trying to succeed in both the classroom and the soccer field was difficult at times, it was the best thing I have ever done for myself. Being a student athlete taught me things that I may not have learned otherwise. I learned time management in the most extreme way, and I learned the importance of prioritization. I learned these things as I sat
on a loud, crowded bus with a book open on my lap because it was the only time I had between then and the test I had at 8 am the next morning. The most important things I think I learned, however, were not necessarily those topics taught in the classroom. Being an athlete my entire life had taught me a different set of skills, ones that could only be learned in real life, not from a textbook. I learned the importance of self-discipline and accountability. I learned how to be a teammate and how to work with others, even those I may not see eye-to-eye with. I learned the importance of failing, and the even greater importance of picking yourself up after life hands you a loss. I learned the depths to which my personal strength and ability for self-improvement reach within myself. I learned so much about life and the recipe for success; all the while I thought I was just playing a simple game.

Summary

In this chapter, the data were presented from reviews of questionnaires, personal interviews and follow-up focus groups completed by eleven participants from three distinct universities. Descriptions of participants, with brief backgrounds and sample responses regarding the phenomenon of balancing sports and nursing school, were provided to establish a context for each individual story. As frequently occurring words and phrases were coded and categorized, several themes emerged. Time management, support, communication, and personal commitment were identified as the major themes which facilitated balancing academics and athletics during the participants nursing education. Finally, participants all indicated that participating in sports during their nursing school careers has yielded positive benefits during interviews, in their professional careers, and in their personal lives. Chapter Five will present a discussion of conclusions reached in this study, and recommendations for further research.
CHAPTER FIVE: DISCUSSION, CONCLUSIONS, AND RECOMMENDATIONS

Overview

The purpose of this study was to describe the lived experiences of graduated nursing student athletes in successfully balancing sports and academics while completing a traditional, four-year nursing education and concurrently participating in intercollegiate sports at colleges from three different competitive division levels. A transcendental phenomenological approach was used to complete this qualitative study of eleven graduates of three Midwest BSN programs. Data was gathered using written questionnaires, followed by personal, semi-structured interviews, and concluding with focus groups conducted in a virtual (e-mail) forum.

Four of the participants competed in athletics for four years at the NAIA level, representing athletes in track, tennis, and soccer (two). Five participants competed in sports at the D-2 level, representing soccer, track (two) and volleyball (two). One participant was a D-1 athlete who competed in fencing. Three theoretical frameworks were used in the development of the theoretical model for this research: Lazarus and Folkman’s (1987) Transactional Model of Stress Response; Tinto’s (1987) theories regarding student departure from institutions of higher education; and Astin’s (1999) theories regarding college student involvement and retention.

The following research questions were used to guide this study:

Central Research Question (CQ): How do graduated nursing student athletes describe their experiences in balancing sports and academics while completing a traditional, four-year nursing program and participating in intercollegiate sports?“

RQ #2: “What challenges do participants report facing while concurrently completing nursing school and playing intercollegiate sports?”

RQ #3: “To what specific factors do participants attribute their ability to be successful in
balancing sports and academics?”

RQ #4: “How do participants perceive their experiences balancing sports and academics as influencing their post-graduate experiences?”

Using these research questions and the framework described, above, Chapter Five presents a summary of the findings and related discussion of those findings. Findings were based on the themes that emerged during examination of the data. Chapter Five also includes implications for practice, limitations of this study, and recommendations for future studies to build on this research.

**Summary of Findings**

The purpose of this study was to explore the lived experiences of graduated nursing student athletes in balancing academics and athletics. Eleven participants from three universities in three different competitive categories responded to this study via journals, semi-structured interviews, and follow-up focus groups. After data analysis of these three data sets, answers to the research questions emerged.

Central Research Question (RQ) #1: How do graduated nursing student athletes describe their experiences in balancing sports and academics while completing a traditional, four-year nursing program and participating in intercollegiate sports?

All participants reported time commitments in excess of their non-athlete nursing classmates. All participants reported the importance of learning time management techniques quickly. All participants indicated that communication between the athletic and nursing departments was critical to their success. Finally, all participants mentioned receiving support and encouragement from coaches, faculty, teammates, and/or nursing classmates.

RQ #2: “What challenges do participants report facing while concurrently completing
nursing school and playing intercollegiate sports?”

All participants reported having far less time to study than their non-athlete nursing peers. Most indicated that they experienced lack of support from coaches or instructors. Clinical rotation time conflicts were the one area participants agreed were the most difficult obstacles to overcome.

RQ #3: “To what specific factors do participants attribute their ability to be successful in balancing sports and academics?”

Communication between nursing and athletic departments was key to all participants. Six participants also indicated that personal communication skills helped overcome occasional situational obstacles in nursing school. Eight participants credited their personal work ethic or motivation as the key to success.

RQ #4: “How do participants perceive their experiences balancing sports and academics as influencing their post-graduate experiences?”

All participants believe that their participation in sports during nursing school has had multiple positive benefits to their professional experience. This topic netted the largest number of comments, 42 percent more than any other topic.

Discussion

The goal of this research was to explore and analyze the lived experiences of graduated nursing student athletes while attempting to balance nursing school and full-time athletic participation. Participants in this study were afforded opportunities to write about and discuss the phenomenon of balancing the academic rigor of a four-year nursing program while concurrently participating in four years of intercollegiate athletics. Eleven individuals shared information about their simultaneous involvement in these activities.
Relationship to Empirical Literature Review

There has been little research on nursing student athletes, so the empirical literature review attempted to approximate what might be expected from this population. Multiple sources were reviewed regarding nursing school stress, collegiate athletes, and social involvement. Reviews of literature regarding collegiate athletes led to identification of social involvement. These topics were included because they seemed most closely associated with what might be expected of the lived experiences of nursing student athletes. The nursing shortage was a more distantly related topic, which was also included in the literature.

Nursing school stress has been highly researched and well documented for three decades (Biggers et al., 1988, Cooper et al., 2009, Goldberg et al., 2013). Stress was mentioned 40 times in the three data sets, but stress specific to nursing school was only specifically cited seven times. Stress related to the combination of school and sports and the stress of competition were mentioned six and nine times, respectively. This study supports that graduates of nursing programs experience stress during their BSN programs.

Several participants also noted that stress arose from additional activities they selected, like Claire who served as a Resident Advisor during her junior year. “I lived in the dorm, and I had 31 freshman residents, and it was soccer season, and I was just starting clinicals . . . that was an incredibly stressful time in my life,” she says. Respondents do not deny that they experienced stress, but they do not single out nursing school as the primary or singular source.

