PERCEPTIONS AND WRITING EXPERIENCES OF NURSING STUDENTS: 
A MIXED-METHODS EXPLORATION OF WRITING SELF-EFFICACY

by

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Abstract

The investigated research problem was the need to identify the facilitators and barriers to competent academic writing by examining writing self-efficacy and academic writing experiences of entry-level BSN students. The study’s participants included entry-level bachelor of science in nursing (BSN) students in a Midwestern state. The mixed methods study, using a concurrent triangulation design, incorporated a quantitative writing self-efficacy survey and focus group interviews for data collection. Descriptive statistics, one-way analysis of variance (ANOVA), and the Kruskal-Wallis test were used to analyze the quantitative data. Content analysis with identification of categories and themes was used to analyze the qualitative data. A statistically significant ($p = 0.05$) difference was found related to the gender demographic variable. No statistically significant differences were found related to the demographic variables of age, nursing student status, employment status, primary care provider status, support system status, first speaking language, and prior college-level writing course. Findings indicated that a variety of facilitators and barriers hindered the achievement of academic writing for entry-level BSN students: environmental factors, personal factors, and behavioral factors as shown in the reciprocal determinism model (Bandura, 1977, 1986). Three main implications for nursing education included the following: increase writing self-efficacy, decrease hindrances to achieving competent academic writing, and increase facilitators to achieving competent academic writing. The achievement of competent academic writing for entry-level BSN students is imperative for academic student success and for the scientific sustainability of the nursing profession.
Dedication

I dedicate my doctoral journey to Lauren, Taylor, and Garrett, my three children, who do not understand why their mom enjoys sitting at a computer many hours a day writing and doing research. My hope is that someday they will understand the values of perseverance and gratitude as they make their way into the adult world as educated and productive members of society.

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CHAPTER 1: INTRODUCTION

Introduction to the Problem

The purpose of this mixed-methodology research study was to empirically determine writing self-efficacy and qualitatively explore writing experiences of entry-level bachelor of science in nursing (BSN) students. The investigated research problem was the need to identify the facilitators and barriers to competent academic writing by examining writing self-efficacy and academic writing experiences of entry-level BSN students. The comprehensive approach of the dual data collection process was indicated for this study in order to rigorously explore the intangible construct (Creswell, 2009; Houser, 2008) of writing self-efficacy.

Competent writing has been an essential academic skill that entry-level BSN students have been expected to have in order to demonstrate written application of critical thinking skills and for successful completion of high-stakes writing assignments (Giddens & Lobo, 2008). The ability to demonstrate competent academic writing has been an expectation of practicing professional nurses (Luthy, Peterson, Lassetter, & Callister, 2009; Whitehead, 2002) for the dissemination of research findings and the enhancement of evidence-based practice (American Association of Colleges of Nursing, 2008; Newton & Moore, 2010). The American Association of Colleges of Nursing (AACN, 2008) confirmed that effective written communication is necessary to ensure safe nursing practice and disseminate evidence-based research.
Literature suggested that nursing students demonstrate significant difficulty with academic writing, limited writing experiences, and writing incompetency at the college level (Cho & Schunn, 2007; McMillan & Raines, 2010; Thorpe & Kulig, 1997). Incompetent academic writing in BSN education has a potential negative impact on the scientific progression and advancement of the nursing profession. The potential negative impact might be offset by identifying and understanding nursing students’ perception of writing self-efficacy and academic writing experiences and using the scientific data to support and enhance writing education in nursing education.

The remainder of Chapter 1 introduces the background and theoretical context for the study. The chapter also identifies the problem statement, the study’s purpose, the study’s rational, the research questions, the significance and nature of the study, definition of terms relevant to the study, and assumptions, limitations, and delimitations of the study.

**Background, Context, and Theoretical Framework for the Problem**

Bandura (1977, 1986) changed the social learning theory to the social cognitive theory (Bandura, 1977, 1986) to accentuate that cognitive thinking is a critical factor in understanding reality, self-regulating actions, processing information, and performing behaviors. The social cognitive theory (Bandura, 2001) indicated that students were proactive and self-regulatory with intrinsic self-beliefs and management of personal feelings, actions, and thoughts (Pajares, 2003). Self-efficacy was explained as the belief in a person’s ability to manage forthcoming situations (Bandura, 1986). Key components of self-efficacy included personal beliefs and perceptions about capabilities in accomplishing tasks, including the situation-specific task of competent academic writing.
Because self-efficacy was situation-specific (Rosenstock, Strecher, & Becker, 1988), the writing self-efficacy construct is appropriate for this study.

Self-efficacy theory (Bandura, 1977, 1986) was used as the study’s framework. Topics used to organize the literature review included Bandura’s self-efficacy theory, self-efficacy in nursing education, writing abilities of nursing students, writing educational strategies in nursing education, and research methodologies used to study academic writing in nursing education.

Pajares (2003) suggested that self-efficacy influenced writing outcomes and predicted students’ writing performances. Bandura’s (1977, 1986) self-efficacy construct indicated that individual behavior, personal factors, and environmental influences all interacted to impact the degree of self-efficacy. High self-confidence about accomplishing a specific task translated into attainment of positive outcomes, an increase in self-efficacy, and achievement of goals (Bandura, 1977, 1986). Students’ self-efficacy was directly proportional to students’ achievement of writing and academic performances (Clark & Dodge, 1999; Laschinger, 1996; Pajares, 1996, 1997, 2003; Tresolini & Stritter, 1994). A positive correlation existed between efficacy expectations, achievement, and the successful performance of a skill or behavior (Clark & Dodge, 1999; Laschinger, 1996; Tresolini & Stritter, 1994). High self-efficacy suggested a strong potential for achieving competent academic writing. Therefore, as entry-level BSN students strive for legitimate high writing self-efficacy, the goal for them to achieve competent academic writing may be attainable with the assistance of nurse educators.

Successful performance of a skill was positively correlated to a higher degree of self-efficacy. Unsuccessful skill performance was linked to a lower level of self-efficacy.
Participation in writing education programs was associated with elevated levels of writing self-efficacy because as students learned more about competent academic writing, self-efficacy was enhanced, which was critical to the overall long-term improvement of writing abilities (Pajares, 2003).

Many writing enhancement strategies were noted in the literature (Bickes & Schim, 2010; Lloyd, 2007; Luthy et al., 2009; Roberts & Goss, 2009), but writing self-efficacy was rarely mentioned, nor did the literature indicate assessment strategies that were used to formulate the writing educational interventions. Whitehead’s (2002) phenomenological study identified themes from the students’ perspectives about academic writing experiences, but, writing self-efficacy was not addressed. Therefore, there was an apparent gap in the literature with respect to writing self-efficacy of nursing students.

**Statement of the Problem**

The importance of scholarly writing in the nursing profession was documented in the *Core Competencies of Nurse Educators* (National League for Nursing, 2005). The need for nursing students to achieve competent academic writing was strongly advocated and recommended by AACN (2008). However, there was little evidence to indicate that collegiate students, including nursing students, demonstrated competent academic writing (Cho & Schunn, 2007; Giddens & Lobo, 2008; Good, 2009). Literature suggested that nursing students demonstrated significant difficulty with academic writing, had limited writing experiences, and demonstrated writing incompetency at the college level (Cho & Schunn, 2007; McMillan & Raines, 2010; Thorpe & Kulig, 1997). The emphasis on clinical documentation using concise terms mitigated against the progression of
competent academic writing (Thorpe & Kulig, 1997), especially with high-stakes writing assignments.

The investigated research problem was the need to identify the facilitators and barriers to competent academic writing by examining writing self-efficacy and academic writing experiences of entry-level BSN students. The need for the mixed-methods research study was indicated due to a lack of scholarly evidence about writing self-efficacy in entry-level BSN nursing education.

