

The Perceived Challenges of Advising Undergraduate Nursing Students and
the Effects on Faculty as Advisors

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Dedication

I dedicate this work to my beautiful daughter, Freya. You have provided me with a whole new prospective of love that I thought was never possible. I have worked tirelessly many weekends and nights to complete this goal I never thought was possible. I may have missed some milestones while you were a baby, but may this show you the gift of education, to be a lifelong learner, and that anything is possible if you put your mind to it. Momma loves you so very much.

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Table of Contents

Abstract	x
CHAPTER I: INTRODUCTION.....	11
Background and Rationale.....	11
Purpose of the Study.....	13
Research Questions.....	14
Significance of the Study.....	14
Assumptions	15
Delimitations.....	15
Definition of Terms	15
CHAPTER II: LITERATURE REVIEW	17
Historical Context.....	17
Theoretical Context	19
Phases of interpersonal relationships.....	20
Roles of nursing.....	22
Summary of Peplau’s Theory of Interpersonal Relations.....	24
Organizational Advising Models	25
Centralized structure.....	25
Decentralized structure.....	26
Shared structures.....	27
Academic Advising Outcomes	29
Student success and satisfaction.....	30
Student retention.....	33

Advisee Perspectives	34
Role and responsibility of an advisor.....	35
Characteristics of an advisor.....	37
Student-advisor relationship.....	37
Faculty/Advisor Perspectives	38
Role and responsibility.....	39
Characteristics.....	40
Challenges and barriers.....	41
Summary.....	45
CHAPTER III: METHODS AND PROCEDURES	47
Research Design	47
Population and Sample	48
Demographics	49
Description of Setting.....	50
Interview Protocol	50
Data Collection Procedures	51
Analytical Procedures.....	52
Summary.....	53
CHAPTER IV: RESULTS.....	54
Introduction.....	54
Data Analysis.....	54
Results.....	56
Demographic information.....	56
Perceived challenges.....	57
Effects of challenges.....	63

Results Summary	68
CHAPTER V: DISCUSSION AND SUMMARY	70
Research Questions and Interpretation	70
Research question #1.	70
Research question #2.	75
Limitations of the Study	80
Implications/Recommendations for Education.....	81
Future Research	83
Summary.....	83

LIST OF TABLES

TABLE	PAGE
1. Theme Development	55
2. Demographic Data of Participants	57

Abstract

Academic advising can significantly influence academic success. However, little is known about the challenges and the effects on nurse faculty advising baccalaureate nursing students. The purpose of this qualitative phenomenology study was to explore the challenges faculty experience advising baccalaureate nursing students and the effect those challenges have on faculty advisors. Semi-structured interviews were utilized with a purposeful sample of six nurse faculty advisor participants at three Midwest undergraduate nursing program. Participants perceived four challenges of workload, lack of training, lack of student accountability, and the student-advisor relationship. The effect from these challenges consisted of sense of emergency, lack of purpose, and stress and anxiety. These findings add to the lack of literature in academic advising in nursing education to better support nursing faculty advising nursing students to retain qualified nursing faculty.

Keywords: academic advising, academic advisement, baccalaureate education, faculty advisors, nursing education, nursing faculty

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CHAPTER I: INTRODUCTION

This chapter will provide a background of advising along with introducing the problem and purpose of this qualitative research study. The research questions will be introduced and the chapter will conclude with operational definitions, assumptions, limitations, and delimitations.

Background and Rationale

Academic advising is a process that involves an intentional relationship with a student and his or her advisor that provides the student with guidance and direction about academic, social, and/or personal matters (Crookston, 1972; O'Banion, 1972). It is an intentional activity at the institution where the student has the opportunity to have one-on-one interactions and relationships with a knowledgeable individual on campus. Tinto (1987) expressed that academic advising is imperative for institutions to educate and retain students. Academic advisors provide students the personal connections to help identify student services the institution offers to retain and promote student success.

The issue of high attrition rates in nursing programs has brought much attention to identifying strategies to improve retention and progression of nursing students. One strategy is through the engagement of academic advising. Academic advising has been identified as an integral component in student retention, satisfaction, and success (Harrell & Reglin, 2018; Mooring, 2016; Williamson, Goosen, & Gonzalez, 2014; Young-Jones, Burt, Dixon, & Hawthorne, 2013). Faculty are the most qualified to serve as academic advisors as they are knowledgeable about academic programs and courses, along with having regular interactions

with students through teaching (O'Banion, 2009). A majority of higher learning institutions do place the role of advising with their faculty (Habley, 2004; Moses, 2015).

Furthermore, there is an increase need for baccalaureate prepared nurses. The American Association of Colleges of Nursing (AACN) believes that nurses with Bachelor of Sciences in Nursing (BSN) degrees are better prepared to meet the demands placed on today's nurses (AACN, 2019a). The United States (U.S.) is experiencing a shortage of Registered Nurses (RNs) which is expected to intensify as Baby Boomers age (AACN, 2019c). Research on academic advising suggest that academic advising may evoke positive changes to the retention of nursing students to increase the nursing population. Mooring (2016) identified that poor retention is not solely related to the student's academic ability but from the lack of necessary intervention by faculty beginning with admission throughout the curriculum.

However, other factors contribute to the nursing shortage such as the shortage of nursing faculty. Nursing schools across the country are unable to expand class sizes to meet the increased demand to produce more nurses due to the nursing faculty shortage. According to the AACN (2019c), report titled *2018-2019 Enrollment and Graduation in Baccalaureate and Graduate Programs in Nursing, U.S.* nursing schools turned away more than 75,000 qualified applicants from baccalaureate and graduate nursing programs in 2018 due to the lack of faculty, clinical sites, clinical preceptors, classroom space, and budget constraints. Two-thirds of nursing schools responded the shortage of faculty and/or clinical preceptors as reason for turning away qualified applicants. In the report titled *Special Survey on Vacant Faculty Positions*, 1,715 faculty vacancies were identified from 872 nursing schools with baccalaureate and/or graduate programs across the country (AACN, 2019b). Furthermore, nursing schools disclosed the need to create 138 additional faculty positions to accommodate the student demand (AACN, 2019b).

A major factor identified as contributing to the nurse educator shortage is dissatisfaction with workload and burnout (National League for Nursing, n.d.; Owens, 2017). The National League for Nursing/Carnegie study found that more than one in four nurse educators stated they were likely to leave their current job due to the workload as a motivating factor (Kaufman, 2007). Furthermore, on average, nurse educators work over 56 hours per week while school is in session. A major challenge identified in academic advising is it takes too much time (Karr-Lilienthal, Lazarowicz, McGill, & Menke, 2013). Concerns regarding nursing faculty advisors and their workload is very timely during this nurse faculty shortage.

In addition, the role of a faculty advisor is multi-faceted and goes beyond being knowledgeable about and assisting students with their major and course selections. Advisees today share their personal stories and struggles with their advisors, which are known to include concerns regarding finances, personal issues, and mental well-being (Anft, 2018; O'Connor, 2017; White, 2013; Whitsett, Suell, & Ratchford, 2014). With the growth in responsibilities, advisors report lack of time as the major challenge they face with advising students (Mooring, 2016). Faculty advisors are still expected to perform their tripartite responsibilities of teaching, service, and scholarship despite their growing responsibilities in the advisor role. With the current nurse educator shortage and the difficulties to retain qualified faculty, research is vital to investigate challenges faculty encounter advising nursing students.

Purpose of the Study

Advisors play a pivotal role in positive student outcomes and students' development making effective advising a significant investment in students and the institutions they attend (Harrison, 2009a). To better understand the complexities of faculty advising in nursing education, the purpose of this qualitative phenomenology study was to explore the challenges

faculty experience advising baccalaureate nursing students and the effect those challenges have on faculty advisors.

Research Questions

The research questions that guided this study were:

- 1) What are the perceived challenges faculty advisors face when advising baccalaureate nursing students?
- 2) What effects do the challenges of advising have on faculty advisors?

Significance of the Study

Academic advising is important for students enrolled in programs that are related to high level of stress, such as nursing education (Harrison, 2009b; Chan et al., 2019). Thus, nursing faculty advisors tend to have more student interactions related to the academic challenges than regarding course selection (Harrison, 2009b). Advising consists of creating trusting relationships between the advisor and advisee to mentor and guide during these stressful times. Understanding the advisor perspective is important to assist institutions and administrators in designing and modifying advising programs. However, it is also important to provide better support for advisors to improve student outcomes.

Most all existing literature on academic advising focuses on the advisee perspective. Gordan & Habley (2000) identified the need for further research from the advisors' perspective. In addition, there is lack of research on academic advising in nursing education (Chan et al., 2019; Harrison, 2009a). Studies that do focus on a nursing faculty perspective are consistently related to Registered Nurse (RN) to Bachelor of Science in Nursing (BSN) programs or community college nursing associate degree programs. There is limited research that specifically addresses the faculty viewpoints of advising undergraduate BSN students. These studies also do

not focus on the challenges nursing faculty encounter. It is imperative that the nursing profession further investigates the challenges that are present, which may help retention during the nursing faculty shortage. Therefore, further research specific to the faculty perceptions of advising undergraduate BSN students is warranted.

Assumptions

This study will assume that all participants are faculty teaching in an undergraduate nursing program who advise nursing students. It was assumed that faculty have had one year of experience advising students at their current institution. Lastly, it was assumed that all participants were open and honest in their answers.

Delimitations

This study's focus was on undergraduate baccalaureate nursing faculty. In addition, the study was limited to only three nursing programs in the Midwest. Due to this specific population and area, there was a potential limitation to individuals who meet the criteria for participation. Lastly, a limitation could include researcher bias in that the researcher is a faculty advisor in an undergraduate nursing program. To prevent participants sensing researcher bias, the researcher will maintain a natural and impartial stance throughout the research process by bracketing her own experiences. In addition, biases were avoided by having the Doctoral Chair review methods, results, and data analysis to identify potential signs of bias.

Definition of Terms

The following operational definitions were used in this research study:

Academic Advising. A process that involves an intentional relationship with a student and his or her advisor that provides the student with guidance and direction about academic, social, and/or personal matters (Crookston, 1972; O'Banion, 1972).

Advisee. An undergraduate baccalaureate nursing student who receives academic advising from a faculty advisor.

Faculty Advisor. A faculty member, teaching in the undergraduate nursing program who guides and aids students personally and professionally to meet academic and personal goals.

Undergraduate Baccalaureate Nursing Students. Undergraduate students who are enrolled in a pre-licensure Bachelor of Science in Nursing program.

CHAPTER II: LITERATURE REVIEW

Understanding the history and current topics of academic advising is fundamentally important to this research. An overview of the history of academic advising and how it has evolved over the years in addition to the different models of advising that have been utilized to enhance the understanding of the common systems will be discussed. This literature review will address the positive outcomes of academic advising such as student retention, satisfaction, and success. Furthermore, student and faculty/advisor perspectives in relationship to the characteristics and roles of the advisor along with student-advisor relationships will be discussed. Lastly, the challenges that advisors encounter will be examined. Based upon the literature, identifying effective advising is based on developing student-advisor relationships.

Academic advising requires a relationship between the advisor and advisee. Interpersonal relations skills and competencies are essential to maintain a healthy and trustworthy relationship (Peplau, 1997). Hildegard Peplau's middle range theory of Interpersonal Relationships was designed to improve the nurse's relationship with the patient by reducing frustration, conflict, and anxiety by applying human relations principles and by the nurse understanding his or her own behavior to help others (Masters, 2015). Through this process, the nurse and patient learn and grow. Thus, Peplau's Theory of Interpersonal Relations (1991, 1997) was the theoretical framework utilized for this research.

Historical Context

Academic advising dates back to the 1620s at Harvard College (Frost, 2000). Historically, academic advising focused on assisting students in choosing a major and course selection to meet graduation requirements (Crookston, 1972; Frost, 2000; Horstmeier, 2006).

Interestingly, students had little to no choice of course selection and students were governed through strict rules.

Over the years, a struggle to define academic advising continued to be an issue. In the 1970s, the concepts and issues of academic advising were gaining awareness. Burns Crookston (1972) and Terry O'Banion (1972), pioneers of academic advising, individually identified a correlation with advising theories and student development and utilize the correlation to further define academic advising. Crookston's 1972 concept of advising believed in developmental advising versus prescriptive advising (Frost, 2000). Prescriptive advising referred to the advisor as the doctor and the advisee as the patient. For instance, the advisor had all the information and the primary responsibility was dispensing the information to the student on what to do. The primary responsibility of the advisee was to adhere to and accomplish what was prescribed. In addition, Crookston (1972) believed that both the student and advisor shared the responsibility for the quality of the advising. The author defined advising as a process based on a student-advisor relationship to help students develop personally and professionally through resources utilization inside and outside of the institution as a way to meet academic and personal goals. Similarly, O'Banion (1972) described academic advising "as a process in which the advisor and advisee enter into a dynamic relationship respectful of the students concerns and that the advisor serves as a teacher and guided in an interactive partnership aimed to enhance the student's self-awareness and fulfillment" (Burton & Wellington, 1998, p. 13).

Furthermore, over the last 40 years, the American College Testing Service (ACT) has provided comprehensive research on advising. ACT believes that academic advising plays an integral part in student retention (Habley & McClanahan, 2004). Starting in 1979, the ACT has conducted six national studies on advising to improve practice (Crockett, 1978; Frost, 2000;

Habley & McClanahan, 2004). For example, the report titled, *Survey of Academic Advising*, was first used in 1984 and aided in the knowledge about the effects of advising on students (Frost, 2000; Habley, 1994).

With the increased number of college students in the 1960s and 1970s, along with the increased enrollment of diverse populations, academic advising begun to be identified as an organized profession (Frost, 2000). In 1977, the National Academic Advising Association (NACADA) evolved from the first National Conference on Academic Advising and was chartered in 1979 (Thurmond & Miller, 2017). NACADA has been and still is a global leader for the theory, delivery, application, and advancement of academic advising to enhance student learning and development. They represent all 50 states in the United States, Puerto Rico, Canada, and other international countries. For over 30 years, they have been guided by the same purpose today which states, “to promote the quality of academic advising in institutions of higher education, and to this end, it is dedicated to support the professional growth of academic advising and advisors” (Beatty, 1991, p. 5). In addition, the NACADA provides a biannual journal to advance and address the research, theory, and practice of academic advising in higher education.

Theoretical Context

The theoretical framework that guided this study was Hildegard Peplau's Interpersonal Relations in Nursing theory (1991, 1997). Peplau believed that the nurse-patient relationship is the center of nursing (Peterson, 2004). Peplau's model involves the nurse having self-awareness and insight regarding his or her own behavior to help patients resolve their problems through interpersonal relationships (Jacob, 2017). The theory supports the idea that establishing and maintaining healthy relationships between the advisor and advisee are important (Harrison,

2009a; Peplau, 1991). Based on the definitions of advising, it also cannot exist without establishing and maintaining a healthy relationship between the faculty advisor and advisee.

Peplau's theory (1991, 1997) originally developed with the focused concern of psychiatric patients, yet over time it has been used in other clinical and education settings (Peterson, 2004). The purpose of the theory was to improve the nurse's relations with his or her patients. (Peterson, 2004). This was achieved through the nurse understanding that his or her behavior, aided individuals to identify their problems, and applied human relation principles to those problems (Peterson, 2004). This same process could be applied to the faculty advisor-advisee relationship.