Participants describe stress related to athletic performance, in addition to the stress of school or other activities. According to Gilham and Gilham (2014), collegiate athletes tend to describe stressors more positively than other students. This may provide some insight into why the respondents in this study did not implicate nursing school as an overwhelming stressor.
DeFreese and Smith (2013) found that collegiate athletes who feel supported by their team reported less burnout with greater persistence to graduation as a result. Athletes who are separated from their team for prolonged periods due to rehabilitation following injury may feel alienated and quit their sport or leave the university. This was not the case for Ellen, who suffered repeat injuries and subsequent surgeries in back-to-back seasons. She describes her experience:

My junior year I had to have hip surgery for an injury. So, between classes I was taking and the rehab that I was doing trying to get back to where I was before surgery, I was kind of feeling isolated. A lot of your work in rehab is just me, or just following the exercises that my physical therapist gave me. So, that year was really hard for me to kind of keep my nose to the grindstone. I had thought about quitting track that year, but I guess I just kind of decided to keep going with it . . . and it turned out OK. I was able to run at the end of my junior year and to do fairly well. Then, I had to have the same exact surgery on my other hip my senior year. I kind of recovered about two months faster because I knew what I was doing, so that year I didn’t have as big of an obstacle to overcome.

Civitci (2015), in a study of college students, found strong correlations between a sense of belonging and decreased stress and sense of belonging and increased life satisfaction. This might explain why these graduated nursing student athletes did not have more reports of nursing school stress. Civitci did not find, however, that participation in extracurricular activities had any significant effect on either stress level or life satisfaction. So, the few reports of stress by respondents may not be related to participation in university athletics.
While it may be difficult to address the nationwide nursing shortage by allowing more nursing students to participate in athletics, the participants in this study are certain that their concurrent athletic and academic activities make them better, more resilient nurses. Nursing leaders commented that graduated nursing student athletes bring excellent work skills, such as time management, coachability, reliability, and teamwork, to the professional setting. Pate (2015) states that participation in team sports yields development of work skills such as trust, reliance, accountability, communication, empathy, and synergy. Kapoor (2016) lists attributes for successful nurses that include communication, empathy, emotional stability, physical endurance, problem solving skills, and interpersonal skills. While not identical lists, graduated nursing student athletes would seem to possess characteristics that make them highly valuable to the profession of nursing.

**Relationship to Theoretical Literature Review**

The findings in this research support theories by Tinto (1987) and Astin (1999). Both theorists suggest that success, or failure, in completing a college education at a specific institution result from a sense of belonging and an identification with that educational community. Astin, particularly, indicates that participating in official activities elevates the sense of belonging among participants. While a number of respondents mentioned stress, the results of the study did not reveal any direct relationship to Lazarus and Folkman’s (1987) Theory of Transactional Stress Response.

**Lazarus and Folkman’s Theory of Transactional Stress Response (1987).** This theory is partially supported by this research. Transactional Stress Response refers to an individual’s ability to cope with stress is based on their assessment of a particular event followed by a prediction of the individual’s ability to positively influence the stress response through use
of available resources. Nursing school is inherently stressful (Beck et al., 1997; Gibbons, et al., 2008; Hsiao et al., 2010; Junious et al., 2010; Yucha et al., 2009), and all participants reported experiencing high levels of stress due to the demands of their educational program. They also indicated additional stress burdens related to their athletic involvement and resultant time commitments. Two participants indicated that participating in a sport helped reduce their overall stress, and according to Amos, “helped prevent burnout.” Eight participants indicated that their personal commitment, work ethic, and self-motivation helped them balance sports and school; only two specifically identified a personal belief that they would ultimately be successful.

Lazarus and Folkman’s (1987) theory may be indirectly supported by the amount of extra work to which several participants subjected themselves. In addition to the academic rigor of nursing school and the additional time commitment of being a scholarship athlete, the list of additional activities for these participants is impressive. Claire was a triple major, and Amos concurrently completed a double major and a minor; Stephanie completed a minor in psychology, in addition to her nursing major; Amos, Stephanie, and Clarice were team captains; Amos, Claire, and Dana served as resident advisors; and Amos was the student body president.

The sense of support and camaraderie described by all participants mirror Astin’s (1999) conceptualization of participation and belonging as indicators of success and continuation in an educational system. All participants talked about the support of their teammates, the lifelong friendships they developed, and the mutual goal-directedness they experienced. Further, four participants stated that they valued the way fellow-students and faculty recognized them on campus and in classes. “I loved representing my school as an athlete,” Dana stated.

suicide,” as described by Durkheim (1951). If a student doesn’t interact with the college or has interactions that hold no personal value, then that student is likely to leave the institution. Also, if the individual finds no connection to the common values of the institution, then, again, they are likely to quit school. All participants in this study indicated that belonging to a specific athletic team provided them with support and common goals. They interacted almost exclusively with their teammates outside of class and clinicals and drew their support from their teammates. The participants in this study remained at their specific institutions because of the positive interactions with teammates and their commitment to a common purpose.

Jane provides a model example. At her first college, she reports that her interactions with her teammates and with her nursing classmates were counterproductive to each other. Her teammates, coaches, and athletic department were supportive of her as an athlete, but not as a student. Her classmates, instructors, and advisors were interested in her as a nursing student, but not as an athlete. She describes feeling left to fend for herself. She initially changed majors and continued in her sport, but she wanted to be a nurse and was unhappy with this decision. Ultimately, she transferred to a college that supported both of her interests, nursing and volleyball, and was ultimately successful in both pursuits.

**Astin’s Theory of Student Involvement (1999).** This theory is supported by this study. Astin states, “Quite simply, student involvement refers to the amount of physical and psychological energy that the student devotes to the academic experience” (1999, p. 518). Astin provides various examples of “involvement,” such as studying for an exam or serving on student government. Participating in an intercollegiate sport provides a level of involvement and commitment to the institution, as evidenced by the number of committed hours reported by all
participants. Additionally, four participants specifically cited the pride they felt in representing their school as a motivating factor in completing their nursing degrees.

The sense of support and camaraderie described by all participants mirror Astin’s conceptualization of participation and belonging as indicators of success and continuation in an educational system. All participants talked about the support of their teammates, the lifelong friendships they developed, and the mutual goal-directedness they experienced. Further, four participants stated that they valued the way fellow-students and faculty recognized them on campus and in classes. “I loved representing my school as an athlete,” Clarice stated.