Purpose of the Study

The purpose of this mixed-methodology research study was to empirically determine writing self-efficacy and qualitatively explore academic writing experiences of entry-level BSN students. Quantitatively, a writing self-efficacy survey (Shell, Murphy, & Bruning, 1989) based on Bandura’s self-efficacy theory (1994) was used to identify writing skill areas in which students self-reported their perceived abilities with successfully completing basic writing skills. The skill areas that are determined to be low on the writing self-efficacy survey could be used to develop specific learning objectives for writing programs. Furthermore, writing education strategies can potentially enhance writing self-efficacy of BSN students and assist them with achieving competent academic writing, which supports Pajares (2003) who indicated that self-efficacy influences writing outcomes and predicts students’ performances.

Self-efficacy may not be the only factor in achieving competent writing (Peterson & Bredow, 2009). Psychological barriers and other experiences may also influence achievement of competent writing. Bruning, Dempsey, Kauffman, Haines, and Zumbrunn (2012) asserted that writing is a difficult cognitive task that develops slowly
over time. Schraw (2006) explained that writing involved the clustering of thoughts and experiences into meaningful mental visuals.

Cognitive and mental processes and the external environment present during the academic writing process were explored through the qualitative approach of interviewing three focus groups of five or six entry-level BSN students about their academic writing experiences. The qualitative interview approach provided scientific data about the subjects’ perspectives about factors that hindered and facilitated writing self-efficacy and academic writing experiences. Overall, the study’s purpose was to investigate writing self-efficacy and explore academic writing experiences of entry-level BSN students, specifically focusing on the hindrances and facilitators that influenced achievement of competent academic writing.

**Research Questions**

This study was conducted using a mixed methods design so that the complex nature of the writing self-efficacy phenomenon could be fully investigated. The research questions were constructed using both quantitative and qualitative perspectives. The mixed-methodology approach addressed the research questions, the hypotheses, and the null hypotheses. Quantitatively, an eight-question writing self-efficacy survey (Shell et al., 1989) based on Bandura’s self-efficacy theory (1994) was utilized to empirically determine the self-efficacy of entry-level BSN students. The quantitative data was also used to determine if relationships were present between entry-level BSN student writing self-efficacy and nursing student demographic variables.

For the qualitative analysis, exploring the students’ qualitative perspectives provided rich and meaningful data about hindrances and facilitators that influenced
achievement of writing competence for entry-level BSN students. The data might be used by nurse educators to enhance the effectiveness of writing educational interventions needed to ensure overall achievement of writing competence in nursing education.

The main research questions, subquestions, and hypotheses are as follows.

**Main Quantitative Research Question**

What is the writing self-efficacy of entry-level BSN students?

**Hypotheses and Null Hypotheses for the Quantitative Component**

**Research subquestion 1.** Is there a relationship between entry-level BSN students’ writing self-efficacy and their age?

$H_1$. A statistically significant relationship exists between entry-level BSN students’ writing self-efficacy and their age.

$H_0$. No statistically significant relationship exists between entry-level BSN students’ writing self-efficacy and their age.

**Research subquestion 2.** Is there a relationship between entry-level BSN students’ writing self-efficacy and their gender?

$H_1$. A statistically significant relationship exists between entry-level BSN students’ writing self-efficacy and their gender.

$H_0$. No statistically significant relationship exists between entry-level BSN students’ writing self-efficacy and their gender.

**Research subquestion 3.** Is there a relationship between entry-level BSN students’ writing self-efficacy and nursing student status?

$H_1$. A statistically significant relationship exists between entry-level BSN students’ writing self-efficacy and their student status.

$H_0$. No statistically significant relationship exists between entry-level BSN students’ writing self-efficacy and student status.

**Research subquestion 4.** Is there a relationship between entry-level BSN students’ writing self-efficacy and their employment status?
\( H_1 \). A statistically significant relationship exists between entry-level BSN students’ writing self-efficacy and their employment status.

\( H_0 \). No statistically significant relationship exists between entry-level BSN students’ writing self-efficacy and their employment status.

**Research subquestion 5.** Is there a relationship between entry-level BSN students’ writing self-efficacy and their primary care-provider status?

\( H_1 \). A statistically significant relationship exists between entry-level BSN students’ writing self-efficacy and their primary care-provider status.

\( H_0 \). No statistically significant relationship exists between entry-level BSN students’ writing self-efficacy and their primary care-provider status.

**Research subquestion 6.** Is there a relationship between entry-level BSN students’ writing self-efficacy and their support-system status?

\( H_1 \). A statistically significant relationship exists between entry-level BSN students’ writing self-efficacy and their support-system status.

\( H_0 \). No statistically significant relationship exists between entry-level BSN students’ writing self-efficacy and their support-system status.

**Research subquestion 7.** Is there a relationship between entry-level BSN students’ writing self-efficacy and completion of a prior college-level writing course?

\( H_1 \). A statistically significant relationship exists between entry-level BSN students’ writing self-efficacy and completion of prior college-level writing course.

\( H_0 \). No statistically significant relationship exists between entry-level BSN students’ writing self-efficacy and completion of prior college-level writing course.

**Research subquestion 8.** Is there a relationship between entry-level BSN students’ writing self-efficacy and first-speaking language?

\( H_1 \). A statistically significant relationship exists between entry-level BSN students’ writing self-efficacy and first-speaking language.

\( H_0 \). No statistically significant relationship exists between entry-level BSN students’ writing self-efficacy and first-speaking language.
Main Qualitative Research Question

What has hindered or facilitated past writing experiences of entry-level BSN students?

Qualitative Subquestion

What events, resources, issues, and relationships do entry-level BSN students perceive to be significant in their nursing education writing experiences?

Rationale, Relevance, and Significance of Study

Rationale for the Study

This study is relevant to professional nursing and the nursing education specialty because competent academic writing is imperative for the sustainability of evidence-based nursing practice, scientific inquiry (McMillan & Raines, 2010; Whitehead, 2002), and dissemination of research findings. Dissemination of research is an “ethical and professional responsibility” (Lambie, Sias, Davis, Lawson, & Akos, 2008, p. 18) for not only counselors, as mentioned in this particular study, but also other professional nurses (AACN, 2008). Learning the process of competent writing is a vital academic and professional skill. An assumption is made that if BSN students can achieve high writing self-efficacy early in nursing education, they may be more self-efficacious in their writing abilities as student nurses. In subsequent roles as professional nurses, they may learn to value and understand the need to write for publication, which will enhance the dissemination of nursing knowledge and scientifically advance the nursing profession. Additionally, nursing professionals need clarity in writing for clinical documentation to prevent the potential of committing medical errors (Thorpe & Kulig, 1997).
Profession. The board of directors of the National League for Nursing (n.d.) approved nursing education research priorities focused on the advancement of the science of nursing education. The topic of writing self-efficacy in entry-level nursing education was associated with the development of the science of nursing education in which exemplary practices of academic writing instruction can be explored, described, and subsequently used to develop valuable writing educational strategies from the students’ perspectives and ultimately increase nursing students’ writing self-efficacy.

Additionally, the AACN (2008) advised that it is critical for nursing students to effectively communicate by writing. Baccalaureate nursing programs are responsible for ensuring that nursing students write proficiently in order to achieve and maintain professional nursing competencies and for ensuring that professional nurses are equipped to participate, document, and disseminate research findings.

The National League for Nursing (2005) Core Competencies suggested that nurse educators are facilitators of learning and learner development. Accreditation agencies expect nursing curricula to incorporate scholarly writing competencies. Nursing program accreditation sets the standards for respectable and influential college academic programs and holds nursing programs accountable and responsible to peers and the public for producing competent nursing professionals (Keating, 2006). Because the accrediting bodies highly value competent writing, academic writing is a curriculum essential for nursing education programs.