The foundation of the theory of Interpersonal Relations is based on the nurse-patient interpersonal relationship. The theory includes a series of four overlapping phases in the relationship between the patient and nurse: orientation, identification, exploitation, and resolution (Peplau, 1991). In addition, Peplau identified six practice roles nurses assume: stranger, teacher, resource person, counselor, surrogate, and leader. The phases and practices roles are applicable to the relationship between the faculty advisor and advisee. For instance, the functions of the faculty advisor are similar with those of the nurse, and include role model, teacher, counselor, and resource person (Harrison, 2009a; Peplau, 1991). The words, *faculty advisor* and *nurse*, as well as *advisee* and *patient* could be easily interchangeable. These phases and roles will be discussed next.

Phases of interpersonal relationships. Peplau's theory (1991, 1997) is heavily based on the relationship between the nurse and patient. Peplau defined the nurse-patient relationship as four phases: orientation, identification, exploitation, and resolution (Peterson, 2004). Each phase

is experienced in every nursing situation over time, although they overlap, at times, the phases also are comprised of specific characteristics.

Orientation phase. The orientation phase starts when the nurse and patient are introduced and come to know and trust each other (Peplau, 1997). This phase can last minutes to months. During this time, the nurse will utilize his or her assessment skills to identify the patient's needs. The nurse needs to deeply listen to the patient to gather information; this is part of developing a trusting relationship. This is especially important during admission where high anxiety and stress is occurring from being in a new environment. During this time, the nurse helps orient the patient to the problem and healthcare situation. The patient then begins to identify and understand the meaning of the situation.

This phase is similar to the advising process when the advisor listens to the advisee share in his or her career goals and needs. During the initial meeting, the advisor gets to know the advisee as part of the process of developing a trusting relationship. Starting college or a new program can be anxiety inducing; therefore, building a trusting relationship is foundational. During this phase, the student begins to understand his or her academic needs.

Identification phase. The identification phase begins after the patient starts to understand the problem or situation (Peterson, 2004). During this phase, the patient will react to the situation in one of three ways based off past relationships: participation, isolation, or helplessness. A patient who feels inspired or strong will participate in his or her situation with optimism and determination (Peterson, 2004). A patient with negative past relationship experiences may isolate himself or herself or try to be independent of the nurse. However, other patients may overly rely on the nurse and want all their needs met by others. The nurse, during this phase, promotes independence of the patient in managing his or her problems. This phase is similar to the

advising process as the advisor is encouraging the advisee to become independent and works with the advisee on setting goals.

Exploitation phase. In the third phase, exploitation, the patient understands the full benefits of the services being offered and is fully engaged in these services (Peterson, 2004). The patient utilizes the nurse as a resource and support person to meet goals. The patient begins to identify new goals through the help of the nurse. An example of this in advising is when the advisee utilizes the knowledge he or she has gained through college and the advisor, to plan post-graduation goals such as identifying where he or she wants to work. This phase is intertwined with the identification phase and moves to the final phase, resolution.

Resolution phase. In the resolution phase, the patient becomes less reliant on the nurse and more independent on meeting goals. During this phase, the nurse-patient relationship is terminated as the patient can now function independently and has met past goals and can create new goals. This stage is met because the nurse-patient relationship is focused on the patient's needs, recognizing cues and responding appropriately to the patient's aspiration to grow, and providing the patient with the independence and the responsibility needed to attain new goals (Peterson, 2004). An example of the resolution phase in advising is when the student is ready to graduate and has found a job.

Roles of nursing. Peplau (1991, 1997) identified six nursing roles that occur during each phase of the nurse-patient relationship: stranger, resource person, teacher, counselor, surrogate, and leader (Peterson, 2004). Similar to the phases of the nurse-relationship, the roles overlap and are intertwined. To better understand the correlation of Peplau's Theory of Interpersonal Relations and the role of the academic advisor, the roles identified by Peplau will be discussed next.

Stranger role. The stranger role applies to the initial meeting between the nurse and the patient. During this time, both parties do not know each other. The nurse's priorities are to create a trusting environment and be respectful to the patient's thoughts and experiences. This role happens during the orientation phase in the nurse-patient relationship (Peterson, 2004). Just like the nurse, the advisor can also approach the advisee with courtesy and create an accepting environment that builds trust with the advisee. During the initial meeting, the advisor will introduce himself or herself and get to know the student, as well.

Teacher role. In the teacher role, the nurse shares knowledge with the patient that he or she needs to understand in order to address a situation or problem (Masters, 2015). This role coincides with the identification and exploitation phases. During the orientation phase, the nurse assesses the patient by carefully listening to the patient. Once the nurse has gathered the assessment, the nurse can create a 'lesson plan' that is individualized to the patient. Similarly, the advisor assesses the advisee by listening to the advisee needs and creates an academic plan for the student.

Resource person role. The resource role starts when the nurse provides the patient with specific information about the problem. Nurses are resources for information and make recommendations to patients related to the situation in order to help solve the problem (Peplau, 1997). During this role, the nurse provides additional support for the patient (Davis, 2016). The nurse provides answers to the patient's questions. This is similar as the advisor provides resources that are available on campus to assist in meeting the advisee's goals.

Counselor role. In the counselor role, the nurse aids the patient to understand the meaning of the challenges related to the problem and offers guidance so the patient can make good decisions and changes (Peterson, 2004). The nurse encourages the patient to share his or

her thoughts and feelings related to the problem by communicating in a nonjudgmental way. This is important to decrease the patient's anxiety and fears. Anxiety can cause the patient to become dependent or aggressive. This role is as important with a nursing student advisee as well, as high anxiety has been linked to poor clinical performance (Cheung & Au, 2011). In this role, the advisor listens carefully to the advisee's concerns and challenges and helps guide him or her through the process.

Surrogate role. A surrogate is "one appointed to act in place of another" (Surrogate, 2019). As the role of the surrogate, the nurse's responsibility is to promote independence through developing the patient's problem-solving skills (Davis, 2016). The nurse advocates for the patient when the patient tries to become more independent. The faculty advisor, or surrogate, assists the advisee to become more independent by providing appropriate ways to problem-solve when issues or concerns arise.

Leader role. The leader role requires the nurse to assist the patient to take full responsibility of his or her own plan of care and meeting goals (Peterson, 2004). The nurse assists the patient to actively participate in problem solving to meet and plan new goals. Likewise, the responsibility of the faculty advisor is to support the advisee with actively participate in choosing his or her career path and courses along with problem solving when issues arise.

Summary of Peplau's Theory of Interpersonal Relations. Originally, Peplau's theory was developed for mental health nursing (1991). As its primary focus on interpersonal relationships, it has evolved into a theory that can be utilized beyond nursing care and in all professions (1997). There are many similarities between the nurse and patient relationship and that of the advisor and advisee. The words, *faculty advisor* and *nurse*, as well as *nursing student*

and *patient* could be easily interchangeable. Identifying challenges that faculty advisors may have in these roles or phases could help in maintaining a positive and healthy relationship with undergraduate baccalaureate nursing students.

Organizational Advising Models

Organizational advising models for academic advising are the design or structures in which advising is delivered to students (Pardee, 2000). Traditionally, academic advising has been categorized in three groups: a) Centralized, b) Decentralized, and c) Shared (Hutson, 2013; Pardee, 2000; Pardee, 2004). The categories date back to 1877 at John Hopkins University (Hutson, 2013). These categories should not be confused with the person who delivers the advising services. It is important to note that the ACT's reported titled, *Sixth National Survey of Academic Advising* found that 99% of higher education institutions utilize faculty to advise to some degree (Habley & McClanahan, 2004). In addition, it should be noted that there is no one type or a specific model of advising correct for all institutions, rather it depends on the institution's needs and resources (Pardee, 2004). In fact, Champlin, Purfeerst, & Engelhart (2015) suggest that institutions should choose a model that best meets the needs of their students and institution. Furthermore, the NACADA Academic Survey in 2000 made comparisons of the advisors' level of satisfaction between responses that favored centralized advising offices and from those that favored decentralized offices (as cited in Lynch, 2002). The results indicated there were no significant differences in the satisfaction between the two. A brief overview of each model and subcategories will be discussed.

Centralized structure. A centralized structure consists of advising from a central administrative unit in which faculty are not involved and is one of the models used most frequently (Hutson, 2013; Shellenbarger & Hoffman, 2016). This model is typically seen in an

advising center with a director and advising staff housed in one location. Advising is provided to students from the beginning of enrollment through graduation. Pardee (2000) list many advantages of this model from trained staff who provide consistent quality of advising to lack of duplication of services. A disadvantage of this structure is it is more expensive to staff compared to having faculty advise the students. Furthermore, when there is a growth in student enrollment, the advising load may become challenging and unmanageable. As a result, the effectiveness of advising may decrease resulting in negative outcomes such as poor student satisfaction (Walker, Zelin, Behrman, & Strnad, 2017). Of all the institutions surveyed, 28% utilize this model; it is mostly used in two-year public colleges (Carlstrom, 2011; Pardee, 2004).

Decentralized structure. A decentralized structure entails advising services provided by faculty and/or staff in their specific academic departments (Pardee, 2000). Two organizational models represent this type of structure: the faculty-only model and the satellite model.

Faculty-only model. The faculty-only model is the most common type of decentralized model used today with about 17% of all institutions utilizing it (Carlstrom, 2011). However, this is down from 28% according to the *Sixth National Survey on Academic Advising* from data collected in 2003 (Pardee, 2004). The faculty-only model is applied more by private institutions with 36% of private two-year colleges and 51% of private four-year institutions using this model (Carlstrom, 2011; Pardee, 2004). It requires faculty in their respective academic departments to complete all student advising (Hutson, 2013; Pardee, 2000). Thus, students with majors are assigned to a faculty member in that specialty. For example, a student who declares a nursing major will be assigned to a nursing faculty for all of his or her advising. The major benefit for this model is its cost effectiveness. However, one disadvantages of this model may increase the workload of the faculty if advising is not calculated into the workload.

Satellite model. When using the satellite model, advising is delivered by central offices in each academic subdivision (Hutson, 2013; Pardee, 2000). For example, each satellite would be in the individual colleges within a larger institutions or university. However, Pardee (2000) identified multiple disadvantages with this model, which include cost and space limitations. In addition, undecided students can experience difficulties when changing from one advising center to the next when changing majors. These students may get confused as to who their advisor is when changing their majors throughout their college career. Advantages of this model would be the declared student would be advised by an individual that is knowledgeable about their discipline of choice.

Shared structures. A shared structure consists of advising services that are shared between a central administrative unit and faculty in a specific academic department. There are four models within the shared structure: a) supplementary model, b) split model, c) dual model, and d) total intake model. The shared structure is one of the most commonly utilized structures among four-year private institutions out of all the models (Pardee, 2004). The two most common models utilized overall in higher education are the supplementary and split models.

Supplementary model. The supplementary model is a popular model in that the student has a department advisor in addition to the advising office that is utilized as a resource for policies and training purposes. This model is utilized at 14% of all higher education institutions (Carlstrom, n.d.; Hutson, 2013; Pardee, 2004). For example, the faculty advisor will assist the student with program requirements and information. However, the advising office may process a student's petition or evaluate transfer credit. This type of model is commonly seen in both two-year and four-year private institutions (Pardee, 2004). Advantages of this model include the

student may be provided with better resources. However, one disadvantage is the student may get confused with whom to go to for specific items.

Split model. The split model is found at 39% of all institutions and involves the initial advising being divided between department advisors and a central advising office (Carlstrom, 2011; Hutson, 2013; Pardee, 2000). For instance, students who are undecided will be assigned to the central advising office and those with declared majors will be assigned to a department faculty based off their selected major. When undecided students finally declare a major, they will be reassigned to a departmental advisor. This model can provide high-risk students, such as undecided students, the extra support they need to improve their chances for academic success. The split model is commonly seen in four-year public institutions with almost half of these institutions using it (Carlstrom, 2011; Pardee, 2004). This model provides more of an advantage to those who are undecided. A disadvantage of this model would be the advisor for an undecided student would not be able to provide specific information on certain majors or disciplines.

Dual model. The dual model involves the student having two advisors: one department advisor for the major information and a staff member in the central advising office for general education requirements, policies, and petitions (Pardee, 2000). The major disadvantage of this model is that students may get easily confused. The student may not know which advisor to go to for specific things. In addition, a lack of communication between the advisor and advisee can create confusion for the student and result in decrease student satisfaction. Advantages to this model include the student would have two resources to assist him or her with being successful.

Total intake model. The total intake model stipulates that all students be initially advised through a central advising unit. The NACADA National Survey of 2011 identified that 16% of institutions are utilizing this model (Carlstrom, 2011). Once a student meets specific criteria,

such as admission to the nursing program, he or she will be assigned to a department advisor. This is similar to the dual model, although the student only has one advisor at a time and only transitions when he or she meet specific criteria. An advantage to this model includes that all students are advised equally and receive the same information. The major disadvantage would be students who have declared their major would not get discipline specific guidance towards their declared major.

Academic Advising Outcomes

Several researchers have indicated that effective academic advising is an integral component in student success, retention, and satisfaction (Burt, Young-Jones, Yadon, & Carr, 2013; Fosnacht, McCormick, Nailos, & Ribera, 2017; Harrell & Reglin, 2018; McArthur, 2005; Mooring, 2016; Shelton, 2003; Swecker, Fifolt, & Searby, 2013; Williamson et al., 2014; Young-Jones et al., 2013). Importantly, if academic advising is done correctly, it could lead to multiple benefits to the institution. In 1975, research started to uncover new information about why students in college were succeeding (McGillin, 2000).

Vincent Tinto, a pioneer researcher and renowned leader in student retention and persistence, created his 1975 model of student persistence. Currently, Tinto's model is considered the founding framework in student retention and persistence that has evolved over time (French, 2017). His work has been utilized as a framework for many researchers in academic advising (Dillon & Fisher, 2000; Harrell & Reglin, 2018; Karr-Lilienthal et al., 2013; Mooring, 2016; Padilla & Pavel, 1994; Shelton, 2003; Skordoulis & Naqavi, 2010). Tinto (1987) identified three major reasons of student attrition: academic difficulties, the inability of individuals to resolve their educational and occupational goals, and their failure to become or stay involved in the academic and social life of the institution. Effective retention programs

incorporate Tinto's theory by emphasizing the integration of students to the academic and social aspects of the institution, commitment to the students, commitment to education, and clarity of educational mission.

Other than faculty, academic advisors may be the only connection students have with the institution resulting in a lot of pressure on the advisor. Therefore, academic advisors play a critical role to the institution as academic advising can affect admission, progression, and graduation of students. As a result, educational administration should seek to better understand the factors of effective academic advising as a means to increase student success, satisfaction, and retention (Burt et al., 2013).

Student success and satisfaction. Student success is vital for accreditation, retention of students, and maintaining or growing student admissions (Commission on Collegiate Nursing Education, 2018). Student success can be measured by graduation rates, grade point average (GPA), and student retention rates (Anft, 2018). Many institutions also utilize student surveys or questionnaires to assess academic advising outcomes such as student satisfaction surveys (Powers, Carlstrom, & Hughey, 2014). As more students, who are identified as "high risk" or "at-risk" are admitted to college, institutions need to implement strategies to help them become successful (Hopkins, 2008). A high-risk or at-risk student is a student who is considered to have a higher probability to fail or be unsuccessful at school (Great Schools Partnership, 2014). Additionally, nursing schools have a high attrition rate causing a priority action to retain students through graduation (Mooring, 2016). Institutions need to realize the importance of restructuring their advising programs as a means for improving their students' success (Anft, 2018).

For instance, Al-Hussami, Saleh, Hayajneh, Abdalkader, & Mahadeen (2011) studied a group of undergraduate nursing students to identify if there was a difference in GPAs between

students who had high student-faculty interaction versus those who had low student-faculty interaction outside of the classroom. The findings indicated student-faculty interactions have a significant positive influence on the students' grade point average. In addition, students would seek out opportunities for guidance if faculty were approachable, caring, and respectful (Al-Hussami et al., 2011).