Both Tinto (1987) and Astin (1999) are supported by the example of Ellen. Ellen suffered an injury during her junior year, which required surgery and a relatively long rehabilitation period. Prior to her senior year she suffered the same injury on the opposite side of her body. She knew she could rehab in time for her senior year, but she considered quitting her team because she was “kind of feeling isolated because a lot of your work in rehab is just, you know just me, or just following the exercises that my physical therapist gave me.” Being separated from her team during long rehab sessions made her less committed to continuing in her sport.

**Implications**

The purpose of this section is to address the theoretical, empirical, and practical implications of this study and make recommendations to stakeholders: nursing students, nursing faculty, coaches, university administrators, and nursing human resource directors. This research was based on theories of college success and attrition described by Tinto (1987) and Astin (1999), as well as Transactional Model of Stress proposed by Lazarus and Folkman (1987).
These theories have been discussed and will be readdressed in terms of implications for stakeholders. Specific recommendations, based on the data collected, are also presented here.

**Theoretical Implications**

The theories that guided this research focused on why students leave college (Tinto, 1987), what factors influence students to remain in college (Astin, 1999), and how positive experiences dealing with stress help individuals manage future stressful situations (Lazarus & Folkman, 1987). This research has theoretical implications for the theories of Tinto and Astin. There is only minor support for Lazarus and Folkman’s theory.

The implications of this study related to Tinto (1987) and Astin (1999) are consistent and compatible with these theories. Students who feel a connection to their university, who are involved, and who feel supported are likely to remain at their university until graduation. Participants described feeling pride when recognized as members of a particular team; many described close relationships with teammates. All recognized that coaches, instructors, and teammates provided support. Regarding her teammates, Stephanie said, “You develop really strong friendships with them.”

In relation to Lazarus and Folkman (1987), this study provides limited support. Many respondents discussed experiencing stress, but few indicated that this stress precipitated thoughts of leaving school or quitting their respective sports. In relation to the transactional theory, two participants, Amos and Ellen, reflected that athletic participation mitigated stress. Amos said that workouts and competitions “are what helped prevent me from getting burnt out of nursing.”

**Empirical Implications**

The graduated nursing student athlete respondents in this study reported stress, but not to the extent expected based on research regarding nursing school stress. Some of the stress
reported was more related to athletic rather than academic performance, and multiple
respondents added stress by taking on more responsibilities and activities. It is also possible that
stress was mitigated to some extent by the participants’ sense of positive support from coaches,
teammates, teachers, and universities.

The post-graduate benefit to individuals who share this lived experience was also a clear
majority. Participants and community nurse leaders indicated that graduated nursing student
athletes bring admirable skills to their jobs. These include communication and time management
skills, coachability, and teamwork.

**Practical Implications**

Participants are quick to point out that being a nursing student athlete is not for everyone.
It can be done, but it requires commitment and stellar time management. Claire stated:

Realize that your friends and the majority of your relationships are going to be with your
teammates and other athletes. It’s kind of like the culture . . . because a majority of
people within those groups have an understanding of what the demanding schedule is
like. Recognize that the school and the sport can kind of consume a lot of your time.

Mattie elaborated, saying, “It takes time away from the rest of your life when you’re
involved in two things that are time consuming. You’re frequently telling family or friends or
different groups that you’re not able to meet.”

Clarice continued:

The first thing I would tell them is be ready to sacrifice social life because you know
have to set priorities going into it. A lot of the people who struggled playing soccer and
doing nursing put a priority on social life. I think that’s a good way to put it. But setting
priorities and being able to make sacrifices . . . and being able to know that it’s ok not to
go out on a Friday night or on a Saturday night in order to get stuff done. Also, if high school was challenging and you’re not the greatest test taker, maybe consider doing a five-year plan if you want to play intercollegiate sports. Because nursing is hard in itself and adding a collegiate sport on top of that makes it even more difficult. So, it’s not for everyone.

**Stakeholder Implications**

A number of stakeholders may benefit from themes derived from this research. These include current and aspiring nursing students, nursing faculty, athletic coaches, university administrators, and nursing human resource directors. This study provides insights to all of these groups.

**Nursing students.** Nursing students who aspire to be athletes while in nursing school should be aware that balancing school and sports is no easy task. Time management skills must be developed and brought to bear immediately. Excellent communication is paramount for success: students should be proactive in working with faculty and coaches to provide class and competition schedules. Mattie stated,

> Early communication and clear communication, between coaches and teachers so that . . . we were never really springing anything on them, saying, “Hey, we have a game tomorrow, can we take the test today?” It was just always giving our coach our syllabus and giving our teachers our schedules at the beginning of the year so that we could kind of plan accordingly. But, just great communication between both of them and it was like, it was awesome, it was the reason we were able to make it work.

**Nursing faculty.** Nursing faculty should not require less of athletes, nor should they reduce academic rigor for them: graduates must be able to pass the NCLEX, and this requires
hard work. Neither should they make it arbitrarily harder. Scheduling conflicts arise for students who are not athletes, and accommodations are routinely put into place. Students have the obligation to work ahead of time to inform their instructors of conflicts with classes, exams, and clinicals; instructors can be more flexible. Ellen’s story of being required to stay at a particular clinical assignment rather than travel with her team to a national tournament, while other students were allowed to make up time due to weather issues, seems like a good example of an opportunity to be more flexible.

From a theoretical perspective, participation in sports should help students persist until graduation (Astin, 1999; Tinto, 1987). None of the participants in this study seriously considered dropping either their athletic or academic goals. If athletic participation helps some students remain in nursing school, this could offer a strategy for helping to fight the nursing shortage (AACN, 2016; Huber, 2014; DHHS, 2010).

Coaches. Coaches should be aware that nursing students are under different and often more demanding academic pressures (Beck, et al., 1997; Biggers et al., 1988). This is not to imply that coaches should make training less difficult, but rather provide flexible responses to clinical or class requirements through alternate training times. Participants who competed in track- Michelle, Ellen, and Dana- found training individually to work out well and be easy to schedule. Team sport participants, such as Lara, Jane, and Stephanie, found anything other than conditioning to be a major hurdle to overcome. Participants who were on the same team, as were Clarice and Mattie, described a slightly easier time, as they could work on drills together.

University administrators. School administrators should strive to have protections in place for the student athlete, as well as the educators and coaches who serve them. As an example, Molson University has a policy that sets specific rules for student athletes, faculty, and
coaches regarding both student and athlete rights and responsibilities. Students may miss classes for travel to and participation in competitions; students who will miss exams for competitions are to have the opportunity to complete the exam before departure or after return. On the other hand, practices will not pre-empt student participation in academic activities.