Students. The literature suggested that nursing students demonstrated significant difficulty with academic writing (McMillan & Raines, 2010) and demonstrated writing incompetency at the college level (Cho & Schunn, 2007), which may have been due to
the lack of writing practice in high school courses and college writing courses. The National Commission on Writing for America’s Families, Schools, and Colleges (2006) found that writing classes outside English composition courses in high school and college settings were not providing students with writing practice time nor were students assigned compositions as homework. The lack of student writing experience with formal writing negatively influenced the achievement of competent academic writing.

Cho and Schunn (2007) cited statistics from the 1998 National Assessment of Educational Process. The statistics showed that 1% of senior high school students demonstrated proficient writing. Most high school seniors demonstrated writing skills at the basic level, which meant that high school seniors, within an allotted test-taking time, were able to document a response essay that showed some analytical skills and organization of ideas, but grammar, spelling, punctuation, and capitalization may not have been accurate and contained errors.

Salahu-Din, Perky, and Miller (2008) cited statistics in The Nation’s Report Card: Writing 2007 and revealed that in 2007, students’ writing scores were at or above the proficient level and were higher than the statistics reported in 1998, but there was no significant improvement in writing skills from 2002. The statistics suggested that writing skill performance of high school seniors was slowly improving, but that a majority of college freshmen and sophomores were not prepared to write proficiently at the college level. The less-than-proficient writing skills of high school seniors translated to below-average student preparation for college (Newton & Moore, 2010) and an educational writing incompetency at the college level (Giddens & Lobo, 2008). Therefore, an assumption was made, and affirmed by Good (2009), that writing educational programs
with an intensive focus on the practice of academic writing was an academic and curricular need in higher education, including nursing education.

A multifaceted problem existed when nursing students did not demonstrate competent writing. Nursing students did not seem to understand the relationship between strong academic writing, effective communication, and collaboration of patient care (McMillan & Raines, 2010). Diehl (2007) affirmed that the most common writing concerns of nursing students included uncertainty about expression of ideas in writing and frustration with following APA format. Successful nursing education was greatly diminished because nursing students demonstrated incompetent academic writing.

**Summary.** This research study determined entry-level BSN students’ writing self-efficacy and explored academic writing experiences. Writing self-efficacy was empirically operationalized by using a writing self-efficacy survey instrument (Shell et al., 1989) based on Bandura’s (1994) self-efficacy theory. Additionally, BSN students’ perceptions and academic writing experiences were qualitatively explored so that a more accurate and complete representation of the phenomenon was captured (Johnson & Turner, 2003). The two sets of quantitative and qualitative data were compared within a concurrent triangulation design to provide scholarly information about the hindrances and facilitators to competent academic writing of entry-level BSN students.

**Relevance of the Study**

Bandura’s (1977, 1986) self-efficacy theory can be used as a framework to guide research. Nurse educators can use the framework to assess, evaluate, and subsequently enhance nursing students’ writing self-efficacy.
**Research.** Research indicated that educational strategies could be beneficial in increasing self-efficacy. Examples of educational strategies include the integration of person variables and situational variables (Brown, 1999; Kirk, 2012; Schunk, 1991). Person variables, which included personal goal setting students or goal setting by the educator for students, helped students meet multiple, small, attainable goals that could be met in a short period of time and could lead to increasing the student’s self-efficacy. Situational variables incorporated as an educational strategy for increasing self-efficacy included student observation of peer and teacher role models, integration of early success feedback and ability feedback from the educator, and integration of a rewards system linked to student accomplishments (Brown, 1999; Kirk, 2012; Schunk, 1991). The diverse educational strategies of incorporating personal and situational variables in the classroom setting, especially for writing educational programs in nursing education, may enable students to achieve increased writing self-efficacy. High self-efficacy translated to an increased desire and motivation to want to succeed and to continue improving writing abilities (Bruning, Dempsey, Kauffman, Haines, & Zumbrunn, 2012).

**Evidence.** The study’s results provided an evidence-based description of the hindrances and facilitators that entry-level BSN students may have experienced when trying to achieve competent academic writing. Results showed that relationships existed between writing self-efficacy and nursing student demographic variables. Information from this study might inform nurse educators to identify low ranges of writing self-efficacy that can be used as a starting point for developing strategic learning objectives that have the potential of enhancing nursing students’ writing experiences.
Summary. In summary, competent academic writing is imperative for the sustainability of the nursing profession. Mascle (2013) suggested that addressing students’ academic writing needs throughout the entire nursing education process is advised, not just in one class, but in several classes throughout the entire nursing education curriculum (Mascle, 2013). Analysis of the writing self-efficacy phenomenon from the perspectives of entry-level BSN students provided data that enabled nurse educators to more fully understand the hindrances and facilitators of academic writing experiences. Writing educational interventions may be developed based on the students’ needs and perspectives.

Significance of the Study

Luszczynska, Gutiérrez-Doña, and Schwarzer (2005) explained that future self-efficacy research should focus on determining self-efficacy for specific tasks or skills. This study supported Bandura’s (1994) self-efficacy theory and focused on determining self-efficacy for academic writing. New information and knowledge about self-efficacy was gained by determining writing self-efficacy and exploring academic writing experiences of entry-level BSN students.

Practice. Investigating writing self-efficacy of BSN students, exploring academic writing experiences, and identifying hindrances and facilitators to academic writing will enable nurse educators to more fully understand the writing self-efficacy phenomenon in nursing education. Subsequently, the new information can be used by nurse educators to enhance writing education programs that are needed to improve writing self-efficacy and potentially increase the overall achievement of competent
academic writing and student success (Bandura, 1994; Goldenberg, Andrusyszyn, & Iwasiw, 2005; Goldenberg, Iwasiw, & MacMaster, 1997; Multon, Brown, & Lent, 1991).

**Theoretical relationships.** Figure 1 (Rosenstock, Strecher, & Becker, 1988) illustrates the relationship of the five major concepts of the social cognitive theory, including person, behavior, outcome, efficacy expectations (self-efficacy), and outcome expectations. Each concept can be adapted specifically for writing self-efficacy to show its influence on outcome expectations and its potential capability to enhance the discreet knowledge base of competent academic writing of entry-level BSN students.

Application of self-theory (Bandura, 1994) to the study of academic writing informed Figure 1 ((Rosenstock, Strecher, & Becker, 1988). An explanation of Figure 1 is as follows: In order for an entry-level BSN student (person) to achieve competent academic writing (behavior) for academic and professional reasons (outcome), entry-level BSN students must believe that they are capable of achieving competent academic writing (efficacy expectations) and that competent academic writing will benefit their academic and professional career (outcome expectation). By quantitatively determining writing self-efficacy and by qualitatively exploring the hindrances and facilitators to academic writing of entry-level BSN students, the discreet piece of theoretical knowledge about writing efficacy expectations can be expanded specifically for nursing education.
Nature of the Study

A mixed-methods research design was used for this study so that both the quantitative and qualitative nature of the writing self-efficacy phenomenon could be determined and explored from the perspectives of entry-level BSN students, including the hindrances, facilitators, and experiences with academic writing. Johnson and Turner (2003) explained that a mixed-methods approach provided a more accurate and complete representation of the phenomenon in question, which is writing self-efficacy in this study. Therefore, the mixed-methods research design was ideal for studying writing self-efficacy.
The concurrent triangulation strategy was used for this study. Both quantitative and qualitative data were collected within a few hours of each other, separately analyzed, and equally compared to determine similarities and differences of the two data sets (Creswell, 2009; Houser, 2008; Tashakkori & Teddlie, 2003). The dual data collection process of this mixed-methods study was comprehensive and was considered a positive attribute that eliminated a potential limitation of a single-method research design.