Similarly, another national survey examined the frequency with which students met with their academic advisor and the students' course grades (Fosnacht et al., 2017). The researchers found that students who primarily received B grades met with their advisors slightly less than those students who primarily received A grades. Comparatively, Williamson et al. (2014) compared success rates along with course grades of students who participated in a faculty advising sessions. Students who participated in at least one faculty advising session had a success rate of 70%, compared to a 30% success rate for those who did not attend any faculty advising sessions. Overall, the more faculty interactions with students, the greater positive outcomes the students experienced.

Tinto (1987) found that effective retention programs were successful when there was emphasis on connecting with students. Academic advising encourages students to be more engaged with faculty and the institutions. In addition, an academic advisor may be the first person the student interacts with on campus (Kuh, 2006). Therefore, advisors have a crucial role in creating a positive image of the institution for students with each interaction. Advisors also have a role in making the student feel recognized and appreciated (Mooring, 2016).

For example, a study of RN-to-BSN students in a small Christian university identified that positive interactions with students and advisors were more likely to persist to graduation (Boylston & Jackson, 2008). The researchers utilized the Noel-Levitz Adult Student Priorities

Survey (ASPS) and semi-structure interviews to assess both satisfaction with and importance of academic advising effectiveness. The findings suggested that academic advising was identified as a high importance and rating in satisfaction among students in meeting their needs. The Noel-Levitz ASPS™ helps institutions identify what is important to their adult students and their level of satisfaction (Ruffalo Noel Levitz, 2019).

Additionally, strong student-faculty relationships may increase student success as faculty increase their role in advising. For instance, Ingraham, Davidson, & Yonge (2018) conducted a review of literature to assess student-faculty relationships and the impact of student success in nursing education. The literature supported that student-faculty relationships were associated with academic success. It was noted that nurse educators must ensure they are modeling the behaviors of a professional nurse with their relationships with students. In addition, nurse educators must create and maintain a caring and civil environment that is conducive for learning. One study found nursing students were more likely to withdraw from nursing programs if their academic endeavors were not supported by faculty (McGregor, 2005).

Harrell & Reglin (2018) also noted the need for ongoing, personal contact of students through a faculty-advising program. The authors studied 210 nursing students and identified that students were satisfied with the advising in a faculty-advising program. The findings suggested that good faculty advising with strong student-advisor contact is an essential characteristic of a successful student college experience. Furthermore, first-generation students have been identified as being “at-risk” of failing or dropping out of college (Falcon, 2015). Swecker et al. (2013) investigated the relationship between the number of meetings with academic advisors and the retention of first-generation college students. Interestingly, the number of advisor meetings was a significant indicator of student retention; every meeting with an academic advisor

increased the odds that the student would be retained by 13% (Swecker et al., 2013). Similarly, meeting with an advisor positively contributed to the student's responsibility, self-efficacy, study skills, and perceived support (Young-Jones et al., 2013). Therefore, it is vital that nursing administration recognize the importance of the quality of interactions advisors have with students and the time and energy it takes faculty to provide quality advising.

Overall, student-advising relationships are imperative to an effective advising program. Strong relationships between students and their advisor can increase student success by increasing the overall satisfaction of the student's experience on campus and increasing their GPA. It takes a great deal of time for faculty to create and build these strong relationships. Therefore, administrators need to be aware of the impact faculty advising has on the advisors as well as the time and energy it takes to retain students.

Student retention. The issue of high attrition rates in nursing programs has brought much attention to identifying strategies to improve retention and persistence of nursing students. Student retention reflects the persistence and resilience of a student, which also assists institutions with determining how the students successfully progress and complete their courses. In other words, student retention is connected to student success and satisfaction. High student retention rates have benefits for institutions such as financial benefit and the capability to reinvest in student success programs (Sousa, 2015).

Mooring (2016) conducted a review of literature and identified that aggressive advising should be implemented into nursing programs. Academic advisors help identify areas of weakness, address personal stressors, and develop meaningful relationships that have a tremendous impact on student success and retention. Numerous researchers have also identified that academic advising serves a vital role in student retention (Harrell & Reglin, 2018; McArthur,

2005; Mooring, 2016; Myers & Dyer, 2005a; Shelton, 2003; Swecker et al., 2013). In fact, poor academic advising has been reported as a major cause of students leaving college prior to graduation (McGillin, 2000; Peterson-Graziose, Bryer, & Nikolaidou, 2016).

In a national study of 222 faculty and departmental administrators in agriculture colleges, 98.6% of respondents indicated advising plays an important role in retaining students (Myers & Dyer, 2005a). Likewise, McArthur (2005) evaluated if increased interactions between faculty and students, in the form of academic advising, affected student retention in the Arts and Humanities division. The findings indicated a 15% increase over the average retention rates. Additionally, Peterson-Graziose et al. (2016) evaluated RN-to-BSN students and the variables that influence retention. The researchers found that faculty advising was one of the highest variables associated with student retention. Therefore, quality academic advising is essential not only to improve student retention but also institutional sustainability.

Harrell & Reglin (2018) also studied the effectiveness of a nursing school faculty-advising program in a community college. They identified high retention rates each semester during the implementation of three years of an advising program. Students were strongly satisfied with how their advisors provided suggestions on managing time better and improving studying techniques. Thus, academic advisors can greatly influence students' knowledge to change behaviors in order to succeed and persist to graduation. Through advising, increased contact with the student can lead to improved learning, and therefore improve student retention. In addition, academic advisors are key to connecting students with support services on campus to provide students with resources to be successful (Harrell & Reglin, 2018).

Advisee Perspectives

Understanding the advisee perspectives can assist institutions and academic advisors with

designing and modifying their academic advising program to meet the unique needs of their students. A considerable amount of research has been conducted from the student perspective in regards to academic advising (Al-Hussami et al, 2011; Amador & Amador, 2014; Bleeker, Bleeker, & Bleeker, 2010; Boylston & Jackson, 2008; Burt et al., 2013; Habley, 1994; Harrison, 2009b; Padilla & Pavel, 1994; Sheldon, Garton, Orr, & Smith, 2018; Shelton, 2003; Walker et al., 2017; Whitsett et al., 2014; Young-Jones et al., 2013). Students' evaluations of the roles and responsibilities of an advisor have been used to generate the main characteristics of a good advisor. Interestingly, Habley (1994) noted that students overall have a positive viewpoint of advisors. The literature also supports that students appreciate their relationships with their advisors and how the relationships correlate with the students' satisfaction of their college experiences.

Role and responsibility of an advisor. The role of academic advising is multifaceted as faculty advisors are expected to do a multitude of tasks and responsibilities (Allen & Smith, 2008a; Aiken-Wisniewski, Johnson, Larson, & Barkemeyer, 2015; Harrison, 2009b). Historically, academic advising has focused on course scheduling and ensuring students meet graduation requirements (Anft, 2018; Harrison, 2009b; Horstmeier, 2006; Padilla & Pavel, 1994). Even today, students most frequently report that the main responsibility of advisors should be they are knowledgeable regarding graduation and course requirements (Allen & Smith, 2008a; Dillion & Fisher, 2000; Harrison, 2009b; Sheldon et al., 2018; Whitsett et al., 2014). Unfortunately, a study by Walker et al. (2017) found 11 students reported that their advisors did not schedule their courses appropriately and they did not provide the students with correct information regarding degree completion led to the students falling behind with their progression and were not able to graduate on time.

In addition, faculty advisors need to be knowledgeable on the resources that are available to students (Allen & Smith, 2008a; Sheldon et al., 2018; Shellenbarger & Hoffman, 2016). For instance, Harrell & Reglin (2018) evaluated a faculty-advising program in a School of Nursing at a community college related to students' satisfaction and retention. A sample of 210 nursing students completed the Academic Advising Inventory (NSAAI) to examine student retention. They identified nursing faculty advisors had a significant role in establishing connections with students to other support services on campus which aided in their success. However, Walker et al. (2017) identified students who reported their advisors did not adequately explain all the available options or opportunities on campus. When academic advisors provide inaccurate information or the lack thereof, the results can be detrimental to the student mentally, financially, and academically (White, 2015).

Academic advising needs to go beyond the typical responsibilities of course and major selection. Advisors are expected to take on these responsibilities, but also handle personal and psychological issues, financial concerns, and extracurricular opportunities (Anft, 2018). For example, Chan (2016) explored first year college students' perspectives of their academic advisor. Findings suggest advisors must have the ability to handle personal and psychological issues, as well as provide support according to each student's individual situation. Similarly, Whitsett et al. (2014) found students ranked 'discussing personal concerns or problems' as the most important role of the advisor. Students reported advisors should be able to help students with personal growth by providing emotional care as well as promoting academic growth.

Furthermore, Boylston & Jackson (2008) surveyed 53 RN-to-BSN students at a small Christian university utilizing the Noel-Levitz Adult Student Priorities Survey in regards to student satisfaction. The loss of financial aid or family crisis was a reason for withdrawal and

would be the only reason for not completing the BSN program for most students. Problems like these would need to be addressed with the advisor to identify ways to retain the student. Students also wanted advising that included information on activities outside of class such as employment or participation in clubs (Allen & Smith, 2008a). Advisors also need to understand other aspects of student lives. For instance, Parks, Walker, & Smith (2015) examined how academic advisors can help veteran students through college. Veteran students believe it is important that academic advisors have knowledge and understanding of military experiences along with the other roles and responsibilities.

Characteristics of an advisor. Students believe certain characteristics should be possessed by advisors to provide a safe and supportive environment. The literature supports that advisors should be approachable, caring, nurturing, and accessible along with being knowledgeable (Al-Hussami et al., 2011; Harrison, 2009b; Ingraham et al., 2018; Sheldon et al., 2018; Shellenbarger & Hoffman, 2016; Walker et al., 2017). In nursing, these characteristics are commonly utilized to define a nurse. This is similar with Peplau's theory during the orientation phase when the nurse needs to create a trusting relationship by being non-judgmental and approachable (Peplau, 1997). Nursing advisors must model the behaviors that represent a nurse when interacting with advisees. In fact, students are more likely to seek contact with advisors outside of the classroom to talk about their courses and academic performance when they perceive advisors to be approachable, caring, and respectful (Al-Hussami et al., 2011). Overall, students have a generally positive view of their advisor's traits and characteristics. (Habley, 1994).

Student-advisor relationship. The student-advisor relationship is vital to academic advising. Crookston (1972) and O'Banion (1972) both defined academic advising based on a

student-advisor relationship. Student-advisor interactions were associated with improved student success and retention (Crookston, 1972; O'Banion, 1972). The findings suggest that institutions must create an environment for students to increase faculty-student interactions (Al-Hussami et al., 2011). In fact, Bleeker et al. (2010) identified that the student-advisor relationship became so close that 88% of students valued receiving parental-like advice from their advisor.

As a result, nursing programs have developed systems of communication to increase interactions and establish relationships with students through consistent emails, voicemails, and online discussions including providing home telephone numbers in case of emergencies (Boylston & Jackson, 2008). One study identified students who appreciated when faculty were easy to talk to and responded quickly to their emails (Harrison, 2009b). In addition, maintaining an open line of communication and being respectful of their decisions was rated high with student satisfaction and the student-advisor relationship (Sheldon et al., 2018). Furthermore, nursing students who reported greater perceived support were more likely to persist through school (Shelton, 2003). Therefore, students who felt that faculty cared for them and wanted them to succeed were inspired to persist.

Faculty/Advisor Perspectives

Understanding the advisor's perspective is important to assist institutions and administrators in designing and modifying academic advising programs. However, it is also important to provide better support for advisors as a way to improve student outcomes. Gordan & Habley (2000) identified the need for further advising research on advisors, not just on the student perspective.

O'Banion (2009) proposed that faculty are in an ideal position to serve as academic advisors because they are the most knowledgeable about the academic programs and courses,

and they have regular interactions with students through teaching. From the literature, faculty and advisor perspectives have provided information on the roles, responsibilities, characteristics, and challenges they have faced to better understand the profession of an advisor, as well as how to better support and educate them in their role. As with students, evaluating what they believe the role and responsibilities of advisors are, faculty have also evaluated what they believe an effective advisor should do.

Role and responsibility. The role and responsibility of an academic advisor is multifaceted (Anft, 2018; Hutson, 2013; Lynch & Stucky, 2002; Wolfe, Retallick, & Martin, 2009). Remarkably, in the 2011 National Academic Advising Association (NACADA) survey, 21 job activities were listed to better understand the job responsibilities of academic advisors (Carlstrom, 2011). Advising should go beyond being knowledgeable and assisting students to choose majors and courses. Advising students' other needs such as financial concerns, personal issues, and opportunities outside of class are essential, as well (Anft, 2018; Dillon & Fisher, 2000; Horstmeier, 2006; Lynch & Stucky, 2002; O'Connor, 2017; White, 2013; Whitsett et al., 2014). Interestingly, Whitsett et al. (2014) identified that faculty advisors felt that the most important tasks were to assist their advisees with selecting the right degrees and courses. Furthermore, in the 2011 NACADA national survey it was identified up to 98% of advisors reported part of their responsibility involved course selection and registration (Carlstrom, 2011). However, Horstmeier (2006) reported only 69% of faculty advisors felt competent with counseling students with personal matters and felt least prepared in assisting students with financial problems. Similarly, Skordoulis & Naquavi (2010) identified 58% of faculty advisors were comfortable communicating with students one-on-one, although only 28% felt comfortable counseling students on personal matters. Furthermore, Karr-Lilienthal et al. (2013) identified

only 45% of faculty advisors were able to assist students with personal problems. Faculty should be trained more on how to address students' personal matters by being able to offer appropriate resources to the student.

Advisors have identified student interactions as a consistent responsibility, one of many roles and responsibilities they have, with others including teacher, mentor, coach, and being knowledgeable (Aiken-Wisniewski et al., 2015; Allen & Smith, 2008b; Barnes & Austin, 2009; Carlstrom, 2011; Harrison, 2009b; O'Connor, 2017; Titus & Ballou, 2013; White, 2015; Wolfe et al., 2009). Advising involves providing advice, support, and empowering students regarding their personal, academic, and professional growth (Wolfe et al., 2009). For instance, Menke, Stuck, & Ackerson (2018) examined the top competencies for entry-level academic advisors to provide a framework for professional development programs. Three surveys were administered to 57 advisors with five years or more experience in advising. They identified the top three competencies as interpersonal skills, communication and listening, and knowledge of the curriculum and resources available to students (Menke et al, 2018). Additionally, Barnes & Austin (2009) also examined the role and responsibilities of 25 doctoral faculty advisors by looking from the advisor's perspective through one-on-one in-depth interviews. Functions of the advisor included collaborating, mentoring, advocating, and disciplining. In nursing, faculty advisors believe another part of their role is to encourage students to continue their education and advance their degree in nursing (O'Neal, Zomorodi, & Wagner, 2015).

Characteristics. Advisors also have identified certain characteristics of an effective advisor along with the many roles and responsibilities. Barnes & Austin (2009) examined 25 faculty advisors and identified characteristics of the advising relationship and advisors' behaviors that included being friendly, professional, collegial, supportive, caring, honest, and

accessible. Similarly, Dillon & Fisher (2000) identified that faculty advisors believe students look for advisors who are caring, interested, and accessible. Faculty also believe they should be knowledgeable regarding course and degree requirements. For example, Harrison (2009a) identified that knowledge was the most frequent reported characteristics from nurse faculty advisors. In addition, Dillon & Fisher (2000) found that 77% of faculty advisors believed students look for advisors who have a clear understanding and knowledge of course and graduating requirements. Harrison (2009a) also identified that nursing faculty advisors should be good listeners, approachable, accessible, patient, honest, and empathize with students.