Tinto (1987) and Astin (1999) provide a theoretical basis for universities to be interested in the findings of this research. The participants are unanimous that dropping out of nursing school or quitting their sport was rarely a consideration. This supports the theorists’ contention that active participation in the college experience, in addition to classroom learning, helps keep students motivated. Additionally, four of the ten participants were “proud” to represent their institution as scholar athletes.

**Nursing human resource directors.** Graduated nursing student athletes may represent some of the more motivated and multifaceted nurse hires available. The participants in this study self-reported, and indicated that their supervisors concurred, that they exceeded their peer groups in a number of areas. These included personal motivation, the ability to successfully complete multiple complex tasks, teamwork and time management skills, and the ability to be coached. Additionally, Clarice, Amos, Stephanie, and Lara earned real life leadership skills as captain of their respective sports.

A recent review of the literature by (Rizzo, 2018) found that suicide rates in the US have been increasing steadily over the last 15 years. While no data specifically indicates that nurses in the US have higher rates of suicide than the general population, suicide attempts among women are three times higher than among men. Suicide rates among female nurses in the United Kingdom is three times higher than for the female population as a whole. Extrapolating from these data points, the author indicates that suicide rates among nurses in the United States is also
on the rise. However, because athletes may have greater self-efficacy regarding overcoming setbacks experiences (DeFreese & Smith, 2013), participating in a collegiate level sport may provide a protective factor. This protective factor may be another incentive for prospective employers to hire graduated nursing student athletes.

**Delimitations and Limitations**

Delimitations are “those characteristics that restrict the population to a homogeneous group of subjects” (Lobiondo-Wood & Haber, 2018, p. 510). This study utilized delimitations in order to capture the experience of completing nursing school while competing in intercollegiate athletics. All participants selected had successfully completed a four-year nursing program and earned a BSN, passed their licensure exams, and were currently employed as RNs. Also, they had competed for four-years of eligibility while in their nursing program. Purposeful selection, using these characteristics, ensured that all respondents included in this research had a similar background appropriate to the phenomenon under study: balancing nursing school and sports.

An additional delimitation was the use of phenomenological inquiry. The researcher had several preconceived ideas about the research and wanted to bracket himself out to ensure that the focus of the study did not lean toward these presuppositions. By seeking to understand the lived experience of balancing athletics and nursing academics, the participants were more able to explain the phenomenon in their own voices.

Limitations may result in study weakness (Lobiondo-Wood & Haber, 2018), and there are several limitations to this research. The first limitation relates to sample characteristics. All participants are from Midwestern colleges with religious affiliations, and most grew up in relatively small, rural towns. Although three universities are included in this study, only one
individual participated from a D-I school. D-I is the highest competitive level of the universities in this study, and only having one participant may affect data source triangulation.

The targeted population is, by nature, limited. Not all nursing schools have associated athletic programs. Of those schools that do, not all schools are supportive of nursing students participating in athletics. One of the participating universities in this study, for example, is now discouraging nursing students from participating in intercollegiate athletics, according to one participant.

In addition to the limited nature of the population, and perhaps because of it, there may be some question about the participants’ candidness. Although the participants received assurances regarding anonymity, and all protocols were followed appropriately, it is possible that some participants’ responses were guarded. For example, two respondents (Amos and Stephanie) were the only nursing graduates from their respective programs to compete in their sports. Also, Stephanie was the only participant from her university.

Non-random, volunteer sample selection necessarily limits the universality of this research. Participants may not represent the “average” graduated nursing student athlete. Agreeing to participate in this study indicated a willingness to commit to an estimated two-and-a-half hours of paperwork and interviews. Additionally, most of the participants in this study were highly involved in their college experience: four were team captains, three were double- or triple-major, two earned minor degrees, two were resident advisors, two were leaders of non-athletic university activities, and one participant was president of the university’s student government.

The transcendental phenomenological design to this study may provide an additional limitation. While this approach requires the researcher to suspend personally held beliefs about
the phenomenon under investigation (Moustakas, 1994), the potential for researcher bias remains. This researcher made every possible effort to suspend judgment, but he remained intimately aware of his human frailty throughout the process. “The LORD does not look at the things people look at. People look at the outward appearance, but the LORD looks at the heart” (1 Samuel 16:7, NIV). Triangulation, using three data sources, may alleviate some concern about this limitation and help confirm the researcher’s interpretation.

**Recommendations for Future Research**

In a nurse advisory board meeting, supporting Molson University’s School of Nursing, board members were asked what qualities they desired in new nursing graduates. Marie Goebbel (pseudonym), Critical Nursing Director of a small Midwest hospital, indicated that one of the major concerns for new nurses is the inability of young nurses to ask for assistance. “We give nurses great technological support, but one-to-one support from more experienced nurses is infrequent. It’s like they’re working alone in a crowd” (Marie Goebbel, personal interaction, September 26, 2018). “I’ve had the opportunity to interview a number of nurse graduates who competed in sports in college,” added Sherri Powers (pseudonym), Oncology Service Leader at (local hospital). “These nurses really understand teamwork. They’ve learned how to support each other as teammates. They’re also really coachable; they’re used to taking constructive criticism” (Sherri Powers, personal communication, September 26, 2018).

Teamwork, support from teammates, and coachability, are all comments made by participants of this study. Future research regarding teamwork and coachability in graduate nurse athletes, compared to non-athlete nurse graduates, may provide insight for nursing managers in hiring practices. Further, research could be directed to developing programs to develop more teamwork and coachability in non-athlete nursing students.
One of the major themes found in this research was a perception of support. When this involves feeling positive support for both endeavors, nursing student athletes were successful. Participants who reported poor support also reported that they considered quitting their sport, or leaving nursing school and pursuing another course of study. One participant, Jane, reports that she did change majors for one semester. Future research might explore the lived experiences of those nursing student athletes who left nursing school for non-academic reasons (i.e., students who did not fail out of the nursing program).

This study supported the theories of Tinto (1987) and Astin (1999): students who feel involved and supported are less likely to leave an institution of higher learning (and, consequently, more likely to persist until graduation). Students competing for their university in intercollegiate athletics are involved, and as Lara stated in the AU focus group, “I had other friends (for support), but nothing compares to the athletic community or my teammates.” Another future research topic might explore the lived experiences of nursing students concurrently involved in other campus activities, such as performing arts or student government.