**Strategy.** The concurrent triangulation strategy was used so that the intangible construct (Creswell, 2009; Houser, 2008) of writing self-efficacy could be explored, both empirically with a writing self-efficacy survey (Shell et al., 1989) and qualitatively with focus group interviews to yield rich, meaningful data from the nursing students’ perspectives about their experiences with academic writing. Incorporating the qualitative aspect of the study with equal emphasis on the empirical analysis and qualitative data generated a strong, well-balanced, and meaningful research study that yielded valid and credible research findings (Creswell, 2009; Houser, 2008; Tashakori & Teddlie, 2003).

Three essential aspects addressed during data collection and data analyses of the concurrent triangulation design were (a) timing of the data collection methods, (b) priority status of the data sets, and (c) comparing and contrasting of the data (Tashakkori & Teddlie, 2003). Quantitative and qualitative data collection took place in close real time. The data sets were given equal weight in the data analysis (Tashakorri & Teddlie, 2003) as both data sets were analyzed separately because both the quantitative and qualitative data sets were essential for research on writing self-efficacy.

**Qualitative theorizing.** Theorizing was made explicit during the beginning of the study in order to direct the research questions and provide a predominant framework.
for the data collection process and research implications (Creswell, 2009). During qualitative data analysis, raw transcribed data was documented. Categories were identified and grouped into main themes. The qualitative data was compared with the empirical data analyses from the writing self-efficacy survey.

The qualitative component of the mixed-methods design yielded rich and meaningful data about the hindrances and facilitators of academic writing that entry-level BSN students may experience. The researcher encouraged the nursing student participants to personally explore their academic writing experiences. By interviewing entry-level BSN students, the researcher was able to investigate the realities, perceptions, and experiences of the participants and to describe the hindering and facilitative influences of those experiences on participants’ achievement of competent academic writing.

**Working Definition of Terms**

**Confidence**

Bandura (1997) defined confidence as the strength of a belief. Confidence is not considered a theoretical construct (Bandura, 1997). When confidence was described to the survey sample of entry-level BSN students, the terms were explained as having a similar meaning to self-efficacy, as indicated on the writing self-efficacy survey. Participants were asked to self-rate their personal confidence according to their perceived ability to accomplish the writing skill in question (Shell et al., 1989).

**Demographic Variables**

Demographic variables were defined as personal descriptions identified on the demographic survey. Participants were instructed to mark an answer on the demographic
survey regarding the following variables that best fit their situation: age, gender, nursing student status, employment status, availability of family and friends as a support system, primary care-provider status in regard to the responsibility of caring for a child under the age of 18 years or the need to care for an adult who is 18 years or older, first-speaking language, and time frame of experience with successfully completing a college-level writing course.

**Entry-Level BSN Student**

Entry-level BSN student was defined as a nursing student enrolled in and actively participating in the first year of an upper division nursing education program. Entry-level BSN student in this study does not refer to students enrolled in pre-nursing programs.

**Nontraditional College Student**

Nontraditional college student was defined as one who does not attend college directly after high school and may possess one or more of the following criteria: financially independent, primary care provider for children under the age of 18 years or adults over the age of 19 years, employed while actively taking college classes, or classified as a single parent (Newbold, Mehta, & Forbus, 2010).

**Outcome Expectations**

Outcome expectations were defined as the projected consequences of one’s personal behavior (Bandura, 1995). Bandura (1997) explained that outcome expectations are thoughts that one’s particular behavior will most likely cause a particular result.

**Perception**

Perception was defined as one’s awareness of a situation or cognitive environment. Kant defined perception as “empirical consciousnesses, [a] representation
given by sensation” (“Perception,” n.d., para. 1). Thus, perception is a cognitive and personal understanding about one’s thoughts and ideas. Individuals possess personal awareness and sensations about their internal cognitive environment and their external physical environment.

**Self-Efficacy/Efficacy Expectations**

Bandura (1986) defined self-efficacy or efficacy expectations as the belief that one has about capabilities to produce outcomes. Bandura indicated that one has intrinsic thoughts about personal capabilities to plan and perform the actions needed to control future situations. Bandura’s (1977) description of self-efficacy or efficacy expectations indicated that one has intrinsic thoughts about personal capabilities to plan and perform the actions needed to control future situations. Self-efficacy is situation-specific, varies from one task to another (Rosenstock et al., 1988; Siegle, 2000), and is a conviction that one has about the ability needed to succeed in performing specific tasks. Self-efficacy, as a theoretical-based construct, can be operationalized (Bandura, 1997). When providing descriptions of confidence and self-efficacy to the survey sample of entry-level BSN students, the terms were explained as having similar meanings, as Shell et al. (1989) described in his explanation of the writing self-efficacy survey.

**Traditional College Student**

A traditional college student was defined as one who graduated from high school with a high school diploma and directly attended college following high school. A traditional college student could also attend college directly after high school but earn the equivalent of a high school diploma by successfully completing a home school program, by successfully completing the High School Equivalency Program, or by successfully

Assumptions, Limitations, and Delimitations

Assumptions

The following assumptions apply to this research study:

1. Nursing students experience many environmental and cognitive influences that hinder and facilitate the achievement of competent academic writing.

2. Nursing students may not know or understand the correct method of writing formal academic papers regarding grammar, punctuation, and APA formatting.

3. Entry-level BSN students may have the ability to successfully complete formal academic writing assignments, but they may also think they are not capable of successfully completing formal academic writing assignments.

4. The sample of nursing students will be honest when answering the quantitative writing self-efficacy survey and during the qualitative focus group interview process.

5. The participants in this study will understand the progression of interview questioning as described by the researcher.

Limitations

A convenience sample of three BSN programs in a Midwestern state was used for the quantitative component of this study. Convenience sampling was a limitation and reduced the generalizability of quantitative research findings. However, for the qualitative portion, purposive sampling was used because the purpose of the focus group interview process was to explore academic writing experiences of entry-level BSN students. For the qualitative data analysis, transferability may or may not occur. The researcher’s responsibility is to provide adequate descriptive data so the reader can
understand and evaluate the findings and subsequently apply the findings to similar populations.

A monetary award was given to those participants who volunteered for the focus group interview process because the interview required a more extensive time commitment than that of the quantitative survey. Because of the monetary award, interview participants may not have been truthful when answering the questions or may not have respected the scientific inquiry process, which may have skewed the research data.

**Delimitations**

The study provided a quantitative and qualitative description of writing self-efficacy and academic writing experiences of entry-level BSN students. Relationships between writing self-efficacy and nursing student demographic variables were shown during data analysis. However, a delimitation was that this study did not provide information about causal relationships. This study only determined if relationships were shown between writing self-efficacy and the demographic variables.

The scope of the study was narrowed to focus on a convenience sample of entry-level BSN students in a middle area of a Midwestern state. Quantitative findings may be generalizable for the middle area of the Midwestern state but not for all entry-level BSN students in the United States. Qualitative findings may be transferable to other regions of the United States if the researcher provides a rich description of the sample (Merriam, 2009). Researchers may apply the findings to other similar settings, regions, or groups within the United States (Polit & Beck, 2008).
Organization of the Remainder of the Study

This study and its findings and results are presented in five chapters. The literature review is presented in Chapter 2. Chapter 3 delineates the research methodology. Chapter 4 documents the results and analysis of the quantitative and qualitative data, and Chapter 5 contains a summary of findings, conclusions derived from the data presented in Chapter 4 implications for theory and practice, relationship of findings as compared to the literature review, recommendations for practice, and opportunities for future research.
CHAPTER 2: LITERATURE REVIEW

The literature review provided scholarly information to support the purpose of the study, which was to empirically determine writing self-efficacy and qualitatively explore academic writing experiences of entry-level bachelor of science in nursing (BSN) students. A gap in the scholarly literature revealed that very little information was available regarding writing self-efficacy in nursing education.