Challenges and barriers. Faculty advisors come with expertise in a subject matter and on teaching and instruction. Although, academic advising may be foreign to new faculty or even new advisors (Mooring, 2016). Gordan & Habley (2000) state tools must be provided to academic advisors as a core of every successful advising program. While advisors face many challenges, they still report personal satisfaction in assisting students (McGillin, Ortgies-Young, & Kem, 2010). The challenges and barriers to be discussed are the lack of training, time, and reward along with the challenge of promotion and tenure regarding advising.

Lack of training. Lack of knowledge regarding the advising role has been a major concern among advisors (Aiken-Wisniewski et al., 2015; Anft, 2018; Karr-Lilienthal et al., 2013; Mooring, 2016; Skordoulis & Naqavi, 2010; Whitfield & Hickerson, 2013).

O'Connor (2017) conducted a qualitative study to explore and understand the academic advising experience of full-time faculty at community colleges through interviews. The researcher identified that faculty advisors did not have any discussion or knowledge of advising responsibilities. In addition, O'Connor (2017) found that advising was not explained well to faculty. In fact, many studies have found a lack of advisor training (Horstmeier, 2006; Myers &

Dyer, 2005b; Skordoulis & Naqavi, 2010; Whitfield & Hickerson, 2013; Wolfe et al., 2009). For example, Myers & Dyer (2005b) indicated only 44% of faculty received training on how to advise students, although 91% reported their advising was adequate. In addition, Horstmeier (2006) found 64% of faculty advisors received no training on advising. Furthermore, Whitefield & Hickerson (2013) examined the preparation of new faculty members and found two-thirds of the participants reported their program did not prepare them for advising. However, McGillin et al. (2010) identified over 90% of faculty advisors indicated training was available at their institutions.

In a study conducted by Aiken-Wisniewski et al. (2015) advisors stated there needs to be some type of training that orients academic advisor into their role. Advisors have felt in order for advising to be effective, there needs to be education regarding the roles and responsibilities (O'Connor, 2017). In fact, Walter & Seyedian (2016) found the less training the advisor received, the more likely the student would seek another advisor. Therefore, advisors need training and professional development in order to provide effective advising to student. Actually, in a study by Waters (2002), faculty advisors requested they receive more workshops and training programs relating to advising. In addition, Waters (2002) suggested faculty who are new to advising should have an orientation or professional development offered to them.

Time commitment. With the growth in advising responsibilities, advisors have reported the challenge of the lack of time they have to advise students (Mooring, 2016). Nonetheless, faculty advisors are not expected to be advisors and teachers alone, but also conduct research, attend committee meetings, and provide service to the institution and community. In a study by O'Neal et al. (2015) revealed that 67% of nurse faculty advisors indicated that multiple demands on their time affected how much time they could spend on advising. Furthermore, Champlin et

al. (2015) identified advisors biggest challenge was finding time in an already busy schedule of both the faculty and student. Similarly, Karr-Lilienthal et al. (2013) found the most frustrating or dissatisfying part of advising was that advising took too much time or faculty were not recognized for the time spent on advising. In a study with 32 administrators representing 28 colleges, only 15% agreed their advisors had ample time to meet with students (Woods et al., 2016). If administrators are recognizing that time is a barrier, additional resources such as personnel appear to be needed.

Large student-advisor workloads create a challenge with spending adequate time with students (Horstmeier, 2006; McArthur, 2005). The development of the student-advisor relationship also takes time. Skordoulis & Naqavi (2010) reported that the average length of advising time was 15-30 minutes with a student twice a semester. Furthermore, faculty may experience difficulties with students which increase the time they may need to spend on advising. In a study by Dillon & Fisher (2000), 41% of advisors reported students not being prepared or being misinformed created difficulties with the advisor-advisee interactions. Similarly, Skordoulis & Naqavi (2010) identified faculty were frustrated when students did not show for appointments.

On the contrary, Lynch (2002) evaluated advisor satisfaction regarding workload and identified that faculty advisors reported high mean satisfaction ratings on advisee load and the institutional support from administration. In addition, a study by Skordoulis & Naqavi (2010) found that 95% of faculty advisors agreed that advising students was a time well spent. Based on the literature, effective advising takes time. In order for advising to be effective, institutions and administrators need to make advising a priority and allow more structured time for advising.

Promotion, tenure, and reward. Advisors also have a personal satisfaction seeing students succeed (Karr-Lilienthal et al., 2013). The intrinsic reward that advisors receive are sometimes enough to satisfy them to continue to ensure excellence in advising. However, extrinsic rewards warrant a place for the advisor to show the importance of academic advising as a component of the institution. Individuals should be rewarded for their hard work, effort, and time. As a result, Kerr (2000) identifies ways institutions can provide extrinsic awards such as considering tenure and promotion with advising.

Promotion in rank recognizes faculty and staff and ensures academic excellence typically in three areas that support student learning: teaching effectiveness, research, and service to the institutions and community (Rizvi, 2015). The American Association of University Professors (n.d.) defines tenure as “an indefinite appointment that can be terminated only for cause or under extraordinary circumstances such as financial exigency and program discontinuation.” Faculty advisors are faced with increased pressure to fulfill their teaching, research, and service obligations for promotion and tenure. However, their responsibilities of advising are not always included in criteria necessary for promotion and tenure (He & Hutson, 2017). For example, Karr-Lilienthal et al. (2013) examined faculty advisors’ perception on advising and 25% pointed out advising was not enough of a factor in promotion and tenure. Similarly, Drake (2008) identified only 24% of faculty advisors indicated advising was considered in promotion and tenure review. Furthermore, in a study by Myers & Dyer (2005a) only 36% of faculty and administrators indicated advising was valued in promotion and tenure. Therefore, based on the literature, advising may not be a priority for faculty advisors when no extrinsic reward is given. In addition, Dillon & Fisher (2000) suggest that advising duties should be assigned to those who want to advise, as these individuals will have more of an intrinsic award to do well.

Many advisors believe academic advising should be considered in promotion and tenure (Dillon & Fisher, 2000; Myers & Dyer, 2005a; Skordoulis & Naqavi, 2010). For example, Dillon & Fisher (2000) examined concerns that contributed to and detracted from successful advising. They found 91% of advisors reported advising should be considered for promotion and tenure due to the time commitment effective advising takes. In addition, advisors reported that good advising was not recognized by administration. Similarly, Myers & Dyers (2005a) indicated 91% of faculty and administrators believed advising should be part of promotion and tenure. On the contrary, Horstmeier (2006) identified 80% of faculty disagreed or strongly disagreed that student advising was a valued component of promotion and tenure. Overall, effective advising takes time and is not being recognized as part of the faculty role.

Summary

Academic advising has a pivotal role in student success, retention, and satisfaction. If done correctly positive outcomes can occur. Different organizational advising models can be utilized based on the institution's needs and mission. It is important to note that no one type is better than the other. However, most of the models involve faculty in some way or another.

Overall, both students and faculty report similar expectations of the role, responsibilities, and characteristics of an advisor. In addition, faculty advisors must incorporate advising in their already busy role of teaching, scholarship, and service to the institution for promotion and tenure. This can create many challenges that can decrease motivation for advisors to do a good job. As a new advisor, professional development and training should be provided to ensure effective advising is given to students. Academic administrators need to be aware of the many roles advisors have in assisting students and the time it takes to do an efficient job. Lastly,

advising must be recognized as an essential component to the institution and be considered during promotion and tenure.

CHAPTER III: METHODS AND PROCEDURES

This chapter presents the methods and procedures that were used in this study. In addition, the sample size, participant selection process, participant demographics, data collection procedures, and data analytical procedures will be discussed.

Research Design

This qualitative research study utilized a phenomenological design. Qualitative research is utilized to explore and understand the meaning individuals experience to a problem (Creswell & Creswell, 2018). A phenomenological study seeks to describe and explore the lived experiences of a phenomenon among individuals who have shared the same phenomenon (Creswell & Poth, 2018). Advisors play a pivotal role in positive student outcomes and students' development making effective advising a significant investment in students and the institutions they attend (Harrison, 2009a). Thus, utilizing a phenomenological design allows for the discovery of common experiences among faculty advisor who have shared the lived experiences of advising undergraduate BSN nursing students.

Face to face, semi-structure interviews were conducted to study the perception of faculty advisors regarding their experiences advising undergraduate BSN nursing students. Face-to-face interviews allowed the researcher to understand the participant's points of view, which led to describing the meaning of their experiences (Creswell & Poth, 2018). In the United States learning institutions with Bachelor of Science in Nursing program located in the Midwest were utilized for this study. This study was reviewed and approved by the Bryan College of Health Sciences' Institutional Review Board (IRB).

Population and Sample

Upon IRB approval, the researcher began recruiting participants. A purposive sample was required as specific knowledge and experience was warranted for this type of research.

Prospective participants were recruited by gaining access to the research sites through the approval of the appropriate Programs Deans or Directors. Faculty participation was sought by an email sent to each Program Dean or Director for the attainment of approval (see Appendix A). After attaining approval, recruitment directions (Appendix B) were sent to the same individuals, who were requested to share a copy of the Invitation to Participate Letter (Appendix C) the nursing faculty who meet the study's inclusion and exclusion criteria. The Invitation to Participate letter provided the purpose statement of the research study with a brief summary, location of the research, and participant selection inclusion/exclusion criteria. The researcher's contact information was included in this letter to provide a way of communication if there were further questions and if there was agreeance to participate in the study.

The inclusion criteria for this study were: 1) part-time or full-time nursing faculty 2) currently teaching in an undergraduate baccalaureate nursing program 3) has experience with advising undergraduate nursing students 4) has actively participated in advising for at least one academic year at current site 5) speaks English.

The exclusion criteria for this study were: 1) nursing faculty who hold any type of administrative role and teach and advise undergraduate nursing students 2) faculty advisors of Associate Degree Nursing (ADN) or Licensed Practical Nursing (LPN) pre-licensure nursing programs.

Creswell & Creswell (2018) suggests a sample size ranging from three to 10 for a phenomenology study. The sample goal, between all selected sites, for this study was 10

participants. Recruiting of participants was continued until goal was met and/or saturation was achieved. Saturation is met when new data no longer provides new information or ideas (Creswell & Poth, 2018). Creswell & Creswell (2018) identifies this as an adequate sample. An email reminder was sent to the Program Deans and Directors every two weeks when issues arose with attaining the appropriate number of participants. To aid in recruiting, participants were added in a drawing for a \$20.00 Visa Gift card that was randomly awarded to one participant.

Demographics

Participants in this study were required to be at least 19 years of age in order to participate. In Nebraska, the legal age of adulthood is considered to be 19 years of age or older. According to the Nebraska RN Survey Report in 2015, ages below 20 were not reported for Registered Nurses who work in the State of Nebraska (Nebraska Center for Nursing, n.d.). In addition, the National Council of State Boards of Nursing (2008) recommends nursing faculty in undergraduate programs have either a master's or doctoral degree in nursing. Nurses with a master's or doctoral degree are typically older than 19 years of age.

In 2019, National League for Nursing reported that 80.8% full-time nurse educators were white, non-Hispanic, 8.8% African American, 2.7% Asian, 0.4% American Indian, and 0.6% multiracial. Furthermore, in 2018, the Nebraska Center for Nursing reported in its 2017-2018 Biennial Report that 93.7% of nurses in Nebraska were white, followed by 2.3% Hispanic, 1.6% African American, and 1.2% Asian. In review of the accessible population's webpages, the anticipated ethnic background for this study was anticipated to be white, non-Hispanic with a possibility of a few Asian and/or African American participants.

Participant demographics were collected via a written demographic survey (Appendix D) following the participants' signing of the informed consent. The demographic survey was

estimated to take two minutes and the information gathered included age, gender, ethnicity, education level, years of teaching experience, and years of experience with advising undergraduate nursing students. The demographic variables provided data that described the sample to illustrate the sample's characteristics

Description of Setting

The research setting for this study consisted of three different institutions that had a Bachelor of Science in Nursing program located in the Midwestern region of the United States. The first research site, Eastern College (pseudonym), is a Christian institution of higher learning offering over 34 majors. In 2018, total enrollment was 1,168 students with 795 full-time undergraduate students. The student-to-faculty ratio was 11:1 with 71 full-time faculty (National Center for Education Statistics, n.d.). The second research site, Central University (pseudonym), is a Christian institution of higher learning offering over 106 majors, minors, and pre-professional programs. In 2017, total enrollment was 2,064 students with 1,779 undergraduate students. The student-to faculty ratio was 13:1 with 113 full-time faculty (National Center for Education Statistics, n.d.). The third research site, Colgate University (pseudonym), is a public university offering over 24 health programs. In 2017, total enrollment was 3,908 with 860 undergraduate students and 1,231 full-time faculty (National Center for Education Statistics, n.d.).

Interview Protocol

An interview protocol (Appendix E) adapted from an example prepared by Creswell & Poth (2018), was used to guide the collection of data. The tool allowed the researcher to make handwritten notes in relationship to the environment and served as a backup in the case recording equipment failed. It included five open-ended questions that provided the researcher a document

to promote consistent data collection and to stay focused on the central phenomenon of the study. Creswell & Poth (2018) recommends the total number of questions should be five to seven. The interview protocol allowed for consistency yet provided flexibility to further probe for clarification and expansion on each participant's responses.

Data Collection Procedures

Prior to collecting the participant's personal information and conducting the face-to-face interview, the PI reviewed and signed the consent form with the participant. The interview process did not start until the participant had provided consent to participate in the study by signing the document. During this time, another screening to ensure the participant met the inclusion criteria was conducted. Prior to the interview, a short one to two-minute demographic survey (Appendix D) was given to the participant to complete. All personal information was kept on a spreadsheet that was saved to an encrypted flash drive (Appendix H). Data were collected from individual interviews utilizing a semi-structured, open-ended interview protocol (see Appendix E). This allowed the same questions to be asked during each interview, yet allowed probing questions to be used for clarification and to expand upon a participant's response. Each interview lasted approximately 20 minutes. All interviews were audio recorded and transcribed verbatim. All audio recordings were sent to an experienced and certified transcriptionist to be transcribed. A written agreement to maintain participants' confidentiality was signed by the transcriptionist to protect the confidentiality of each participant (Appendix G). Handwritten notes were kept directly onto the interview protocol form to gather data in the event that backup recording equipment failed. The audio recorders and handwritten data were transported to the researcher's locked office using a locked box after each interview. The audio recorder and data were stored in a locked drawer, in the researcher's locked office. The audio recordings were then

transferred onto an encrypted flash drive. All audio files on the recorder were deleted once the information had been transferred. The audio files and transcribed data were kept on an encrypted flash and viewed on a password protected computer. To protect the confidentiality of each participant, pseudonyms were given. A “master list” of participants with their pseudonyms were kept separately from the data in another effort to protect the participants’ confidentiality.

Analytical Procedures

Once the interviews had been transcribed, data analysis began and were analyzed using Colaizzi’s (1978) method of data analysis. Transcripts were read and reread several times to acquire a general feeling for the experience of advising undergraduate baccalaureate nursing students. Significant statements were then extracted to generate information relating directly to the phenomenon followed by formulating meanings to describe participant experiences. Next, the researcher identified emerging themes and categorize them in clusters in order to identify experiences common to all participants. This process was followed by an exhaustive description of the phenomenon experienced.