Summary

The purpose of this transcendental phenomenological research was to explore the lived experiences of graduated nursing student athletes in successfully balancing sports and nursing school. Ten nursing school graduates, who had completed four years of eligibility in an intercollegiate sport during their nursing education, and who are currently employed as registered nurses, participated in the study. Multiple themes emerged as the data from questionnaires, personal interviews, and follow-up focus groups were examined. Themes included developing time management skills, communication skills, and teamwork. Other themes which became apparent were having a supportive environment and a strong personal
drive. The findings of this study have implications for nursing students, nursing faculty, coaches, universities, and nursing human resource personnel. Aspiring nursing student athletes must be committed to both activities, develop good time management and communication skills, and understand that the time constraints inherent in balancing school and sports may limit social and extracurricular activities. Nursing faculty and coaches need to understand the commitment, time constraints, and emotional stressors of their student athletes. Colleges and universities can help by providing reasonable guidance to faculty and coaches for prioritizing activities. Nursing human resource directors need to be aware of the potential skills sets that graduated nursing student athletes bring to their professional practice. Future research is needed to determine if the skills and qualities described by the participants in this study are generalizable to the population of graduated nursing student athletes.
REFERENCES


Tinto, V. (2015). Through the eyes of students. *Journal of College Student Retention, 0* (0), 1-16. DOI: 10.1171/1521025115621917


Appendix A: IRB Approval Letter

LIBERTY UNIVERSITY
INSTITUTIONAL REVIEW BOARD

June 19, 2017

Robert E. Steed
IRB Approval 2848.061917: A Phenomenological Study of Graduated Nursing Student Athletes' Experiences Balancing Academics and Athletics

Dear Robert E. Steed,

We are pleased to inform you that your study has been approved by the Liberty University IRB. This approval is extended to you for one year from the date provided above with your protocol number. If data collection proceeds past one year, or if you make changes in the methodology as it pertains to human subjects, you must submit an appropriate update form to the IRB. The forms for these cases were attached to your approval email.

Thank you for your cooperation with the IRB, and we wish you well with your research project.

Sincerely,

G. Michele Baker, MA, CIP
Administrative Chair of Institutional Research
The Graduate School

LIBERTY UNIVERSITY

Liberty University | Training Champions for Christ since 1971
Appendix B: Explanation of Study and Invitation to Participate

Dear

As a graduate student in the School of Education at Liberty University, I am conducting research as part of the requirements for a doctoral degree. The purpose of my research is to understand the experiences of balancing athletics and academics while completing nursing school, and I am writing to invite you to participate in my study.

If you were a scholar athlete in college (received an athletic scholarship and/or participated in four years of an intercollegiate sport) and successfully completed your nursing program, passed NCLEX, and are employed as an RN, you are eligible to participate. Participants will be asked to complete a short questionnaire, and participate in an audio-recorded interview, and a brief follow-up interview or focus group with other participants. It should take approximately 2 hours to complete all three data collection steps. The study is voluntary and you may withdraw at any time. Some personal information (such as your name and your collegiate sport), will be requested as part of your participation, but the information will be kept confidential.

To participate, please contact me at steed@midlandu.edu and provide a good contact point (e-mail is preferred; I will not share this contact information with anyone). Also, please tell me the number of years you participated in intercollegiate athletics while in nursing school.

A consent document is attached to this letter. The consent document contains additional information about my research. Please sign and return the document with your e-mail. I will then provide you with a brief (four questions) questionnaire.

If you choose to participate, you will receive gift cards for on-line or local merchants. The value of the gift cards is explained in the consent document.

Sincerely,

Robert E. Steed, RN, MSN, EdS
Associate Professor of Nursing
Appendix C: Participant Informed Consent Form

CONSENT FORM
A Phenomenological study of Graduated Nursing Student Athletes’ Experiences Balancing Academics and Athletics
Robert E. Steed, RN, MSN, Ed.S.
Liberty University
School of Education

You are invited to be in a research study of the experience of completing a traditional, four-year B.S.N. program while competing in intercollegiate athletics. You were selected as a possible participant because you were identified as a student athlete while enrolled in nursing school, you have successfully completed your NCLEX exam, and are currently employed as a Registered Nurse. I ask that you read this form and ask any questions you may have before agreeing to be in the study.

Robert E. Steed, a doctoral candidate in the School of Education at Liberty University, is conducting this study.

Background Information: The purpose of this study is to better understand the experience of balancing athletics and academics while completing a four-year nursing degree. The main question to be answered is how do graduated nursing student athletes describe their experiences in balancing sports and academics while completing a traditional, four-year nursing program and participating in intercollegiate sports?

Procedures: If you agree to be in this study, I would ask you to do the following things:
1. Complete a five-question journal/open-ended questionnaire. This should take approximately 30-40 minutes, depending on the length of your answers. Questionnaire results will be kept confidential. Any quotes from your questionnaire that are included in the study will be identified by a pseudonym (a false name).
2. Participate in a recorded, semi-structured interview with the researcher. This will preferably be a face-to-face interview, but can be conducted by phone, if necessary, to accommodate any scheduling difficulties. The interview should last approximately 30 to 45 minutes. Audio recordings of interviews will be made to facilitate transcriptions.
3. Depending on the findings from steps one and two, you may be asked to participate in either a follow-up phone interview or a focus-group with other graduated nursing student athletes.
   a. Follow-up interviews, to clarify any information from questionnaires in step 1 or interviews in step 2, will be conducted by phone. These follow-up interviews should last no more than 15 minutes and will also be audio recorded.
   b. Focus groups will consist of several graduated nursing student athletes. These groups would allow sharing of information between the graduated nursing student athletes to help in clarifying or expanding on information gathered in steps one and two. Focus groups will be audio-recorded and last approximately one hour.
4. You will be offered the opportunity to review the researcher’s conclusions about the content and themes of your questionnaire and interview responses. This is voluntary but encouraged.

**Risks and Benefits of being in the Study:** The risks involved in this study are minimal. The main risk, while unlikely, is a breach in confidentiality if the research materials are stolen or lost.

There are no benefits to participating in this study. However, the research may have a benefit to nursing. Nursing school is stressful; participation in sports is time consuming and can also be stressful. However, fitness and exercise associated with athletic preparation and participation may provide some stress reduction or personal resilience benefit. Understanding this balance is a potential benefit to nursing.

**Compensation:** Participants will be compensated for participating in this study. Participants will receive gift cards from on-line or local merchants for participating in each step of the study. Gift card values increase with each step of the study. For the questionnaires, participants will receive $5 gift cards. For interviews, participants will receive $10 gift cards. Participants who complete all three steps of the study will receive an additional $10 gift card for a total value of $25 in gift cards.

**Confidentiality:** The records of this study will be kept private. In any sort of report I might publish, I will not include any information that will make it possible to identify a subject. Research records will be stored securely and only the researcher will have access to the records.