A variety of databases and search terms were used to conduct the scholarly literature review. The search was conducted using two main topics: self-efficacy and academic writing in nursing education. The review of literature regarding methodological issues was conducted concurrently. The data bases used were Academic Search Premier, CINAHL Complete, ERIC, PsycARTICLES, PsychINFO, SocINDEX with Full Text, and Google Scholar. An abundance of information was found for self-efficacy, but very little information was found regarding writing self-efficacy, especially writing self-efficacy in nursing education. Search terms used were as follows: self-efficacy, writing self-efficacy, self-efficacy in nursing education, academic writing in nursing education, writing self-efficacy in nursing education, and writing interventions in nursing education. After pertinent articles had been found, the bibliographical lists for each of the articles were used to expand the search. Since very little information was found about writing self-efficacy in nursing education, expository articles were included in the scholarly literature review because the stories and information were pertinent to the
qualitative nature of exploring the writing self-efficacy construct in this mixed methods study. Figure 2 illustrates and summarizes the literature review for this study:

Figure 2. Literature review concept map for writing self-efficacy of entry-level BSN students.

Chapter 2 discusses Bandura’s (1994) self-efficacy theory as the supporting framework for this study. Discussion and synthesis of research findings addressed the research literature, including findings about general self-efficacy, personal self-efficacy,
self-efficacy development, self-efficacy in academics, outcomes expectations and self-efficacy expectations, self-efficacy theory and nursing education, writing abilities of both collegiate students and nursing students, writing educational strategies in higher education and nursing education, and quantitative and qualitative studies about writing in nursing education. A critique of previous research completed the literature review for writing self-efficacy and academic writing experiences in nursing education.

**Theoretical Framework**

**Self-Efficacy**

The self-efficacy construct of Bandura’s (1977, 1986) social cognitive theory was used as the study’s framework. Bandura changed the social learning theory to the social cognitive theory (1977, 1986) to indicate that cognitive thinking was a critical factor in understanding reality, self-regulating actions, processing information, and performing behaviors. When the social learning theory was changed to the social cognitive theory, Bandura (2001) rejected the behaviorist notion of passive students and indicated that students were proactive and self-regulatory with inherent self-beliefs about controlling their feelings, thoughts, and actions. Students’ perceptions about their capabilities in accomplishing tasks, such as competent academic writing, were identified as key components of self-efficacy. Rosenstock et al. (1988) indicated that self-efficacy is situation-specific. The self-efficacy construct in regard to academic writing was appropriate in this study on competent academic writing in nursing education. Figure 3 illustrates and summarizes the theoretical components used in this study:
Theoretical Components

Social Learning Theory
...was changed to

Social Cognitive Theory
...which included

Self-Efficacy Theory
...that incorporated

Reciprocal Determinism

Figure 3. Theoretical Components in Logical Progression from Social Learning Theory to Reciprocal Determinism.

The self-efficacy construct of the social cognitive theory indicates that three important variables, (a) individual behavior, (b) personal characteristics, and (c) environmental influences, are all interactive and influence each other (Bandura, 1977, 1986). The interaction is defined as reciprocal determinism. Therefore, in order for individuals to achieve positive outcomes and personal goals, the individual needs to personally acknowledge all three variables. They affect positive goal achievement and allow individuals to combine their strengths with the support of others. Figure 4 illustrates reciprocal determinism and shows how the three variables reciprocate with each other (Bandura, 1977, 1986). The reciprocal interaction of those variables and the
findings and results in this study are the basis for the outcomes and recommendations for action and future research.

Bahn (2001) and Pajares (2002) also addressed the reciprocal determinism concept in their expository articles on the social learning theory and described how multiple factors influence human functioning. For example, one who has a high self-efficacy (personal factor) with a strong environmental support system of peers and academic resources will show evidence of behaviors that are conducive to meeting one’s goals. Even if environmental factors of peers and academic resources are not very strong, one may have a strong self-efficacy expectation to succeed, and individual behaviors may still be helpful in meeting personal goals.

Bandura’s (1977, 1986) concept of reciprocal determinism (a discreet and integral piece of the self-efficacy theory) recognized that one’s individual behavior, personal
characteristics, and environmental factors support the self-efficacy theory. It also augments the social cognitive theory that focuses on learning and behavior in social situations. Individuals’ actions and performances are the consequences of the ever-changing environment, behavioral factors, and personal characteristics.

Each of the three factors of reciprocal determinism (Bandura, 1977, 1986) encompasses a distinct subset of characteristics. The environment is composed of one’s social and physical surroundings that may provide reinforcement or punishment. 

Behavior is defined as one’s skills and actions. Personal characteristics include one’s thoughts, motivations, perceptions, values, attitudes, emotions, beliefs, and goals. The three factors are inherent in everyone’s well-being. A change in one factor reciprocates a change in another factor. The change can be positive or negative, a reinforcement or a punishment.

Nurse educators have the opportunity to implement features of the reciprocal determinism model in the classroom by implementing instructional strategies that consider students’ personal circumstances, behavioral issues, and environmental influences so that students have the opportunity to enhance their emotional equilibrium, self-beliefs, and academic abilities (Pajares, 2002). In addition, nurse educators have the opportunity to change the classroom environment and teaching/learning strategies that may be more diverse and conducive to meeting students’ learning needs.

**Personal self-efficacy.** Personal self-efficacy influences one’s choices, actions, and levels of competence. Self-efficacy beliefs affect the extent of one’s efforts to perform activities, and the extent of one’s persistence and resilience when faced with challenging circumstances (Pajares, 2002). A major aspect of human functioning is one’s
level of personal self-efficacy beliefs (Bandura, 1997) that provide a source for motivation, a degree of well-being, and a sense of achievement of personal goals (Peterson & Bredow, 2009). Bandura (1997) indicated that the individual has the internal power or belief to produce desired actions. Self-efficacy beliefs determine if one will produce optimistic or destructive thoughts. Bandura (1997) asserted, that high self-efficacy is critical in one’s academic, personal, and professional life experiences, and allows one the ability and confidence to view challenging situations in a positive manner. Individuals who have a low level of self-efficacy may feel intimidated by difficult tasks and evade challenging situations (Bandura, 1994). Levels of self-efficacy are determined by previous situations and circumstances that may have resulted in positive or negative outcomes (Shelton, 2003).

**Development of self-efficacy.** Self-efficacy development starts in the family unit when parents continuously offer a motivating atmosphere that enhances a child’s curiosity and allows for challenging situations that help shape self-efficacy development (Schunk & Pajares, 2002). Children who are taught to manage diverse situations exhibit higher self-efficacy levels (Schunk & Pajares, 2002). Parents and educators who encourage children will help the learners achieve higher levels of self-efficacy (Bandura, Barbaranelli, Caprara, & Pastorelli, 1996).

Schunk and Pajares (2002) suggested that peers and peer groups affect children’s self-efficacy development and motivation to be successful in skill performance. Schunk and Pajares also suggested that as students move forward in school, that self-efficacy beliefs seemed to decrease due to more peer competition, less teacher attention, and the multiple stresses that were apparent within a school system environment. Deteriorating
relationships among peers can negatively impact the student’s level of personal efficacy (Bandura, 1994). Conversely, positive and strong peer relationships positively impacted the growth of personal self-efficacy. Most of the time, adolescents adapt and can successfully endure the trials of adolescence, but sometimes, adolescents who have a low self-efficacy and who feel helpless appear to be distraught due to multiple expectations of home life and school situations (Bandura, 1994).

Bandura (1994) found that young adulthood could be a challenging time because of the pressures of marital relationships, partnerships, parenthood, academic, and career responsibilities. Young adults who have a high self-efficacy and a strong will to persist may be more likely to handle difficult situations in an optimistic manner and achieve positive results. Young adults with self-limiting thoughts may experience a stressful time in young adulthood and may find it challenging to persist in a positive manner (Bandura, 1994). Knowing and understanding the demanding roles of students in this age group is important so that academic support can be implemented to help ensure the chances of collegiate academic success.