After the researcher read the transcripts, coded the participants’ responses in order to analyzes the themes, the researcher contacted each participant by email to set up a phone conversation to follow-up with their individual analysis and validate the data via member checking. This process was done in order to determine if the data accurately described the participants’ experiences and to verify the preliminary findings (Creswell & Poth, 2018). Member checking was conducted by sharing the individualized preliminary analyses of the initial themes, including the supportive direct quotes, with each participant. This took the participant approximately 10-15 minutes to complete. Participants were asked if the exhaustive descriptions

accurately described their experience and if there was anything additional they would like to add. Lastly, any changes based on the participants' feedback were incorporated.

To further validate the findings, the researcher disclosed any biases, values, and experiences by bracketing. This aided in removing the researcher's prior experiences and influences related to the challenges of advising undergraduate baccalaureate nursing students. Another measure of quality used was peer review. The researcher had an experienced peer, the chair to this dissertation, review the data and research process. This ensured the researcher kept honest as well as asked in depth questions about methods, meanings, and interpretations (Creswell & Poth, 2018). Furthermore, the researcher validated evidence through triangulation of multiple data sources. Creswell & Poth (2018) state this process involves corroborating evidence from multiple and different sources to clarify a theme. The researcher utilized different sources of data to identify evidence to document a code or theme. In addition, the researcher developed and shared the initial codebook with the dissertation committee chair to assist with recognizing consistency with the coding process.

Summary

Chapter Three identified the methodology that was utilized to examine the study's two research questions. The methodology of this study was a qualitative approach and used a phenomenological design. A purposeful sample was used to select participants. Data were collected using semi-structured interviews. Colaizzi's (1978) method of data analysis was utilized to analyze the data. Ethical considerations were carried out with all data secured and protected maintain the participants' confidentiality. The results of the data are detailed in Chapter Four.

CHAPTER IV: RESULTS

Introduction

This chapter will discuss the summary of the thematic analysis and the findings for each research questions that was posed. The findings are organized by each research question and the major themes that emerged. The data analysis is discussed in relationship to each of the research questions. Four major themes emerged for the perceived challenges faculty advisors encountered, and they include workload, lack of training, lack of student accountability, and the student-advisor relationship. Three major themes emerged for the effects challenges of advising had on the faculty advisors, and they include sense of emergency, lack of purpose as an advisor, and stress and anxiety.

Data Analysis

Data analysis and how to represent the data is a complex process (Creswell & Poth, 2018). The researcher must organize the data and take it apart like peeling back the layers of an onion then interpret and synthesize the information (Creswell & Creswell, 2018). This study analyzed the data using Colaizzi's (1978) method of data analysis. First, all interviews were professionally transcribed. The transcripts were then read and reread several times individually to acquire a general feeling for the lived experience of advising undergraduate baccalaureate nursing students. Next, significant statements were extracted to generate information related to the phenomenon followed by formulating meanings or codes to describe the participants' experiences. The researcher highlighted significant statements using different colors to delineate the meanings and facilitate the emerging themes within each individual transcript. The process of highlighting and utilizing direct quotes from the participants provided an exhaustive description of the phenomenon experienced. The number of participants and how many times certain code

words were mentioned helped develop the themes. Table 1 helps delineate how many participants, how many times the themes were mentioned during the interview process, and code words used to develop themes. The researcher shared all data analysis documents with the dissertation committee chair for the purpose of reviewing the coded data and to provide verification of the categories and selected themes. This ensured the researcher's documentary evidence and to assess consistency of and rigor with the analysis process.

After the researcher analyzed and confirmed the themes with the dissertation committee chair, the researcher contacted each participant by email to set up a phone conversation to conduct member checking. Member checking provided credibility of the findings and validated if the data accurately described the participant's experience (Creswell & Poth, 2018). Each email had an attachment of the individual participant's preliminary findings of the initial themes. Direct quotes that were used to substantiate the themes were also provided for the participants to review. Each participant had the opportunity to confirm the identified themes. All feedback from the participants was incorporated in the final data analysis.

Table 1

Theme Development

Research Question #1: What are the perceived challenges faculty advisors face when advising baccalaureate nursing students?			
Theme	Times mentioned	By how many participants	Code words
Lack of Student Accountability	24	6/6	Don't listen, don't hear from, don't respond, no follow through, laid out for them, lack of personal investment

Workload	19	6/6	Time, full-time job, number of advisees, workload
Lack of Training	10	5/6	No training, questions, figuring out
Student/Advisor Relationship	9	4/6	Relationship, see students, reaching out,
Research Question #2: What effects do the challenges of advising have on faculty advisors?			
Stress and Anxiety	25	6/6	Stress, my fault, horrible, upset, angry, sad, frustrated, overwhelming, consume, worry, fear, guilty
Lack of Purpose	12	5/6	Question you, duplication, not important, don't listen to advice
Sense of Emergency	7	4/6	Emergency, biggest issue, immediate response, crunch for time

Results

Demographic information. The total sample size included six participants (N=6). Each participant was assigned an alias to protect her identity. All participants were female and Caucasian/white. Three participants identified in the 65 or older age group, two in the 46-55 age group, and one in the 36-45 age group. According to National Council of State Boards of Nursing (2020) study titled, *National Nursing Workforce Study*, this reflects the current nursing population in the U.S. Five of the participants had a Masters in Nursing degree with one participant being doctoral prepared. Years of advising varied; two participants reported to five

years of experience, one participant reported 11-20 years of experience, and three participants reported more than 20 years of advising experience. Advising load also varied among the participants; one participant reporting having one to ten advisees, three participants reported having 11-20 advisees, and two participants reported having between 21-30 advisees in an academic year. All interviews were conducted in each participant's office to maintain confidentiality and privacy. Table 2 provides the detail of the demographic data of each participant.

Table 2

Demographic Data of Participants

Participant	Gender	Age	Ethnicity	Level of Nursing Education	Years of Nursing Advising	Advising load
Mrs. White	Female	36-45	Caucasian/White	Masters in Nursing	1-5 years	21-30 advisees
Susie	Female	65 or older	Caucasian/White	Masters in Nursing	>20 years	11-20 advisees
Jackie	Female	65 or older	Caucasian/White	Doctoral prepared	>20 years	1-10 advisees
Ann	Female	46-55	Caucasian/White	Masters in Nursing	1-5 years	11-20 advisees
Becky	Female	65 or older	Caucasian/White	Masters in Nursing	>20 years	11-20 advisees
M	Female	46-55	Caucasian/White	Masters in Nursing	11-20 years	21-30 advisees

Perceived challenges. Research question one for this study was: What are the perceived challenges faculty advisors face when advising baccalaureate nursing students? Four themes emerged from the data: 1) lack of student accountability, 2) workload, 3) lack of training, and 4) the student-advisor relationship and are listed in order by the greatest theme reported per participant to least.

Theme #1 Lack of student accountability. Participants unanimously identified lack of student accountability as a major challenge. Participants verbalized frustration of just getting student to follow through with the advice they were given. Mrs. White stated “And then um probably my biggest challenge, is like I don’t know. I expect some of my, I expect them to just do what I tell them to do. Right, like I am their advisor.” M also shared her frustration,

They don’t listen to what my advice is. They change their um plan of study and I don’t, uh so they might--an example I had a student who was in an English course and you have to have two Englishes and she decided that workload was too much so she took another course that is not on the plan of study at all and so if I wouldn’t have caught that um, she would have taken a class that wouldn’t have met graduation requirements.

Jackie also discussed her challenges with students not following her advice,

Students previously, we have discussed, here is what you need to do, they would say, okay, and I would offer any kind of alternative and things went well. In the last two years that I have been doing advising...we have online-- you know the students can go in and change their schedule and I have encountered more than one student who changed their schedule and now is taking A: they don’t need at all and B: they are not taking something they need.....So I guess we could call that either the student...didn’t listen, doesn’t look at their handout, or just doesn’t believe you that you know what you are doing. Which I in all my years I have never encountered that until the last two years.

Ultimately, faculty want to ensure they are doing everything they can to help students to be successful. However, the students need to be accountable for their success, as well. Susie shared,

I think sometimes maybe we can do more. But I am not totally sure what that is it is--kind of like parenting, you know you can do all you want but they have to show up and do the work kind of.”

Another difficulty was getting students to communicate in a timely manner or if at all.

Becky shared,

Some I don't ever even hear from some students and some that I would expect to hear from I don't hear from. So, then I will reach out to them a little bit more and see how are things going and so forth.

Ann also verbalized her challenge with students lack of accountability,

I think another challenge in advising is the lack of responsiveness from students, so if I send out a message and say hey you have an early alert in this class because it looks like you are not doing well um and then it is just crickets. You don't hear anything, and like my job here is to try and help figure out how to help you help yourself be more successful, but I cannot do that if you do not respond to what I have to say to you. Um so I think that is a challenge, um their expectation lack thereof, their personal investment.

Theme #2 Workload. In analyzing the data, all participants in this study verbalized workload as a major challenge. Advising was another obligation that needed to be completed on top of teaching, clinical, meetings, and other work-related expectations. In addition, advising alone requires a lot of time. Many of the participants reported the lack of time to advise student.

Ann reported,

So, it makes advising a challenge as well...other challenges, time uh when you are teaching a full load and then expected to be available for a panel of advisee which could be 10-30 students depending on, you know, how many are in your panel to be advised. I

think at our facility now with the faculty and the number of students we have--its varying number of advisees but that is a lot of people if you are going to spend, you know someone mentioned yesterday in our advisee orientations that they like to spend 30-45 minutes with each advisee. Well if you have 20 advisees, where do you find that time in your day?

Another participant, M also shared,

Um, challenges probably the number of students that I that I have on my advising list, I think um, I think any more than 18-20 is too many and so um, because I am teaching full time, I am doing clinical um I have a number of committees I am on, and I need, I am with my own course work, I am the course coordinator and I want to reach out to my students for tutoring. So, it can be a challenge sometimes to get all of everyone's needs met plus prep for class, clinical, so forth. So, I am not and since I am teaching clinical I am not on campus five days a week. So sometimes that can be a challenge cause when they are available I am in clinical. So that I think is probably, time, and the workload is probably the big the two big challenges that I see.

Another participant, Mrs. White, described advising alone is like a full-time job,

Um and I don't know if you advise, it is almost like a full-time job sometimes especially around midterms when we are meeting to do registration for the next semester and I have to try to fit in 35 students to meet with individually to plan for registration.

One participant, Becky, reported she provides more than just academic advice and that the additional advice increased her workload such as providing references for jobs.

I think last year, I probably did over 30 some references during the school year. It is a lot yea, but I am with the students in class or clinical like all the time. So, it is pretty obvious

they would ask me for yea, so... and then really even after they graduate, a lot of them still reach out to me to kind of ask for... advice at certain times or just to tell me how things are going.

Furthermore, participants provided information of past interactions with their advisees that did not reflect on their current workload. As Becky stated above, she was completing references even after they graduate and were no longer students at her institution. Jackie stated “Some students way in the past that I have been involved with that weren’t my advisees...”

Theme #3 Lack of training. Each participant was asked if they received any type of training. All but one participant reported that they receive no formal training on how to be an advisor. M verbalized,

Oh, when I started we didn’t have formal. We just had the, the formal was with the mentor that I had and she did a great job because she had also been, she had been on campus for a number of years and so she knew the ins and outs and was able to share that one to one with me, which I think is a good way to learn.

Unfortunately, not all participants had a mentor. A few participants felt that advising was self-taught. Ann shared “Um, I figured it out um and it was I felt it was almost, it wasn’t even, just sink or swim. It was taking one situation at a time and not try to figure everything out right away.” Mrs. White echoed,

So, advising just takes a lot of time and there is always stuff that I don’t know either how to advise them, so if feel like you are almost sort of thrown into it and you just learn as you go.

Becky also shared her experience with no training,

I didn't know exactly what my role was and I had to kind of feel that out for myself and then I think in the years that I have been here they have developed what a faculty advisor should be doing... I didn't know exactly what I was supposed to do. I just kind of had to feel it out a little bit.

Theme #4 Student-advisor relationship. Two participants shared challenges of developing and maintaining the student-advisor relationship. Ann identified the importance of developing a relationship but shared the challenge of creating it, "There is a relationship that needs to be built and sometimes it is frustrating when..that just kind of stutters along." A conflict with time and not having the student in class created the barrier of developing a relationship. Susie verbalized the difficulty of building a relationship,

I do know that since the curriculum is set, you know here is what you do this semester and on which--is helpful um that it is sometimes difficult to get a relationship with those students because it is not like we are advising, well okay now next semester you need to take this that and the other. I mean it is already an automatic, so I guess that doesn't necessarily mean the first year but throughout it just you don't always have a real solid relationship with them or know them well unless you've had them in class or they have had a need to come see you or you have a need to see them.

Susie also shared the challenge of advising when the advisee is not in one of your classes or clinical, as it may create a challenge for the advisee to come see you as an advisor. Essentially, why go visit someone I don't know to get advice?

I think the biggest challenge is to get them to come in the door, (laughing) to come see you, because um in general again, unless we have had a one on one contact with them, in a classroom or clinical, which you don't have with every student, they don't really know

you,...they tell the student to make an appointment with us, they may or may not, for then we would probably reach out to them and they may come or not.

Effects of challenges. The second research question for this study was: What effects do the challenges of advising have on faculty advisors? Three themes emerged from the data: 1) sense of emergency, 2) lack of purpose, and 3) stress and anxiety and are listed in order by the greatest theme reported per participant to least.

Theme #1 Stress and anxiety. All participants shared that advising caused much stress and anxiety. Much of it related to students not listening to the advisor's advice or the lack of time to be dedicated to being a good advisor. Susie shared her stress and anxiety when an advisee did not listen to her advice,

Oh, when they don't take our wonderful advice? Um then I--I guess I might feel a little angry at them. Um because you know I think in general our advice is pretty good I mean when you taught forever and seen everything you pretty much know the right answer. Um no matter who they are individually or even you know we talk a lot in nursing about the different age groups and their labels and there's this way and that way etc. and you know honestly it never matter much to me we are still teaching nursing and you still have to do X period. Um so you know I guess, I look at it more individual, so um you know angry or sad for you know if I think they have the potential to be a good nurse. But sometimes they just need to come back again which is tough, it is a whole year they have to wait to retake our course. So, um I don't know if that answered you or not.

The fear of failing to identify a class or information an advisee needed to graduate, also caused stress and anxiety among the participants. Mrs. White discussed, "Mostly just that I will miss something and then I will throw off their whole plan of study and they won't graduate on

time and it will be my fault.” M also echoed Mrs. White of the fear not catching a mistake,

My fear, is that I don't catch a mistake that might go through and may have some consequences, also I will have students that um one of that I know, I have talked to them about it, I have documented it on their advising sheet that I mention this and they didn't follow through and then they come back and say well, you didn't tell me this and so sometimes if they are frustrated because what they thought was going to work, doesn't this is a problem and then we have to figure out the plan to resolve that.

Participants shared how the stress affected them outside of work. Mrs. White shared,

Oh my gosh so much stress and its yea, like I would wake up at three o'clock in the morning and be like oh my gosh okay how am I going to fix her problem today like just you know trying to brainstorm or maybe I need to email this person and see if she can get into the science class that she needs or oh I should tell her to do such and such and such and that first year oh, wow, it was just an extra thing on my to do list. Yeah lots and lots of stress yea and then I feel like I cannot get the things I really need to get done because I am focusing on this so I had to learn how to prioritize.

Becky also shared the stress and anxiety advising created outside of work and even after the advisee graduates,

It can consume your life when you'll take stuff home and I kind of have to put that out of my mind because I just, you cannot worry about work 24-7. So, yea yea, that is about the only thing... That is my concern. Then I worry about that because I think then in two years you are going to be a nurse or a year and I think like are you going to be concerned about, you know, other things—or just think oh well, whatever, but I think that sometimes I am more concerned about stuff than they are.