- All university and participant names will be changed to pseudonyms (false names). Interviews will be conducted in private offices/conference rooms. Any quotes used in the final research will be associated with these pseudonyms.
- All electronic data will be stored on a password-protected computer. All written data will be kept in a locked filing cabinet in the researcher’s locked, private office. Three years after the completion of the study, the electronic data will be deleted and the thumb drive will be destroyed. All written documents will be torn and placed in a commercial shred box. There is no anticipated future use of this research data.
- Original audio recordings will be downloaded onto a password-protected thumb-drive on a password protected computer. Original recording will then be erased. The thumb drive will be erased and destroyed at the end of the three year period, as described above.
- Every effort will be made to ensure your confidentiality. However, if a focus group is warranted, it is not possible to ensure that all focus group members will maintain confidentiality. This will be stressed if any participants are involved in focus groups. Additionally, a contract transcriptionist from Lincoln, NE, may be used to help prepare word-for-word transcriptions of interviews and focus groups. Information provided to the transcriptionist will be identified using pseudonyms only. While it is unlikely that this individual would not maintain confidentiality, it is not possible to absolutely guarantee this.

**Voluntary Nature of the Study:** Participation in this study is voluntary. Your decision whether or not to participate will not affect your current or future relations with Liberty University or
Calrsberg University. If you decide to participate, you are free to not answer any question or withdraw at any time without affecting those relationships.

**How to Withdraw from the Study:** If you choose to withdraw from the study, please contact the researcher at the email address/phone number included in the next paragraph. Should you choose to withdraw, data collected from you, **apart from focus group data**, will be destroyed immediately and will not be included in this study. **Focus group data will not be destroyed, but your contributions to the focus group will not be included in the study if you choose to withdraw.**

**Contacts and Questions:** The researcher conducting this study is Robert E. Steed, RN, MSN, Ed.S. You may ask any questions you have now. If you have questions later, **you are encouraged** to contact him at 402-941-6396 / steed@midlandu.edu. You may also contact the researcher’s faculty advisor, Dr. Christopher W. Taylor, PhD, at cwtaylor2@liberty.edu.

If you have any questions or concerns regarding this study and would like to talk to someone other than the researcher, **you are encouraged** to contact the Institutional Review Board, 1971 University Blvd, Green Hall 1887, Lynchburg, VA 24515 or email at irb@liberty.edu.

*Please notify the researcher if you would like a copy of this information for your records.*

**Statement of Consent:** I have read and understood the above information. I have asked questions and have received answers. I consent to participate in the study.

*(NOTE: DO NOT AGREE TO PARTICIPATE UNLESS IRB APPROVAL INFORMATION WITH CURRENT DATES HAS BEEN ADDED TO THIS DOCUMENT.)*

*IRB Approval is attached, below.*

☐ The researcher has my permission to audio-record me as part of my participation in this study.

_________________________   _______________________
Signature of Participant           Date

_________________________   _______________________
Signature of Investigator         Date
Appendix D: Participant Journal Instructions and Questions

(Journal/Questionaire)

Initial Questions for Participants

The following questions are part of the research, *A Phenomenological Study of Graduated Nursing Student Athletes’ Experiences Balancing Academics and Athletics*. If you have any questions, concerns, or need clarification, please contact the researcher, Robert E. Steed, RN, MSN, Ed.S., at steed@midlandu.edu.

*Instructions*: There is no minimum or maximum requirement for your responses, nor is there any specific format. You may answer on this form, or you may choose to write in a separate document. Spend as much time with each question as you feel you need to provide a complete answer. Once you feel you have fully answered each question, please send your answers to the researcher at steed@midlandu.edu. As explained in the informed consent document, all responses are confidential.

*Background Question*

1. In which sport did you participate during nursing school, how many years did you participate, and what amount of scholarship support did you receive for this participation, if any (you may choose to list a dollar amount or percent range)?

*Research Questions*

2. How did the opportunity to participate in a NCAA or NAIA sport contribute to your decision to attend nursing school at the university you attended?

3. How did participation in sports while attending nursing school affect your nursing school performance?
4. When considering the entire experience of completing nursing school while playing an NCAA or NAIA sport, what positive experiences do you remember most?

5. When considering the entire experience of completing nursing school while playing an NCAA or NAIA sport, what negative experiences do you remember most?
Appendix E: Semi-Structured Interview Instructions and Protocol

(Semi-Structured Interview procedures and questions)

Prior to beginning the interview, all participants were read the informed consent form that they had previously signed. They were asked if they had any questions or concerns prior to beginning the interview. Prior to beginning the recording, participants were asked to give verbal permission to record; they were informed when the recording was complete. Once recording began, the following questions were asked:

**Background Information**

1. Please tell me the following:
   a. Where you attended nursing school;
   b. Where are you currently working?

2. What sport did you play during nursing school, and how long have you been playing (including college)?

3. To what extent did your university offer financial support for athletic participation?

4. Would you have attended nursing school at (location) if you had not been allowed the opportunity to play your sport?

**The Nursing Student Athlete Experience**

5. Please describe your typical day in nursing school during your active athletic season.

6. How would you describe the challenges of balancing sports and nursing school to a friend considering doing the same?

7. How would you describe situations or times during which you considered withdrawing from nursing school or quitting your sport?
8. What aspects of the nursing program, athletic department, and university helped you balance sports and school?

9. What aspects of the nursing program, athletic department, and university made it difficult for you to balance sports and school?

10. What impact do you believe being a nursing student athlete has had on your nursing career?
Appendix F: Instructions and Follow Up Questions/Focus Group Questions

(Focus group/Follow-up questions)

Two participants preferred to answer these questions individually rather than in a focus group. These individuals were reminded of the confidential nature of the study, and provided the same questions listed below.

The focus group participants answered the questions in an on-line format. There were two focus groups comprised of four individuals; participants were divided in groups based on their respective colleges. The following instructions were given to all who participated in the on-line focus groups:

Rules of engagement:

The purpose of this research, and this focus group, is to examine the “experience” of being a nursing student athlete. Each person may experience this differently, so it’s ok to share viewpoints or feelings that may be different from other participants.

When responding, please use the “REPLY ALL” button; that way, other participants may be able to add to your comments based on their experiences.

All comments should be considered confidential among this group’s members– please do not attribute specific comments to any participants outside this group.

Please be respectful of each other’s feelings.

This e-mail “virtual” focus group will remain open for approximately 10 days; hopefully, that will allow time for everyone to provide initial and follow up comments.

If you have something you would like to add to the overall research, but feel uncomfortable sharing in this open group format, simply send that info to me via e-mail at
steed@midlandu.edu or rsteed2@liberty.edu. If you would prefer, we can arrange to speak by phone; again, send that request via e-mail and we can work out a convenient time.