**Academic self-efficacy.** Self-efficacy impacts learning, achievement, and motivation in the academic setting (Schunk & Pajares, 2002). Classroom designs should be supportive and nurturing and validate students’ cognitive skills and achievements (Bandura, 1994). If a learner is not progressing satisfactorily, self-efficacy may not diminish because the learner who has a strong belief in performing better and has the motivation to succeed (Schunk & Pajares, 2002) may be likely to perform actions to enhance skill achievement. A strong level of self-efficacy is essential for attaining
academic success. Self-efficacy gradually increases as students recognize that they are improving and becoming increasingly successful with skill achievements.

Research indicated that self-efficacy differs between genders, especially within the scholastic areas of science, technology, and mathematics with boys appearing to be more self-assured than girls in those particular areas. Both genders have shown the same confidence levels in some educational areas, including language arts and science classes (Meece, 1991; Rittmayer & Beier, 2008). The differences in gender may have been due to clichéd beliefs that males are more accepting and understanding of their counterparts than they are of females (Schunk & Pajares, 2002). However, a meta-analysis by Huang (2013) suggested that females in late adolescence displayed a higher self-efficacy in language arts, whereas males in late adolescence displayed higher levels of self-efficacy in computers, social sciences, and mathematics. Huang’s results about males’ high self-efficacy in math were consistent with results from Pajares and Miller (1994).

Research indicated that students from an African American culture seemed to exhibit lower self-efficacy levels than Caucasian students (Graham, 1994; White & Bowers, 2008). However, African American students seemed to be more optimistic when faced with social injustice issues. African American students were held at high expectations, and sometimes, they did not meet performance expectations (Graham, 1994; White & Bowers, 2008). Therefore, being aware of cultural influences may affect the development of academic self-efficacy.

Research indicated that using a variety of instructional practices, including short-term goal setting, strategic instruction practices, social modeling, feedback on performances, and rewards based on performance, could increase self-efficacy (Brown,
1999; Kirk, 2012; Schunk, 1995) and help students be aware of their learning progress, which can also enhance their motivation. One’s perception of growth increased self-efficacy and inspired students (Ergul, 2004; Rittmayer & Beier, 2008; Schunk, 1995). Learners may benefit from understanding that they have the skills and stamina to persevere during challenging times (Bandura, 1994). The integration of diverse teachings strategies may be necessary to help increase students’ writing self-efficacy.

**Outcome expectations and efficacy expectations.** The belief that a certain behavior will cause a specific result is called an *outcome expectation.* The belief that one has about successfully carrying out a particular behavior to attain a particular outcome is called an *efficacy expectation* (Goldenberg et al., 1997; Rittmayer & Beier, 2008). The performance of a behavior, the observation of role models, and serious contemplation of constructive criticism all help one to form efficacy expectations (Goldenberg et al., 1997; Rittmayer & Beier, 2008). Bandura (1994) indicated that one’s perception of skill performance affected individuals more than successful completion of a skill performance. One’s actions are shaped by the knowledge of ability level, therefore, efficacy beliefs are continually changing as new proficiencies, knowledge, and environmental surroundings change (Bandura, 1997). As a result, individuals appeared to persist with behaviors that fit their self-efficacy and avoid behaviors that did not fit their self-efficacy.

Research indicated that positive correlations were shown between outcome achievement and self-efficacy expectations (Clark & Dodge, 1999; Ergul, 2004; Laschinger, 1996; Rittmayer & Beier, 2008; Tresolini & Stritter, 1994). A higher expectation of a successful skill performance was positively correlated to high self-efficacy. Unsuccessful skill performance was linked to low self-efficacy.
This research study explored writing self-efficacy in nursing education. Writing self-efficacy of entry-level BSN students was examined to determine if relationships existed between self-efficacy and nursing student demographic variables. In addition, hindrances and facilitators to academic writing were investigated to discover environmental conditions that influence writing self-efficacy of entry-level BSN students.

**Implications of Self-Efficacy on Nursing Education**

Some nursing education research studies showed that self-efficacy beliefs affect nursing students’ behaviors during learning experiences. A meta-analysis by Multon et al. (1991) determined that relationships between outcome achievement and self-efficacy were positive and statistically significant. The role of self-efficacy concerning classroom performance achievement has been studied. The results indicated that one way to stimulate academic achievement was to increase students’ self-efficacy (Ergul, 2004; Pajares & Miller, 1994).

Ergul’s (2004) study included a sample of 124 randomly-selected freshman students from one university enrolled in online education classes. The aim of the study was to examine relationships between students’ demographic variables and self-efficacy, self-regulation, and achievement goals for distance education. The questionnaire about demographics, self-efficacy, self-regulation, and academic achievement revealed a Pearson correlation coefficient of $r = 0.82$. The study’s results showed a significant and positive correlation between academic achievement and self-efficacy. Employment status of online students did not show a significant difference in academic achievement.

The purpose of a study by Pajares and Miller (1994) was to examine self-efficacy related to mathematics problem solving. The study involved 350 college students from
one university. Measures for the study included several scales: a math self-efficacy scale, a perceived usefulness of mathematics scale, a math anxiety scale, a math concept scale, and a math performance scale. Validity and reliability values for all of the measurement scales showed strong internal consistency. The study revealed that self-efficacy had a positive effect on students’ motivation and achievement related to mathematics problem solving.

By using Bandura’s (1977, 1986) self-efficacy theory as a theoretical framework, nurse educators may assess, evaluate, and subsequently enhance student learning success, specifically with writing self-efficacy. Scholarly literature suggested educational strategies that favored increasing self-efficacy and included the integration of person variables and situational variables (Andrew & Vialle, 1998; Ergul, 2004; Schunk, 1991).

A mixed-methods research study by Andrew and Vialle (1998) incorporated written questionnaires and telephone interviews to a sample of 303 first-year BSN students. The purpose of the study was to examine the relationship between self-efficacy and self-regulated learning behaviors (person variables). The questionnaires included the following measures: Nursing Academic Self-Efficacy scale, the Self-Efficacy for Science scale, and the Motivated Strategies for Learning Questionnaire. All scales showed statistically significant correlations with each other. The results from the questionnaires and the interviews for the study’s sample showed that first-year BSN students needed high self-efficacy and high self-regulation to use a variety of learning strategies, all of which could potentially increase academic success.

Person variables, which included personal goal setting by the student or goal setting by the educator for the student, could help a student meet multiple, small,
attainable goals that could be met in a short period of time that led to increasing the student’s self-efficacy about performing a certain task. The situational variables for increasing self-efficacy included observation of peer and teacher role models, integration of early success feedback and ability feedback from the educator, and the integration of a rewards system linked to student accomplishments (Schunk, 1991). By incorporating the person and situational variables into writing education, students had the potential to gain increased writing self-efficacy, which translated to a greater potential for achievement of competent academic writing (Bandura, 1997; Clark & Dodge, 1999; Ergul, 2004; Kirk, 2012; Laschinger, 1996; Pajares, 1996, 1997, 2003; Tresolini & Stritter, 1994).

In summary, nurse educators are in the position to help BSN students achieve high writing self-efficacy and potentially achieve competent academic writing in nursing education. Nurse educators, as student advocates, are given the opportunity to support nursing students by incorporating a variety of diverse teaching methods and strategies to enhance learner self-efficacy and acknowledge nursing students’ writing experiences with achieving competent academic writing. Self-efficacy assessment related to a specific area of knowledge and performance, such as academic writing, enables nurse educators to identify low areas of writing self-efficacy that can be used to develop and implement strategic educational interventions.

**Review of Research Literature and Methodological Literature**

The review of research literature and methodological literature will be examined regarding scholarly data about self-efficacy and academic writing in nursing education. A review of methodological issues will be investigated regarding self-efficacy and academic writing in nursing education.
Academic Writing in Nursing Education

Scholarly literature that addressed academic writing in nursing education will be examined, including personal self-efficacy, development of self-efficacy, academic self-efficacy, outcome expectations, and self-efficacy expectations. Implications of self-efficacy on nursing education will be explored.