Another participant, Ann, described when she first started advising nursing students and the stress it caused,

I recall it feeling very overwhelming, I remember having lots of questions and I think the challenging piece was there was really no way to anticipate those questions because every question is so student specific...It is I mean it is just really overwhelming trying to coordinate teaching and figure out how to advise.

Furthermore, the challenge of balancing the workload of advising and the other job expectation was stressful for participants. Ann also shared,

The concern that you are pulling faculty. Faculty feel like their time is divided and the concern is where do you place that priority. I mean it's a challenge and it is a concern because you want to do justice to all of those areas, I am not sure I have met anyone in nursing faculty at this institution or at where else are like yea if it doesn't get done, I don't really care. Like I mean we are all carrying piles of files around with us and trying to take things home and do and it has the potential to really just be overwhelming.

Another participant echoed the stress of balancing the workload of advising, "Well it is stressful... I mean yea stressful is the term that comes to mind. Just because you are competing interest. You are trying to divide a finite amount of time to a multiple tasks and challenges."

Lastly, participants shared the stress of when advisees would not be accountable or utilize the advice the advisor would give them. Many reported wanting to assist students but shared the stress it caused when students refused to utilize their resources.

You don't want to ever have a student feel like you were not responsive to what they needed or didn't help guide them in the direction that they needed to be guided--but if you don't know what direction that is, if there is no responding, if you cannot get that

information from them it is hard to do more than just check a box off.

Theme #2 Lack of purpose. Five of the six participants shared instances where they felt a lack of purpose being in the advisor role. Many related this to the challenge of lack of the student accountability resulting from not following through with the advice given. One participant mentioned “They don’t listen to what my advice is.” Another participant, Ann added “Like my job here is to try and help figure out how to help you. Help yourself be more successful, but I cannot do that if you do not respond to what I have to say to you.” Jackie felt that advisees did not respect her advice, “The only challenges really have been in the last couple of years where people question you. And I don’t feel like I am the authority on the advisor...”

Another participant, Susie, identified why advisees may not come see their advisor. Many of the advisees have already reached out to another individual such as their course instructor creating a reason not to come see their advisor.

I think they often see it as duplication and it often kind of can be, you know, because the course coordinator spends a lot of time--you know they probably already have been talking to them, about how to take a test and how to study and let’s set up a contact or lets you know after talking to you here are three things I think, you know, what three things do you think you could do differently or I think you should do differently they usually spend a fair amount of time with the course coordinator. So in sometimes, I think the advisee role is somewhat unnecessary.....But I would never not do it, or try a reach out or whatever but I do see how the student may think it’s a duplication. Or like I just talked to her so why do I need to go talk to her kind of thing... but that I would say that you know, those are the two things they don’t necessarily see our role as important and I can kind of see their point and because they have already spent time with the course

coordinator--that is the academic part um and we don't always easily cross paths to know each other you now walk into a person you don't know office and share your soul is not the easiest thing or the best.

Theme #3 Sense of emergency. Most of the participant described a sense of emergency. Many of the participant shared that it was imperative to act promptly or quickly to an advisee situation. This effect was related mainly to the student lack of accountability and not following the advisor's advice. Mrs. White provided an example of a time where an advisee did not follow her advice and created a last-minute situation,

I kind of ran into that with someone this summer who failed one of her nursing classes and it was offered during the summer so that it didn't mess up her whole graduation year. So, I am just like, you will have to take that this summer and you will also have to take pathophysiology and she didn't register for either of them until like the summer course had already started and it was like I don't live in town so I cannot drive in and I cannot do this and can I do it online and I am like no you cannot. You have to figure this out and you have known about it since March, so that sort of thing where it is like it becomes my emergency. At the last minute, that is definitely the biggest challenge.

Another participant disclosed when advisees are not doing well in a course and only begin to be accountable at the end of the semester resulted in the advisor exerting herself to help them.

I had several students who were not passing and so that aspect these were not my advisees necessarily but I had to continue—really work hard with them to get them up to speed with things and where I thought they should be and...some hadn't taken too much of an interest in that until right at the end and then it is kind of late. So ..., I was really

crunched for time and doing my classroom things, figuring out grades, finishing up clinical, and then taking care of the ones that...may not pass and that really was hard.

On the contrary, Ann provided that some advisees expect an instant response to their communication or questions, unlike the issue of students not communicating.

Their lack of responsiveness or their desire for an immediate response where they do not have the patience to wait for the next day or to go look for it, they just want the answer right now. Um which again I feel is some kind of feature of culture we have been conditioned for instance gratification and I think that doesn't always do our students the best service.

Lastly, advisees have multiple problems they bring to the advisor such as family issues that create sense of urgency or an obligation to help the advisee. Jackie explained,

The things that don't show up until it is a crisis, um somebody that has a history of multiple family crisis that is going to interfere with their school work, that doesn't show up any place, until they start getting bad grades or not showing up for class.

Results Summary

In summary, advisors faced challenges of balancing the workload of advising with other demands and job expectations. Advisors also shared the challenges of students' lack of accountability when it came to not following through on the advice they provided or in the case where students never responded to advisors' emails. The effect created a sense of emergency among advisors, as advisors would feel the need to quickly intervene to prevent complications in the advisee's academic progression. Furthermore, advisors shared the difficult of creating and maintaining the advisee-advisor relationship. When advisee would fail to attend a scheduled appointment, it was hard for advisors to develop a purposeful relationship. This challenge

created an effect in the form of a lack of purpose for the advisor. Lastly, all but one participant shared that they had received little or no training which created a challenge when they first started advising students. All these challenges created further stress and anxiety for the advisor.

CHAPTER V: DISCUSSION AND SUMMARY

The purpose of this qualitative, phenomenology study was to explore the challenges faculty experience advising baccalaureate nursing students and the effect those challenges have on faculty advisors. Academic advising has been identified as a major component to student success. However, academic advising is multi-faceted with many roles and responsibilities. Students come with array of needs and difficulties that need to be addressed for their academic and professional success. Currently, the United States is undergoing a nursing educator shortage. It is important to note, that a major factor identified as contributing to the nurse educator shortage is dissatisfaction with workload and burnout.

Due to the current nursing faculty shortage, it is important to understand the challenges faculty advisors face and how the challenges affect them to retain qualified nurse educators and increase the nursing educator population. The findings of this study are imperative due to the lack of research specific to baccalaureate nursing faculty and their experience with academic advising. This chapter will discuss the interpretation of results and correlation in relationship to the literature for each research question and how the results relate to the theoretical context. In addition, implications and recommendations specific to education, limitations, and future research will be discussed.

Research Questions and Interpretation

Research question #1. What are the perceived challenges faculty advisors face when advising baccalaureate nursing students? Each participant was asked to reflect on challenges they experienced advising baccalaureate nursing students. Four themes were identified, and included workload, lack of training, lack of student accountability, and the student-advisor relationship.

Lack of student accountability. Lack of student accountability was the most mentioned challenge from all six participants (see Table 1). Therefore, identifying the lack of student accountability was one of the greatest challenges all of the participants encountered. Two previous studies reported the lack of student accountability as a major challenge in advising. Dillon & Fisher (2000) identified 41% of advisors reported frustration of students not being prepared for the advising meeting, which made the interaction more difficult. In addition, faculty were frustrated when students did not show for their scheduled appointments (Skordoulis & Naqavi, 2010).

Interestingly, Harrell & Reglin (2018) evaluated 210 nursing students and identified nursing faculty advisors as having a significant role in establishing connections with students to other support services on campus to aid in success. It would be assumed that nursing students would want to utilize the resources advisors can provide but prior research suggest they are not. O'Connor's (2017) work demonstrated that students graduating from high school today are not prepared for college, nor for navigating through the complexities of overall life responsibilities. Students often wait too long to register for classes and do not take into consideration the consequences and stress this may cause for them in meeting their academic goals.

Peplau (1991, 1997) identifies the role of a nurse as a teacher, resource person, counselor, surrogate, and leader. The advisor can teach, counsel, and provide the advisee as much as they can to support their academic goals. However, the role of the surrogate and leader is where the advisor helps the student take full responsibility of his or her actions. Therefore, advisors need to balance the roles and let the student become more independent by providing ways to help them problem solve. Sometimes this may result negatively for the student, but faculty advisors must be educated to know that part of the advisor's role is also to develop students to be autonomous

professional nurses. The outcome is to allow the advisee to function more independently as a way to meet goals.

Overall, during the students' first day of orientation, it would be important to inform the students about their academic advisors, the process the students should use to communicate to their advisor, and the purpose of their advisor's role. Providing a handout or discussion of the responsibilities of an advisee and the advisor should also be addressed. This may provide the advisee a better understanding of the advisor role. Orientation is a time when the student could meet their academic advisors so they can start building the trusting relationship. This may eliminate the fear of meeting their advisor at a later time and enhance their understand that their advisor is there to assist them to be successful in their journey as a professional nurse.

Workload. All participants indicated the workload was a major challenge with advising baccalaureate nursing students. In this study, participants mentioned workload 19 times which was the second most common theme mentioned (see table 1). This was consistent with the studies from O'Neal et al. (2015), Champlin et al. (2015), and Karr-Lilienthal et al. (2013) that identified the lack of time in advisors already busy schedules as one of the biggest challenges. Most participants shared they had 11 or more advisees up to 30 advisees. Skordoulis & Naqavi (2010) reported that an average length of advising time was about 15 to 30 minutes. One participant shared that in their advisee orientations they were going to spend 30-45 minutes with each advisee. Even with an average time of 30 minutes with 20 advisees that equals almost ten hours of time with advisees. This doesn't account for the time preparing to meet with the student and the information gathered to be shared with the advisee. One participant shared the challenge during midterm registration time when all advisees want to see her all in the same time period. Trying to find ten hours of time in one week in an already busy schedule of teaching class and

clinical, committee meetings, and service can be almost impossible.

This finding supports the importance of nursing administration to be aware of the time commitment of academic advising and how it should be calculated in the workload of faculty. Karr-Lilienthal et al. (2013) shared the most frustration or dissatisfying part of advising was that advising occupied large amount of time and faculty were not recognized for the time advising took. It would be important to set parameters on the advisee load for each faculty member and compensate workloads for larger advisee loads. In this study, one participant mentioned that any more than 18-20 advisees are too many. Even though in this study participants were not asked if advising was calculated in their workload, many reported difficulties finding time to effectively advise. Effective advising takes time. If administrators are focused on student retention and success, they need to allow more structured time for advising and incorporate it in the faculty's workload.

Lack of training. Many studies have found that lack of advisor training is a major barrier to effectively advise students (Horstmeier, 2006; Myers & Dyer, 2005b; Skordoulis & Naqavi, 2010; Whitfield & Hickerson, 2013; Wolfe et al., 2013). Whitefield & Hickerson (2013) identified that two-thirds of the participants in their study did not receive appropriate training on advising. The results of this research study echoed findings of previous research as all but one participant reported they did not receive formal training on academic advising. This is more than what the majority of previous studies have reported. With this noted, it is important to add that academic advising training did not get much attention till the 2000s. Five of the six participants in this study were 46 or older with three being 65 or older. This age range is consistent with other studies; many of the participants reported advising for more than 20 years.

Harrison (2009a) & O'Connor (2017) indicated that a lack of advising knowledge minimizes the advisor's ability to be effective. These findings continue to provide evidence that training is essential to effective advising. Many participants shared they were just thrown into the role and really did not know how to advise. One participant talked about taking a lot of time to figure out how to advise, which can be related to the challenges of faculty workload.

Administration must support and provide training and professional development for all faculty advising nursing students. As suggested by Waters (2002), all new faculty should be provided orientation on advising even if they have had advising experience, as all institutions advise differently, have different processes and system structures, in addition to having differing curriculums. This study further supports that faculty advisors are essential to student retention and success; therefore, faculty must have a foundational knowledge of advising to be effective.

Student-advisor relationship. The challenge of developing the student-advisor relationship was reported by four of the six participants and only mentioned nine times making it the challenge associated with advising baccalaureate nursing students. However, Peplau's (1991,1997) theory is centered on the nurse-patient relationship. Crookston (1972) and O'Banion (1972) also both define academic advising based on the student-advisor relationship. As the student-advisor relationship is an interpersonal process due to the necessity of the interaction between two individuals, the advisor and student work together to meet the common goal of graduation and becoming a professional nurse. Participants in this study shared the difficulty of creating the relationship due to time conflicts. Al-Hussami et al. (2011) identified the need for institutions to make it a priority to create an environment for students to increase interaction with faculty. When students first arrive to college, it should be emphasized during orientation, the need to find dedicated time to meet with their advisor to create the relationship. This can ease the

fear experienced for both the student and advisor during the stranger role period or orientation phase. During this time, the student and advisor can introduce themselves and identify the student's needs and goals. It is important to note that the advisor deeply listens to the student during this phase, not making any demands or request at this time in order to develop a trusting relationship. This is a good time to introduce the roles and responsibilities of the advisor to the student as well as including the expectations of the advisee/student.

Due to the rigor of nursing school, nursing students are more apt to visit their advisor more frequently than non-nursing students (Harrison, 2009b). Noting this, advisors need to be conveniently accessible to students either via an electronical environment or face to face. Today, students want instant communication and feedback. Providing communication as soon as possible would be preferred, however during the initial meeting advisors should provide communication expectations; for example, will respond to emails no later than 48 hours. In addition, if the advisor is not in the same building as the student will be taking classes, the advisor should consider going to the student's classes to make short announcements to keep the students updated. If faculty can put this extra effort in to show students they truly care for them, students may be more inspired to continue their relationship with their advisor and perhaps experience greater success (Shelton, 2003). Advisors must continue to provide an effort into creating an environment of trust and support to build the student-advisor relationship. Without saying, this requires more time of the advisor. Administration needs to be aware of the time commitment of advising especially during the initial contact. The initial contact is key to maintaining the trusting relationship.

Research question #2. What effects do the challenges of advising have on faculty advisors? Each participant was asked to reflect on the effects of the challenges they shared.

Three themes emerged from analyzing the data: 1) sense of emergency, 2) lack of purpose, and 3) stress and anxiety

Stress and anxiety. All participants shared advising caused much stress and anxiety. The increase demands of students and parents have increased the pressure on advisors (Anft, 2018). Additionally, the multitude of advising responsibilities create much stress and anxiety related to lack of time to be an effective advisor. Karr-Lilienthal et al. (2013) identified the most frustrating or dissatisfying part of advising was that it required too much time. Participants in this study shared the stress and anxiety not only affected them at work but outside of work as well. Overtime, academic advisors may experience emotional, physical, and spiritual fatigue resulting from witnessing and compartmentalizing all the difficulties of advisees (Ali & Johns, 2018). As a result of the level of stress and anxiety faced by academic advisors, it is important to incorporate self-care strategies and mentoring into the advisor's routine to alleviate the effects. It is important to note, a major factor identified as contributing to the nurse educator shortage is dissatisfaction with workload and burnout (National League for Nursing, n.d.; Owens, 2017). The NACADA Academic Advising Core Competencies Model (2019) suggests the academic advisor must demonstrate the ability of on-going assessment of the advising practice and development role. Therefore, advisors should regularly reflect on their personal care as it may impact the quality of care they provide to their advisees. Furthermore, academic advisors need to be positive role models to students by demonstrating self-care strategies as ways to manage stress and anxiety.