**Question Related to Journal Analysis**

1. What are your impressions of the journal analysis, and do you concur with the current findings?

2. Since completing your journals, can you please describe issues about participating in sports while attending nursing school which you may not have previously had a chance to address?

**Focus Group Questions**

3. Prior to starting college, what preconceptions (ideas) did you have about balancing college academics and college athletics?

4. How would you describe the overall experience of attending nursing school while concurrently participating in NCAA or NAIA sports?

5. What are your perceptions of your experiences compared to nursing school classmates who did not play sports?

6. What do you think were the most difficult aspects of being a “nursing student athlete”?

7. What was the best aspect of being a “nursing student athlete”?

8. What advice might you offer to a prospective athlete who also wanted to attend nursing school?
Appendix G: Sample Transcript of Semi-Structured Interview

(Participant: Claire; Amstel University)

Transcript # 1: A Phenomenological study of Graduated Nursing Student Athletes’ Experiences Balancing Academics and Athletics

Participant: Claire, Amstel University

Interview Conducted: 08 December 2017

Interview Setting: Telephone

Prior to recording the telephone interview, the researcher read the signed informed consent form to the participant, asked again for permission to record the interview, and then pressed the record button. The respondent’s comments are in bold; interviewer’s comments are not bold; time demarcations helped the interviewer in analysis and when breaks were taken from transcribing.

Can you please tell me your name?

My name is Claire.

And, Claire, where did you attend nursing school?

I attended Amstel University in (city/state).

And where are you currently working?

I’m currently working in city state.

Ok, and you’re currently working as an RN?

Correct.

And what kind of unit do you work on?

I’m on a medical telemetry floor.

Ok. What sport did you play during nursing school, and how long have been playing?

I played soccer. . . I was a goal keeper.

OK. And how long have you been playing soccer?

Since I was 5 years old.

Ok, and do you still play?

I, I [sadly?] not, I’d love, I’m looking to join an adult league team [mm hmm] here in the city, but, I’ve finally, I’ve been settling in before spreading myself too thin.
I get that. Alright, to what extent did univeri-- did uh your school offer you financial support for playing soccer?

Amstel had an incredible scholarship program; everybody on the roster received financial aid [ok] for like soccer.

02:04
And can you elaborate on the amount?

My situation was pretty unique with that um I my father works at the university where I attended and so I automatically received tuition remission, um because and that’s what I went with over getting a soccer scholarship because it was more money that way, um, but I still did receive like a small scholarship from soccer as well.

Ok, so that was helpful.

Yeah.

02:38
Would you have attended nursing school at Amstel if you had not been allowed the opportunity to play your sport?

OK, So, also an interesting thing there is I joined the soccer team my sophomore year. So, I was recruited by “elk” my senior year in high school, and I decided that I wanted to um be only a student rather than a student athlete and so I attended Amstel my freshman year as well and after studying abroad decided that I really missed the sport and decided to try out for the team my sophomore year. So, yes. [wow] I would have attended ‘Elk’ no matter what. [Ok] and I did.

03:28
And where did you do your study abroad if you don’t mind me asking?

I, uh, throughout my four years?

Oh, you went more than once, ok

I did, yes, um my freshman year I spent three weeks in India as well as one week in Greece. My sophomore year I spent 4 months – a whole semester – in Costa Rica. And my senior year I spent three weeks in Ecuador.

Wow. Very much the world traveler, then.

Um hum.

Ok, well that’s really the background stuff. Um, now soccer you played in the fall?
Yep.

[question # 5] Could you describe a typical fall day in nursing school while you were playing soccer?

Yeah. So, I, so I was, depending on whether it was a clinical day or not, Monday-Wednesday and Friday we had lecture and Tuesdays Thursdays we had um clinicals, so I’ll do a Monday and a Tuesday for you. So Monday I would wake up at 8 AM, and so I’d have an 8 am and 9 am classes and then at my school it’s a kind of small liberal arts school so we did have chapel Monday Wednesday Friday um not it wasn’t mandatory um but I would usually go chapel hour, it was a 30-minute church service, and that would get me to 10:30, um

Yeah, um, so I’d wake up about 7, eat breakfast, then go to classes, then chapel, then a 30 minute break, then I might have an 11 am class and then uh or uh a one o’clock class, and then immediately after the 1 o’clock class I would immediately go back to the dorms, change, and then go to the rec center or we would have lifting, um at three for an hour. And then we would go immediately to practice from 4 until 6 pm, after which the entire team would walk over to the cafeteria, eat supper together, and then I would shower, and spend some time with people, and then start doing homework.

So, that was kind of a Monday Wednesday Friday;

Tuesdays and Thursdays were our clinical days so I would usually be at the hospital by 6:15 so I would wake up at 5:40, pack my lunch, um. Thankfully, the hospital is three blocks from Ari, where I would do my clinicals, so that allowed me time to get a little bit extra sleep, I’d get to the hospital, we would have clinicals until um 3 or 3:30, after which I would immediately go to practice. Tuesdays are fitness days, we do fitness every single week no matter what, rain snow or shine, and then same thing practice 4 until 6, and then um and then supper and then shower and then decompress. Um my favorite show, my dream in life is to be on Dancing with the Stars, [he he] ha ha so on Tuesday nights I would host the team to the place that I lived in, I lived in this house, and we would watch Dancing
with the Stars from the night before, and then do homework, and then hang out and go to bed.

07:10

Ok, so busy days.

Oh, extremely. And my junior year I was an RA, so I lived in the dorm where I lived as a freshman, and I had 31 freshman residents and that was an incredibly stressful time in my life, I uh, it was my first time being ‘in season’, it was my first year of major nursing classes and clinicals, and I had to take care of 30 freshman women. So, freshman year I think is stressful enough, but, many of them um struggled with like mental health issues then too and so that year was probably one of the most stressful years of my life.

08:02

Wow

So

Ok, so let me ask you this, cuz I’m not sure, at Amstel, do you start your nursing clinical classes in your sophomore year or your junior year?

SO, your freshman year is mainly all of your general ed requirements.

Sophomore year, um you are finishing up generals um as well as taking some of the course you need to be admitted into the nursing program, which is like psychology, sociology, that kind of stuff.

Uh, and then junior year is when you’re doing adult health, and health assessment, and more of like the typical nursing classes, and that’s when you do clinicals as well.

08:48

I apologize; I should have asked that question before we started.

[Question 6] How would you describe the challenges of balancing sports and nursing school to a friend considering doing the same?