Self-efficacy and nursing education. In 2004, Babenko-Mould, Andrusyszyn, and Goldenberg reported that self-efficacy had not been studied extensively in situations involving nursing education. A review of the nursing education scholarly literature determined that since 2004, the study of self-efficacy in nursing education has become widespread and has been examined in various nursing skills and roles, including the nursing student’s role in patient education (Darkwah, Ross, Williams, & Madill, 2011), nursing student math anxiety with drug calculations (Walsh, 2008), cultural self-efficacy (Jeffreys & Dogan, 2010, 2012; Larsen & Reif, 2011; Liu, Mao, & Barnes-Willis, 2008), general self-efficacy and academic success (Collins, 2005; Raman, 2010), high infidelity simulation and self-efficacy (Kuznar, 2009; Leigh, 2008), academic self-efficacy (Tutor, 2006), nursing practice self-efficacy (Wilson-Soga, 2009), self-efficacy with health teaching (Goldenberg et al., 2005), self-efficacy with simulation and use of communication skills (Kameg, Howard, Clochesy, Mitchell, & Suresky, 2010), and caring self-efficacy (Livsey, 2009).

Most of the studies from the literature review indicated that self-efficacy increased after an intervention. For example, in simulation studies conducted by Goldenberg et al. (2005) and Kameg et al. (2010), students’ self-efficacy was measured before and after a simulation scenario. Debriefings occurred after the simulations in both
studies. The posttests revealed a significantly higher self-efficacy ($p = .001$) after the students experienced the simulation, which suggested that nursing students perceived a higher level of self-confidence with communication and patient care situations after the simulation experience. A higher student self-efficacy may potentially translate to enhanced clinical patient care experiences, higher quality of patient care, and greater potential for academic and professional success.

Silva, Cary, and Thaiss (1999) explored perceived writing self-confidence in graduating seniors before and after a writing-intensive course. The specific phenomenon of writing self-efficacy was not addressed. The measurement tool used to determine the students’ self-reported self-confidence was not discussed, nor were the reliability and validity measures of the measurement tools documented. The students measured their perceptions of personal writing skills using a 1–4 (poor to excellent) scale. For analysis purposes, the researchers grouped the scores as poor/fair and good/excellent. Percentage scores revealed that students’ perceived self-confidence improved after the writing-intensive course. No statistical parameters were identified.

The outcome of McCarthy, Meier, and Rinderer’s 1985 study suggested that self-efficacy was a statistically significant factor on the quality of academic writing, more than the effects of anxiety, locus of control, and cognitive style. Freshman-level nursing students at a Midwestern United States nursing program were asked to write in-class expository compositions twice during the semester, once when the semester started and again near the semester’s end. At the same time of writing the compositions, students were given instructions to complete four different questionnaires on the following topics: self-assessment of 19 writing skills, anxiety, perceptions, and cognitive processing. The
compositions were analyzed by staff from the English department at the same college with interrater reliability established at \( r = .92 \). The study did not indicate reliability and validity of any of the four questionnaires. Analysis of findings showed that perceived efficacy and anxiety were significantly related to quality of writing performance. The researchers proposed that students who exhibited high self-efficacy and who were less anxious or apprehensive about their writing skills were better writers and more apt to achieve writing competence.

An implication of research conducted by McCarthy et al. (1985) was that the results were not generalizable to a larger population because the sample included freshman entry-level nursing students in one nursing program in a Midwestern state. No information was available about the reliability and validity of the four measurement tools. The findings provided a foundation of critical inquiry about writing skills and self-efficacy. The concept of evaluating student-writing performances longitudinally or before and after a writing educational intervention in addition to writing self-efficacy assessment provided ideas for future research opportunities.

A two-group pretest/posttest quasi-experimental study by Larsen and Reif (2011) was implemented to determine transcultural self-efficacy before and after transcultural immersion experiences. The sample included 39 nursing students who were divided into the immersion group and into a control group. The results suggested that the nursing students who shared in the transcultural immersion experiences revealed higher posttest values for self-efficacy than the control group who did not participate in transcultural immersion. Generalizability of results to a larger population is unlikely due to the small sample of non-randomized participants within one college.
In summary, self-efficacy has been increasingly studied in nursing education since 2004. Self-efficacy was an accurate predictor of skills performance (Andrew & Vialle, 1998; Ergul, 2004; Schunk, 1991) and can be used to predict writing performance. When beliefs about one’s abilities or efficacy expectations were favorable, then one’s performance level was considered favorable. When beliefs or efficacy expectations were unfavorable, then performance levels tended to be unfavorable. A gap in literature revealed that information was lacking specifically on writing self-efficacy in nursing education research.

**Writing abilities of nursing students.** Bruning et al. (2012) asserted that writing is a difficult cognitive task that develops slowly over time. Schraw (2006) suggested that writing involves the clustering of thoughts and experiences into meaningful mental visuals. The cognitive and mental activities inherent to the writing process, as well as the supportive nature of the external environment, may be explored through the qualitative approach of interviewing nursing students about their academic writing experiences. Schraw’s (2006) concept about cognitive thinking inherent in the writing process supported the significance of academic writing in nursing education. Nursing students’ writing experiences were explored. Instances were identified when self-confidence (strength of a self-efficacy belief), not self-efficacy, with academic writing abilities was assessed in nursing education research.

Competent writing is an essential academic skill that entry-level BSN students are expected to develop during nursing education in order to demonstrate written application of critical thinking abilities (Boyer, 1989; Giddens & Lobo, 2008) and for successful completion of high-stakes writing assignments. Practicing professional nurses are
expected to have competent writing abilities (Luthy et al., 2009; Whitehead, 2002) for the dissemination of research findings and for the enhancement of evidence-based practice (AACN, 2008). Valkenburg (n.d.) indicated that nursing students came to college highly prepared technologically but were ill-prepared to think critically and demonstrate basic writing abilities (Salahu-Din et al., 2008) in which grammar, spelling, punctuation, and capitalization errors were noted in student writing assessments (National Center for Education Statistics, 2012).

The AACN (2008) confirmed that effective written communication is necessary to ensure safe nursing practice and disseminate evidence-based research. Literature suggested that nursing students demonstrate significant difficulty with academic writing (McMillan & Raines, 2010; Thorpe & Kulig, 1997), have limited writing practice experiences (McMillan & Raines, 2010), and demonstrate writing incompetency at the college level (Cho & Schunn, 2007). Silva et al. (1999) asserted that nurse educators expressed frustration with nursing students’ incompetent writing abilities. Given the documented importance of competent academic writing for nursing students’ success and the advancement of the nursing profession and nursing students demonstrate writing incompetence, it is essential that nurse educators put more emphasis on academic writing in nursing education programs so that nursing students can achieve writing competency prior to graduation (AACN, 2008; Anema & McCoy, 2008; Boyer, 1989).

Diehl (2007) examined writing abilities of nursing students and found that nursing students in all levels of nursing education demonstrated declining writing abilities. Additional literature reported that academic writing posed an academic challenge for nursing students. A study by Mandleco, Bohn, Callister, Lassetter, and Carlton (2012)
focused on the imperative nature of competent academic writing for the nursing profession and nurse educators’ obligation to help nursing students improve writing abilities to enhance academic success.