Lack of purpose. Many participants reported their role as an advisor at times felt unnecessary. Interestingly, the researcher's exhaustive review of literature in preparation for this study did not identify a lack of purpose in the advisor role. With the various resources on

campus, students have multiple individuals they can reach out to for assistance. As Susie mentioned, some students become close with a faculty member such as a clinical instructor. Nursing students conduct many hours in the clinical setting, therefore advisees may be building better relationships with faculty who are easier to access and with whom they spend more face to face time.

Nonetheless, academic advising is grounded on the student-advisor relationship. If the advisor does not create that trusting relationship with the student, the student may reach out to another teacher or staff member for advice, especially if they have developed a better relationship or bonds with those faculty. In addition, if the student does not know or trust the advisor, he or she may not listen to their advice. Bers & Schuetz (2014) study identified positive initial interactions with advisors created confidence during the transition into college in first generation college students. Furthermore, Tost, Gino, & Larrick (2012) study found that if advisors take power and/or take control, it led to advisees discounting advice from others. In result, the study identified advisors who made advisees feel that the process was cooperative led to advisees to be more receptive to the advisors' advice. Thus, it is essential that the advisor attempts to connect and work collaboratively with the student right away during the initial orientation process to beginning the relationship.

Peplau's (1991,1997) orientation and identification phase can assist advisors to create and build a meaningful relationship with the advisee and thus provides a greater sense of purpose for the advisor. As with patients being admitted in the hospital, high anxiety and stress can occur from being in a very new and often unfamiliar environment. Similarly, starting college or a new program can be anxiety inducing. The student may not be able to understand or predict what their challenges will be in this new environment. In addition, if a student has experienced

previous negative advisor relationships, it is more likely that they will attempt to maneuver independent of the advisor. Peterson (2004) identified that if a patient who feels inspired or strong, he or she will more likely participate in their situation with confidence and perseverance. Thus, the advisor should reach out to the student and continue to encourage.

As mentioned previously, during the students first day of orientation, it would be important to inform the students about their academic advisors, the process the student should use to communicate with their advisor, and the purpose advisor server in the college setting. Providing a handout or discussion of the responsibilities of an advisee and the advisor should also be addressed. This may provide the advisee a better understanding of the advisor role. During these phases, the student begins to understand their needs and works together with their advisor to create and meet their goals. In addition, during specific times through the course of the student's program, presenting students with further communication and education of the importance of their advisor and meeting with them may provide further incentive to visit their advisor.

Sense of emergency. Four of the six participants shared a sense of emergency or a desire to act promptly or quickly to an advisee situation or problem. Today's traditional college population is considered the Generation Z, known for leading very busy lives (Mintz, 2019). This results in a time crisis that places greater stress on college students. Consequently, this transfers to the advisor as a sense of emergency to fix things promptly. In addition, participants shared the challenge of students lacking accountability of their consequences. It is important that advisors do not just fix things for the students. However, advisors need to engage in the surrogate and leader roles to design learning experiences and promote independence through developing students' problem-solving skills (Peplau, 1991, 1997). In addition, Crookston (1972) stated

“Developmental counseling or advising is concerned not only with a specific personal or vocational decision but also with facilitating the student's rational processes, environmental and interpersonal interactions, behavior awareness, and problem-solving, decision-making and evaluation skills” (p.12). The leader role phase eventually allows the student to take full responsibility of his or her situation. Helping and growing the advisee on problem solving skills, in addition to reflecting on the situation they created may help them prevent these situations in the future.

Another participant, Ann, shared some advisees expected instant responses to their communication. Harrison (2009b) identified that nursing students appreciate when faculty respond quickly to emails. Today college students want quick responses to their questions so they can complete what they are currently working on. This sometimes comes down to lack of time management and rapidly approaching deadlines. Communicating ahead of time, such as in the initial meeting or in an automatic email response, that faculty will communicate back with in a specific time frame may decrease the stress of the advisor. This provides students with a realistic time frame and expectation of when to receive the latest communication. Thus, college students need assistance with time management and other life skills they may not have learned prior to coming to college. Menke et al. (2018) study identified top competencies of an advisor are communication, interpersonal skills, and time management. It is imperative that advisors receive basic training on how to advise advisees to manage their time, as well as other basic life skills. If advisees need further assistance, advisors should provide advisees with resources on campus such as coaching to develop essential life skills.

Lastly, advising consists not only of class registration or deciding on a major but also ranges from financial concerns, mental-health issues, and family issues (Anft, 2018). Once the

trusting relationship is developed, the advisor may be the only person the student may have to reach out to. In addition, Bleeker, et al. (2010) found advisees value parental academic advice. However, in some cases it may be more than academic advice such as relationship problems that the advisees want to discuss. Sometime these issues do not arise until it is a crisis that the advisor considers it their responsibility to resolve.

These findings demonstrate there is a great deal more to academic advising than meets the eye. Academic advisors must have the ability to handle personal and psychosocial issues. Advisors must be clearly aware of systems and structures in relationship to the resources available at their institution, as it is extremely important to note that most of these issues are out of the scope of the faculty member expertise. In some cases, nurse faculty may try to use their nursing role to provide medical advice to their advisees, acting more like a nurse when technically this is not their role as the educator/advisor. In the case of these crises, it is important to know the resources available on campus or in the community in order to refer the student. Training on how to handle these personal and psychosocial issues should be through professional development courses, in addition to understanding the role and responsibilities as an educator/advisor and not a nurse (Myers & Dyer, 2005a).

Limitations of the Study

While the researcher established procedures to preserve the rigor of the study, limitations are acknowledged. First, the small sample size of the study may be perceived to be a limitation. Even though saturation was achieved by having six participants, the initial plan was to have 10 participants. In addition, all participants were Caucasian women. It would be important to explore other ethnicities and sex to identify if other challenges arise. Furthermore, the participants' demographic information demonstrates an aging population within nursing faculty

that is consistent with prior research. Further examination of younger or newer advisors may give further insight of into the perceived challenges perceived of new nurse educators. Another limitation is the study was the use of only three Midwestern colleges as sites to recruit participants. This may limit the transferability of the findings to other baccalaureate nursing programs.

Implications/Recommendations for Education

This research study identified challenges experience by nursing faculty and the effects of these challenges on the nursing faculty with academic advising that lead to several implications for academic advising in nursing and add to the current literature. The findings of this study provide evidence that nursing administration needs to take in to consideration. The literature, and the findings from this study, disclose that effective advising takes time. Thus, academic advising should be incorporated in the faculty workload. It is imperative that administration clearly communicates to both current and especially to prospective faculty about the roles, responsibilities, and expectations of academic advising in the job description during the hiring process.

Faculty development on the role of being a faculty advisor is of utmost importance so that advising is done effectively. Faculty education must consist of a multitude of considerations, such as creating a trusting and lasting relationship with students, managing lack of student accountability, resources available both internally and externally to the college, and utilizing resources effectively to decrease the challenges of advising and the effects of these challenges on faculty advisors of today. Administrators could utilize the findings of this research study with current faculty advisors to improve advisor orientation based on years of the individual faculty's years of experience advising and individually identify stressors related to faculty advising.

Furthermore, professional development on identifying compassion fatigue and developing self-care strategies to prevent compassion fatigue or burnout should be included (Henry, 2014; Hines, 2019; Logan & Turman, 2003).

Additionally, mentoring should also be a part of the initial hiring for new academic advisors. Academic advising can consist of many challenges, however, if the proper mentoring and guidance is provided, faculty advisors may be able to better navigate the challenges (Farber, 2018; Poe & Almanzar, 2019). Not only does the mentor provide guidance but also allows the new advisor to express their feelings and voice the challenges they are facing. Mentoring also may decrease the workload of a new advisor. Formal training may afford the new advisor less time to figure things out and therefore more time be given to mentorship for guidance or advice to complete tasks and responsibilities. During the mentoring relationship, this may offer the time to focus on “self-awareness” as an advisor. Administration or mentors may be able to help new faculty advisors be more self-aware of challenges as it relates to advising.

Furthermore, institutions must ensure services are provided to meet students’ needs such as campus health, financial aid, life and academic coaching, mentoring, and student orientation. Lack of resources on campus can create further challenges for advisors as this creates more work and demands on them.

A serendipitous finding in this research study, despite all the challenges and negative effects, was that advisors still reported personal satisfaction in helping students (McGillin et al, 2010). Three participants in this study recognized the gratification they receive when advising nursing students. Similar to nursing practice itself, advising can bring many challenges and rewards. The simple pleasures and the meaningful relationships advisor make with students can provide purpose and meaning to advisor role.

Future Research

Several recommendations for future research can be attained from this study. This study should be replicated with a larger sample and at other baccalaureate nursing programs nationwide. In addition, there is still limited literature on advising in nursing education that includes nursing faculty advising diverse students. Further research is needed to better understand the complexity of advising in nursing education. Furthermore, research on a more diverse faculty population that included men, other ethnicities, level of education, and nursing faculty of all ages. Five of the participants had a Masters in Nursing degree with one participant being doctoral prepared. Further research is warranted to identify if the level of education of the nursing advisor has any relationship with advising and their challenges. In relation to the theme of lack of student accountability, further research in why advisees are not responding to advisors to identify if there is any correlation with advisees who do not respond and his or her academic load should be studied. Lastly, further research comparing and contrasting challenges from private versus public nursing institutions is warranted.

Summary

O'Keefe (2013) expressed that time is our most valuable currency and a balanced work/life is a sacred source of strength and a goal for living. Academic administration must recognize the time and effort it takes to effectively advise nursing students. It is imperative that advisors have dedicated time to adequately function in their roles as an advisor and administration should consider advising in their workload assignments. Further education or professional development is essential to navigate through the advising challenges advisors face today. Implementing these changes can possibly alleviate the dissatisfaction of the advisor workload and improve retention of qualified nursing faculty. Further research on the challenges

nursing academic advisors encounter and the effects of those challenges is essential in aiding in the nursing faculty and nursing shortage.

As nurses, we have a duty to help our patients and when we cannot, it can create emotional stress. Nursing faculty as advisors expressed similar sentiments. However, despite all the challenges reported, advisors shared their gratification of advising. Jackie shared “I do think by the way the best part about advising undergraduate students is helping them learn what their strengths are.” Faculty advisors want student to succeed so they can enter the nursing workforces and help replenish the need for more healthcare providers.

In conclusion, though faculty advising is wrought with challenges, advising has many benefits, too. Administration should support faculty education or professional development on the nuances of student advising, including knowledge of the systems in place to manage what is expected of faculty in the advisor role. Ann shared,

I think it is one of those things where people look at advising as this negative thing they have to do. But I don't think that it should be like that, right? It is another task obviously, but sometimes advising is the way that you connect with a student or give them a perspective they didn't have or the advisors is the one who finds out they are having this crazy situation going on in their life because they feel that is a safe point of contact and I get not wanting to talk to an instructor in the course because they are worried if they say something. All the crazy things that students worry about. In having that conversation but there is one person that is consistent throughout their program um you can develop a relationship so advising shouldn't in my opinion be seen as a negative task for faculty it's just finding that balance between teaching and advising and understanding how that needs to look.

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[library/disposition-of-full-time-nurse-educators-by-race-ethnicity-2017.pdf?sfvrsn=0](http://www.nln.org/docs/default-source/default-document-library/disposition-of-full-time-nurse-educators-by-race-ethnicity-2017.pdf?sfvrsn=0)

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Appendix A

INSERT DATE

Dear NAME,

I am a nurse educator currently in the Doctor of Education with Emphasis in Nursing Education program at Bryan College of Health Sciences in Lincoln, Nebraska. I am reaching out to you to ask for your assistance in obtaining participants for my research study entitled *The Perceived Challenges of Advising Undergraduate Students and the Effects on Faculty as Advisors*. To better understand the complexities of faculty advising in nursing education, the purpose of this qualitative phenomenology study is to explore the challenges faculty experience advising pre-licensure nursing students. Your institution has been chosen as your faculty advise nursing students.

The role of a faculty advisor is multi-faceted and goes beyond being knowledgeable and assisting students with their major and course selections. Faculty advisors are still expected to perform their tripartite responsibilities of teaching, service, and scholarship despite their growing responsibilities in the advisor role.

Participants in this study are to be part-time or full-time undergraduate nursing faculty who have advised nursing students for at least one academic year at your institution. Participants in this study will need to be at least 19 years of age or older to participate in the study. Nursing faculty that hold any type of administrative role that teach and advise undergraduate nursing students are excluded from this study.

Nursing programs will be kept confidential and participants will remain anonymous. Pseudonyms will be used to protect participants' privacy. Findings of the project can be shared at your request.

Please confirm your acceptance or denial of institutional participation via email to krystal.davis@bryanhealthcollege.edu. If you provide permission for your faculty to participate, then I will send you a copy of the Bryan College of Health Sciences' IRB approval. In addition, I will seek Institutional Review Board approval from your institution, if applicable.

If you have further questions or in need of clarification, please contact me at [REDACTED] or krystal.davis@bryanhealthcollege.edu. I am working under the direction of my dissertation chair, Dr. Lina Bostwick. You may also contact Dr. Bostwick at lina.bostwick@bryanhealth.org.

Sincerely,

Krystal Davis, Ed. D (c), RN
Primary Investigator
Krystal.davis@bryanhealthcollege.edu
402-486- [REDACTED]

Appendix B

Dear NAME,

Thank you for permission to recruit faculty from your undergraduate nursing program as participants for my dissertation study. Please share the attached Invitation to Participate letter to undergraduate nursing faculty who advise undergraduate nursing students. Below is a short script to send to faculty with the attached Invitation to Participate letter. As a reminder, nursing faculty need to have at least one year of experience advising undergraduate nursing students at your institution, should this affect how you disseminate this request.

Are you an academic advisor for nursing students? As an advisor, you have the opportunity to make a lasting impression on students and contribute to their personal and professional lives. This can be rewarding and inspiring; however, advising can take a lot of time and bring many challenges. I would like to hear your challenges you have faced in advising nursing students. Please see the attached Invitation to Participate letter for details in being a part of my important research advising undergraduate nursing students.

I appreciate your support and assistance with this process for this important study. Please contact me if you have any questions or concerns in regards to the study.

Sincerely,

Krystal Davis, Ed. D (c), RN
Primary Investigator
Krystal.davis@bryanhealthcollege.edu
402-486- [REDACTED]

Appendix C

Invitation to Participate

The Perceived Challenges of Advising Undergraduate Students and the Effects on Faculty as Advisors

Dear Nursing Faculty Advisor,

You are invited to participate in a research study entitled *The Perceived Challenges of Advising Undergraduate Students and the Effects on Faculty as Advisors*. To better understand the complexities of faculty advising in nursing education, the purpose of this qualitative phenomenology study is to explore the challenges faculty experience advising pre-licensure nursing students. You may qualify if you are a part-time or full-time nursing faculty who advises nursing students in an undergraduate baccalaureate nursing program. A minimum of one academic year of advising experience is warranted. Nursing faculty that hold any type of administrative role that teach and advise undergraduate nursing students are excluded from this study.

If you agree to be in this study, one 45-60-minute-long interview will be conducted related to your experiences of advising undergraduate nursing students along with a demographic questionnaire. This interview will be scheduled at a location and time of your convenience. After your interview has been analyzed, you will be contacted by email and will be asked to spend about 15-20 minutes reviewing the themes that have been identified.

The interview and your responses will be kept confidential. You will be assigned a pseudonym to protect your privacy. Your participation in the research is voluntary and you may refuse to participate or discontinue participation at any time without retribution to our relationship or your relationship with your institution. Prior to the interview, you will be asked to complete an informed consent and a short written demographic survey. During this time, you will learn more about the study and will be able to ask me questions regarding your participation.