Um, I think a lot of it is just about setting the right expectations. Um I think uh you know, really asking a lot of the right questions of the coaches and team mates, you know when you’re going on your college visits, uh, you know, saying “hey”, and you like asking me, asking the question about what’s your typical day like. And then recognizing that um that like outside of the school and the sport um like that can kind of consume a lot of your time.
## Appendix H: Sample Excel Audit Trail Documents

(Sample key words, Five participants, Three universities)

| Statement/Phrase/Key Word | MSU | MSU | MSU | MSU | MSU | MSU | MSU | MSU | CU | CU | CU | CU | AU | AU | AU | AU | AU | AU | AU | CF | CF | CF | CF |
|---------------------------|-----|-----|-----|-----|-----|-----|-----|-----|----|----|----|----|----|----|----|----|----|----|----|----|----|
| 12-13 hr days             |     |     |     |     |     |     |     |     |    |    |    |    |    |    |    |    |    |    |    |    |    |    |
| 14-15 hr days             |     |     |     |     |     |     |     |     |    |    |    |    |    |    |    |    |    |    |    |    |    |    |
| 15-16 hr days             |     |     |     |     |     |     |     |     |    |    |    |    |    |    |    |    |    |    |    |    |    |    |
| 15-17 hr days             |     |     |     |     |     |     |     |     |    |    |    |    |    |    |    |    |    |    |    |    |    |    |
| 16 hr days                |     |     |     |     |     |     |     |     |    |    |    |    |    |    |    |    |    |    |    |    |    |    |
| 16-17 hr days             |     |     |     |     |     |     |     |     |    |    |    |    |    |    |    |    |    |    |    |    |    |    |
| 18 - 19 hr days           |     |     |     |     |     |     |     |     |    |    |    |    |    |    |    |    |    |    |    |    |    |    |
| 18-20 hour days           |     |     |     |     |     |     |     |     |    |    |    |    |    |    |    |    |    |    |    |    |    |    |
| ability to ask for support|     |     |     |     |     |     |     |     |    |    |    |    |    |    |    |    |    |    |    |    |    |    |
| able to handle stress in ER|     |     |     |     |     |     |     |     |    |    |    |    |    |    |    |    |    |    |    |    |    |    |
| accountability             |     |     |     |     |     |     |     |     |    |    |    |    |    |    |    |    |    |    |    |    |    |    |
| advocate for self/advocate for patients |     |     |     |     |     |     |     |     |    |    |    |    |    |    |    |    |    |    |    |    |    |    |
| advocate for self/advocate for patients |     |     |     |     |     |     |     |     |    |    |    |    |    |    |    |    |    |    |    |    |    |    |
| advocate for self/advocate for patients |     |     |     |     |     |     |     |     |    |    |    |    |    |    |    |    |    |    |    |    |    |    |
| being a leader             |     |     |     |     |     |     |     |     |    |    |    |    |    |    |    |    |    |    |    |    |    |    |
| better nurse "walk the talk" |     |     |     |     |     |     |     |     |    |    |    |    |    |    |    |    |    |    |    |    |    |    |
| confidence                 |     |     |     |     |     |     |     |     |    |    |    |    |    |    |    |    |    |    |    |    |    |    |
| confidence                 |     |     |     |     |     |     |     |     |    |    |    |    |    |    |    |    |    |    |    |    |    |    |
| conflict resolution        |     |     |     |     |     |     |     |     |    |    |    |    |    |    |    |    |    |    |    |    |    |    |
| efficiency                 |     |     |     |     |     |     |     |     |    |    |    |    |    |    |    |    |    |    |    |    |    |    |
| efficiency                 |     |     |     |     |     |     |     |     |    |    |    |    |    |    |    |    |    |    |    |    |    |    |
| failing, then getting up   |     |     |     |     |     |     |     |     |    |    |    |    |    |    |    |    |    |    |    |    |    |    |
| flexibility                |     |     |     |     |     |     |     |     |    |    |    |    |    |    |    |    |    |    |    |    |    |    |
| grew as a person           |     |     |     |     |     |     |     |     |    |    |    |    |    |    |    |    |    |    |    |    |    |    |
| hard work                 |     |     |     |     |     |     |     |     |    |    |    |    |    |    |    |    |    |    |    |    |    |    |
| health benefit             |     |     |     |     |     |     |     |     |    |    |    |    |    |    |    |    |    |    |    |    |    |    |
| increased job interview skills |     |     |     |     |     |     |     |     |    |    |    |    |    |    |    |    |    |    |    |    |    |    |
| invaluable life lessons    |     |     |     |     |     |     |     |     |    |    |    |    |    |    |    |    |    |    |    |    |    |    |
| leadership                |     |     |     |     |     |     |     |     |    |    |    |    |    |    |    |    |    |    |    |    |    |    |
| leadership qualities      |     |     |     |     |     |     |     |     |    |    |    |    |    |    |    |    |    |    |    |    |    |    |
| leadership skills         |     |     |     |     |     |     |     |     |    |    |    |    |    |    |    |    |    |    |    |    |    |    |
| learn to say no           |     |     |     |     |     |     |     |     |    |    |    |    |    |    |    |    |    |    |    |    |    |    |
| learn to work with others |     |     |     |     |     |     |     |     |    |    |    |    |    |    |    |    |    |    |    |    |    |    |
| learned multitasking      |     |     |     |     |     |     |     |     |    |    |    |    |    |    |    |    |    |    |    |    |    |    |
| learned to adapt quickly  |     |     |     |     |     |     |     |     |    |    |    |    |    |    |    |    |    |    |    |    |    |    |
| learned to be taught      |     |     |     |     |     |     |     |     |    |    |    |    |    |    |    |    |    |    |    |    |    |    |
| learned to communicate    |     |     |     |     |     |     |     |     |    |    |    |    |    |    |    |    |    |    |    |    |    |    |
| learned to take constructive criticism |     |     |     |     |     |     |     |     |    |    |    |    |    |    |    |    |    |    |    |    |    |    |
| made me a better person   |     |     |     |     |     |     |     |     |    |    |    |    |    |    |    |    |    |    |    |    |    |    |
| made me better nurse      |     |     |     |     |     |     |     |     |    |    |    |    |    |    |    |    |    |    |    |    |    |    |
| made me well rounded      |     |     |     |     |     |     |     |     |    |    |    |    |    |    |    |    |    |    |    |    |    |    |
| managing people           |     |     |     |     |     |     |     |     |    |    |    |    |    |    |    |    |    |    |    |    |    |    |
| marketability             |     |     |     |     |     |     |     |     |    |    |    |    |    |    |    |    |    |    |    |    |    |    |
(Key words, coded: # responses—sample)

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