Due to the principal investigator's current employment as BSN Program Director at her institution, there is also a risk of potential harm to collegial relationships. There is a potential risk of participant burden due to the personal loss of time while participating in the interview and follow up phone call. A potential risk of emotional distress related to sharing the challenges and impacts of advising may occur. Measures have been put in place to decrease the risks to participants. For questions regarding your rights as a research participant, contact Bryan College of Health Sciences IRB at 402-481-3967. Findings of the project can be shared at your request.

If you are interested in participating in this important research, please contact me at 402-486- [REDACTED] or at krystal.davis@bryanhealthcollege.edu to arrange a time to meet to complete the informed consent and interview. This research is part of my dissertation. I am working under the direction of my dissertation chair, Dr. Lina Bostwick. If you have any questions regarding the study or your eligibility please contact me at krystal.davis@bryanhealthcollege.edu or Dr. Bostwick at lina.bostwick@bryanhealth.org.

Thank you for considering participation in my study. I look forward to hearing from you.

Sincerely,

Krystal Davis, Ed. D (c), RN
Primary Investigator
Krystal.davis@bryanhealthcollege.edu
402-486- [REDACTED]

*This study has been approved by the Bryan College of Health Sciences Institutional Review Board. A copy of the approval letter can be shared with you upon request. I have attached a copy of your rights as a research participant for your convenience.

Appendix D

Participant Demographic Survey

Thank you for participating in this study. Prior to beginning the interview, please complete the demographic information below. Select the choice that best describes you. This survey will take approximately one to two minutes to complete.

My current age is:

- 18-25
- 26-35
- 36-45
- 46-55
- 56-65
- 65 and over

I identify my gender as:

- Male
- Female
- Transgender
- I do not identify as male, female, or transgender

I would describe my ethnicity as:

- Caucasian/White
- African-American
- Hispanic
- Asian or Pacific Islander
- American Indian or Alaskan Native
- Other

Years of nursing teaching experience:

- 1-5 years
- 6-10 years
- 11-20 years
- >20 years

My level of nursing education is:

- Bachelors in Nursing
- Masters in Nursing
- Doctoral prepared

Years of nursing advising experience:

- 1-5 years
- 6-10 years
- 11-20 years
- >20 years

How many advisees do you typically advise in an academic year?

- 1-10 advisees
- 11-20 advisees
- 21-30 advisees
- 31-40 advisees
- 41-50 advisees
- >50 advisees



Appendix E

Directions: This form will be utilized by the PI as a guide for asking the semi-structured interview questions. Additionally, due to the interviews being audio taped, the PI may use this form to record pertinent research notes that arise during the interview sessions.

Title: The Perceived Challenges of Advising Undergraduate Students and the Effects on Faculty as Advisors

Time of Interview:

Date:

Place:

Interviewer:

Position of the interviewee:

To better understand the complexities of faculty advising in nursing education, the purpose of this qualitative phenomenology study is to explore the challenges faculty experience advising baccalaureate nursing students. Your participation in this study is voluntary and you may refuse to participate or discontinue participation at any time without retribution to our relationship or your relationship with your institution.

Questions:

1. What has been your experience advising baccalaureate nursing students?

2. What do you recall from your very first year of advising? (Probing question: What type of training, if any, do you remember receiving?)



3. What were your first years of advising like compared to your advising now?

4. What challenges have you experienced with advising baccalaureate nursing students? (Probing question: Any challenges with training, the amount of time, dealing with personal/financial issues/)

5. Describe a time when you encountered difficulty with advising baccalaureate nursing students. (Probing question: Tell me more about....)

6. What are your greatest concerns when advising nursing students? (Probing question: What surprised you about advising nursing students?)

7. Share with me an example of how you have been affected by the challenges with advising in your advisor role.



Thank you for your participation in this interview. Again, confidentiality of your responses will be respected and maintained.

Examples of Probing questions:

- What exactly did you mean by.....?
- Could you tell me more about.....?
- What were you thinking about when you said.....?
- Sorry, I don't understand. Could you help by giving an example?
- How did you feel about that?
- Why do you think this is the case?
- How is this different from?
- What sort of an impact do you think this has had?
- What surprised you about....?
- What are you most afraid will happen?



Appendix F

ADULT CONSENT FORM

Formal Study Title: The Perceived Challenges of Advising Undergraduate Students and the Effects on Faculty as Advisors

Participant Study Title: A Research Study That Identifies Challenges of Advising Nursing Students and How It Effects Faculty Advisors

Study Personnel:

Krystal Davis

Email: krystal.davis@bryanhealthcollege.edu

Phone: 402-486- [REDACTED]

Key Study Information:

- The purpose of this study is to explore the challenges faculty experience advising baccalaureate nursing students.
- Individuals that are 19 years of age or older are eligible for this study.
- A brief summary of the procedures includes:
 - You will complete a short demographic survey they will take 1-2 minutes
 - This study will require one face-to-face visit lasting about 45-60 minutes and
 - After your interview, the primary investigator will email you to set up a time to have a phone conversion to seek feedback of the preliminary findings and understandings of your interview.
- The risks to this study include: 1) loss of time 2) potential loss of confidentiality 3) potential for inadvertent student risk in the event that FERPA or HIPAA information is breeched 4) potential emotional and/or psychological distress 5) loss of study information
- Potential benefits to this study include: 1) greater awareness of the roles and challenges you encounter with advising 2) further insight in the needs to yourself advising undergraduate nursing students.
- You will be given a copy of this consent form.



- Your participation is voluntary and you may decide to stop participating at any time without retribution to professional relationships.
- This study will uphold all FERPA and HIPAA guidelines. Please refrain from disclosing FERPA related student information.

Invitation:

You are invited to participate in this research study. The information in this form is to assist you with deciding whether or not to participate. Please ask if you have any questions or concerns.

Why are you being asked to be in this research study?

You are being asked to be in this study because you are a faculty member who advises undergraduate baccalaureate nursing students and it is understood that you have at least one year of faculty advising experience.

What is the reason for doing this research study?

The role of a faculty advisor is multi-faceted and goes beyond being knowledgeable and assisting students with major and course selections. Faculty advisors are still expected to perform their responsibilities of teaching, service, and scholarship despite their growing responsibilities in the advisor role. To better understand the complexities of faculty advising in nursing education, the purpose of this study is to explore the challenges faculty experience advising pre-licensure nursing students.

What will be done during this research study?

This study includes:

- First, after you agree to participate in this study, you will sign this form. A signed copy of the Adult Consent Form will be given to you prior to initiating the interview.
- You will complete a short one to two-minute demographic survey prior to the start of the interview.
- An interview that will be conducted face-to-face in a quiet and private location of your choice, free from distractions. The day and time will be mutually agreed upon by the participant and researcher.
- The interview will last approximately 45 to 60 minutes and will be audio-recorded for later transcription.



- The audio recordings will be transcribed to a written form and data will then be sorted into themes by the principal investigator.
- At the end of the study, the researcher will email the transcribed interview themes to you as preliminary findings. You will be asked to review these themes for accuracy and clarity. This process will take 15-20 minutes.

How will my data/samples/images be used?

All your personal information will be de-identified which means information such as your name will be assigned a code name instead. Your data may be retained for future use and/or shared with other researchers at Bryan College of Health Sciences. The de-identified data will be analyzed and may be published in scientific journals or presented at scientific meetings but your identity will be kept strictly confidential.

What commercial benefits will I get from research conducted on my data/samples/images?

Your data will not be used for commercial profit.

What will happen to my data/samples/images once the study is completed?

Your data will be stored on an encrypted flash drive stored in a locked box in a locked office. All data will be de-identified, which means data will be removed, like your name, and replaced by a code name.

Will I be notified of the findings from the research study?

No, you will not be notified of the findings.

What are the possible risks of being in this research study?

The risk to participation in the research study may include loss of personal time while participating in the interview plus a follow-up phone call lasting approximately 15-20 minutes. Loss of privacy and confidentiality may be a risk though steps have been taken to protect your privacy. In addition, there is a potential of accidental student risk in the event that FERPA or HIPAA information is breached. Lastly, a potential risk of emotional distress related to sharing the challenges and subsequent impacts of advising may occur. In case of an event, you need to speak to a professional, contact your healthcare provider or the Employee Assistance



Program at your workplace. A list of contact information for potential healthcare providers are listed below, as well. However, this would be at your own financial cost.

- Blue Valley Behavioral Health
3901 Normal Blvd. Suite 201
Lincoln, NE 68506
(402)-261-4017
- Lutheran Family Services of Nebraska, Inc.
120 South 24th Street, Suite 100
Omaha, NE 68102
- Lincoln Behavioral Health Clinic
3201 Pioneers Blvd. Suite 202
Lincoln, NE 68502
(402) 489-9959
- Psychiatric Services, P.C.
9239 W Center Road, Suite 211
Omaha, NE 68124
(402) 399-9305

If appropriate, what is the approximate number of participants in this research study?

An approximate number of participants in this research study is ten.

What are the possible benefits to you?

Potential benefit associated with the research may include greater awareness of the roles and challenges you encounter with advising. In addition, your shared experiences may have the potential to provide insight in the needs to yourself advising undergraduate nursing students. However, you may perceive no direct benefit from being in this research study.

What are the possible benefits to other people?

Participants' experiences have the potential to provide insight into the needs of nursing faculty specific to faculty advising. The information gained from this study may be used to assist nursing advisors and nursing administrators to better support faculty advisors with the challenges they may face when advising undergraduate nursing students.

What are the alternatives to being in this research study?

The alternative is to not participate in this research.

**What will it cost you to be in this research study?**

There is no cost to you to be in this research study. You will not be reimbursed for your time and/or travel.

Will you be rewarded or compensated for being in this research study?

A \$20.00 Visa gift card will be randomly awarded to one participant.

What should you do if you have a problem during this research study?

Your well-being is the major concern of the researcher for this study. If you have a concern as a direct result of being in this study, you should immediately contact one of the people listed at the end of this consent form. There are no plans to provide payment of lost wages, disability, discomfort, etc. you do not give up any legal rights by agreeing to participate in this study. In case of an event you feel distressed and need to speak to a professional, contact your healthcare provider or the Employee Assistance Program at your workplace. A list of contact information for potential healthcare providers are listed below, as well. However, this would be at your own financial cost.

- Blue Valley Behavioral Health
3901 Normal Blvd. Suite 201
Lincoln, NE 68506
(402)-261-4017
- Lincoln Behavioral Health Clinic
3201 Pioneers Blvd. Suite 202
Lincoln, NE 68502
(402) 489-9959
- Lutheran Family Services of
Nebraska, Inc.
120 South 24th Street, Suite 100
Omaha, NE 68102
- Psychiatric Services, P.C.
9239 W Center Road, Suite 211
Omaha, NE 68124
(402) 399-9305

How will information about you be protected?

Reasonable steps will be taken to protect your privacy and the confidentiality of your study data, for example storing your data in a locked box in a locked office. The only persons who will have access to your research records are the study personnel, the Institution Review Board (IRB), and any other person or agency required by law. The information from this study may be published in scientific journals or presented at scientific meetings but your identity will be kept strictly confidential. A pseudonym will be used to protect your privacy.



What are your rights as a research participant?

You have rights as a research participant. These rights have been explained within this consent form. You have also been given the Rights of Research Participants brochure. If you have any questions concerning your rights or complains about the research, contact the investigator or the Institutional Review Board (IRB):

Bryan College of Health Sciences
Institution Review Board Chair
Telephone: 402-481-3801
Email: IRB@bryanhealthcollege.edu

What will happen if you decide not to be in this research study or decide to stop participating once you start?

You can decide not to be in this research study, or you can stop being in this research study (“withdraw”) at any time before, during, or after the research begins. Deciding not to be in this research study or deciding to withdraw will not affect your relationship with the investigator, your institution, or with the Bryan College of Health Sciences.



Documentation of Informed Consent

You are freely deciding to participate in this research study. Signing this form means that:

1. You have read and understood this consent form.
2. You have had the consent form explained to you.
3. You have had your questions answered.
4. You have decided to be in this research study.

If you have any questions during the study, you should talk to one of the investigators listed below. You will be given a copy of this consent form to keep for your records.

Participant’s signature: _____

Date: _____

Time: _____

My signature certifies that all the elements of informed consent described in this consent form have been explained fully to the participant. In my judgment, the participant possesses the legal capacity to give informed consent to participate in this research study and is voluntarily and knowingly providing informed consent to participate.

Signature of Person Obtaining Consent: _____

Date: _____

Time: _____

Authorized Study Personnel

Principal Investigator:

Krystal Davis, Ed. D (c), RN
Bryan College of Health Sciences
1535 South 52nd Street
Lincoln, NE 68506
402-486-XXXXXXXXXX
Krystal.davis@bryanhealthcollege.edu

Dissertation Chair:

Lina Bostwick, Ed. D, RN
Bryan College of Health Sciences
1535 South 52nd Street
Lincoln, NE 68506
402-481-8717
lina.bostwick@bryanhealth.org

Research Team Member(s), if applicable:

n/a



Appendix G

Transcription Confidential Disclosure Agreement

Agreement is entered into this *ENTER DATE* and between *ENTER TRANSCRIPTIST NAME* (hereinafter "Recipient") and Krystal Davis (hereinafter "Discloser").

WHEREAS Discloser possesses certain ideas and information relating to participants' interviews of the mentor/mentee dyads for the research study titled "The Perceived Challenges of Advising Undergraduate Students and the Effects on Faculty as Advisors" that is confidential and proprietary to Discloser (hereinafter "Confidential Information"); and

WHEREAS the Recipient is willing to receive disclosure of the Confidential Information pursuant to the terms of this Agreement for the purpose of transcribing digital recordings of participants' interviews of the mentor/mentee dyads.

NOW THEREFORE, in consideration for the mutual undertakings of the Discloser and the Recipient under this Agreement, the parties agree as follows:

1. Disclosure. Discloser agrees to disclose, and Recipient agrees to receive the Confidential Information.

2. Confidentiality.

2.1 No Use. Recipient agrees not to use the Confidential Information in any way, or to manufacture or test any product embodying Confidential Information, except for the purpose set forth above.

2.2 No Disclosure. Recipient agrees to use its best efforts to prevent and protect the Confidential Information, or any part thereof, from disclosure to any person other than Recipient's employees having a need for disclosure in connection with Recipient's authorized use of the Confidential Information.

2.3 Protection of Secrecy. Recipient agrees to take all steps reasonably necessary to protect the secrecy of the Confidential Information, and to prevent the Confidential Information from falling into the public domain or into the possession of unauthorized persons.

3. Limits on Confidential Information. Confidential Information shall not be deemed proprietary and the Recipient shall have no obligation with respect to such information.



4. Ownership of Confidential Information. Recipient agrees that all Confidential Information shall remain the property of Discloser, and that Discloser may use such Confidential Information

for any purpose without obligation to Recipient. Nothing contained herein shall be construed as granting or implying any transfer of rights to Recipient in the Confidential Information, or any patents or other intellectual property protecting or relating to the Confidential Information.

5. Term and Termination. The obligations of this Agreement shall be continuing until the Confidential Information disclosed to Recipient is no longer confidential.

6. Survival of Rights and Obligations. This Agreement shall be binding upon, inure to the benefit of, and be enforceable by (a) Discloser, its successors, and assigns; and (b) Recipient, its successors and assigns.

IN WITNESS WHEREOF, the parties have executed this agreement effective as of the date first written above

DISCLOSER (_____)

RECIPIENT (_____)

Signed:_____

Signed:_____

Print Name:_____

Print Name:_____

Title:_____

Title:_____

Date:_____

Date:_____



Appendix H

Excel spreadsheet house on encrypted flash drive labeled A kept in lock box, in PI's locked office.

Participant's Name	Institution	Email	Phone	Given Pseudonym

Appendix I



Appendix J