Nursing students found academic writing to be very challenging due to mental barriers such as fear and apprehension and knowledge deficit barriers about writing mechanics and content structure. Mandleco et al. reported that a nursing program initiated a scholarly writing course based on BSN student responses to a writing knowledge assessment. Results of the experimental design portion of the mixed-methods study revealed that students’ writing abilities concerning punctuation, capitalization, verb and pronoun use, and sentence structure, improved after the writing education strategies were implemented. In addition, students were directed to self-report their personal confidence ratings in a student log as a qualitative means of data collection. The self-reported ratings showed improvement after the intervention. Although the study provided preliminary evidence about the effectiveness of writing educational interventions, findings of the study are not generalizable because of the small sample size. In addition, no reliability or validity data were reported for the knowledge measurement tool.

Two expository articles (Lightfoot, 2007; Botten, 2012) written by nursing students provided students’ perspectives on academic writing experiences. The articles indicated that writing assignments were daunting, but the students identified strategies that were useful in making the writing assignments a beneficial learning experience. Lightfoot, a junior-level nursing student, wrote a short narrative about his academic writing experiences in nursing education. Lightfoot recognized the significance of
scholarly writing in nursing academics and in professional nursing. As a result, he identified a sequence of steps that he learned to follow that enabled him to write more competently. Lightfoot noted that for his senior year of nursing education, he planned to take advantage of the nursing program’s online educational resources to improve his writing abilities and help him learn to write at a more competent level.

Similarly, a British nursing student who returned to college three years after high school, provided strategies that she had learned to use (Botten, 2012). Botten wrote the article with the expectation that the strategies would help other nursing students be successful with academic writing. Her suggestions included the following: Use the college’s resources and tutors, use experienced peers and parents to proofread the assignment, follow the assignment grading criteria, use proper referencing to avoid plagiarism, and use time management skills to complete the writing assignment in small segments. She suggested that by using similar strategies, nursing students could enjoy writing assignments and learn from them.

In summary, the literature on nursing students’ writing abilities revealed that in general, nursing students at all levels found academic writing to be a very challenging task due to apprehension, fears, and knowledge deficit. Nursing students provided their perspectives about academic writing experiences. Nurse educators are obligated to provide effective writing educational strategies to enhance writing competency achievement (Mascle, 2013; Mandleco et al., 2012).

**Writing educational strategies in nursing education.** Many types of writing enhancement strategies were noted in the scholarly nursing literature (Bickes & Schim, 2010; Dick & Wills, 2001; Lloyd, 2007; Luthy et al., 2009; O’Neill, 2012; Roberts &
Goss, 2009; Slimmer, 1992), but the writing self-efficacy phenomenon was rarely mentioned. Slimmer (1992) described an educational strategy that involved maintaining a writing laboratory staffed by doctorally-prepared faculty with research experience who helped nursing students develop positive attitudes about writing and research. The descriptive design study was a research initiative within one nursing program, and the author advised that results could not be generalized to a larger population. However, the study prompted additional questions about student attitudes related to writing and research interests, and research attitudes. Results of the study suggested that the overall quality of compositions in the study may have raised the average grade of the entire group to a level significantly above the student group of the previous year, which prompted the author to advocate maintaining the writing laboratory within the nursing program.

A newsletter article by Dick and Wills (2001) revealed that Writing Across the Curriculum was a strategy that helped nursing students dispel negative attitudes about writing. The nursing students became more involved in research and developed critical thinking skills by doing individual and group work assignments in the classroom and clinical areas. The students learned to analyze research and then write formal academic papers about communication, health histories, and patient care experiences. Writing-to-learn strategies were effective in helping students develop a positive attitude about writing by incorporating research and critical thinking into the learning process.

Lloyd (2007), a nurse educator in the United Kingdom, discussed a non-technological strategy to enhance students’ writing abilities and explained that students need a framework for guiding the composition of a writing assignment. Lloyd stated that
writing was a difficult concept for students to grasp. Students and educators became easily frustrated with the concept of writing because of the many rules. A holistic framework called PROCESS (planning and preparation, referencing, organization, composition, engineering, spelling, and structure) was initiated to help students write more competently. A disadvantage of this program was that the framework required face-to-face individualized instruction and was very time consuming, whereas a technological educational intervention could have been accomplished online with e-instructors and would have been more timely and individualized, but yet more effective.

Roberts and Goss (2009) explained that nursing students were often challenged and felt anxious by scholarly writing assignments. To address this problem, Roberts and Goss implemented an online tutorial program with a video PowerPoint for nursing students who were enrolled in web-based courses. Assessment and evaluation of American Psychological Association (APA) formatting knowledge were implemented before and after the online tutorial. Students were instructed to write an APA paper of choice using APA-formatting criteria after viewing the online tutorial. The papers were graded and compared to a control group that included papers written during the previous semester by students who had not been exposed to the online tutorial. The results of the PowerPoint education strategy revealed that more than half of the posttest scores indicated improvement with APA formatting and general writing skills. No significant difference was found between pretest and posttest scores. An implication from this study suggests that if a PowerPoint writing education strategy were implemented in a nursing program, some nursing students may not take advantage of the online tutorial assistance. The time needed for designing and developing an online writing tutorial may initially be
time intensive, but in the long term would provide an effective writing resource for student learning.

Luthy et al. (2009) proposed that numerous writing educational strategies could be used in a nursing education program to help students achieve writing competencies. The writing educational strategies included Writing across the Curriculum, Writing to Learn, and Writing in the Discipline. The informational article focused on details of implementing the writing strategies without considering nursing students’ writing self-efficacy and writing skills. A conclusion could be made that any of the programs may have been effective with meeting students’ writing needs by providing students with multiple academic writing experiences.

Bickes and Schim (2010) reported on strategies to correct problems they had personally identified with students who had demonstrated poorly written formal academic papers. The strategies included a faculty-writing workshop, revision of a grading rubric, and a blind review grading system. Other interventions were the addition of writing and APA resources and online learning management systems, and the addition of online library resources. Bickes and Schim explained that the students were better prepared to demonstrate writing competencies due to a few writing educational strategies: a four-hour writing workshop for students and the addition of writing guides to the course’s learning management system site—guides to grammar, guides to APA style, and suggested library resources. The online resources were added to provide continuous writing support that was introduced initially during the writing workshop. Data were not available to identify student use statistics for the various writing strategies.
Whitehead’s (2002) phenomenological study was conducted in the United Kingdom. The purpose of the study was to investigate academic writing experiences of preregistration nursing students. Whitehead concluded that nurse educators expect students to write proficiently during nursing education, but nursing students struggled to achieve writing competencies. Additionally, nurse educators placed little emphasis on developing writing educational strategies to help the students excel, which led to some students leaving a nursing program because of the extensive academic rigor. Whitehead concluded that in order to address the concerns that compromise student success with achieving writing competencies, nurse educators should implement diverse educational approaches that will help nursing students achieve competent academic writing.

O’Neill (2012) commented in an expository article about the implementation of a preregistration module course at a Scottish university that helped prepare preregistration students for the rigorous academic experiences in nursing academics and to boost the students’ confidence and competence in completing academic work. The preregistration module course included the following main elements of instruction: critical reading and evaluation, academic writing, math assignments with problem solving, comprehension, study of health-related topics, and teamwork building. After the students completed the preregistration module, they were asked, by questionnaire evaluation, about the usefulness of the module course. Students advised that several aspects of the modules were very helpful, including academic writing, literature searching, referencing, and written and verbal communication. The students also reported a higher level of self-confidence with the academic rigor and higher respect for the demands of the nursing profession. A critical analysis of the qualitative evaluation information from the
students’ perspectives after completion of the modules indicated that writing abilities and confidence levels were increased. However, no information was available about the students’ pre-module writing abilities or confidence levels. Students’ perspectives and input were highly valued and could be used to enhance writing competence and increase writing self-efficacy.

Lavelle, Ball, and Maliszewski’s quantitative study (2013) used a 71-question true/false questionnaire entitled Inventory of Processes in College Composition (IPCC). The sample included BSN students who had completed their second year of general baccalaureate work and were enrolled in the upper division portion of a four-year nursing program. The IPCC measures student responses to questions concerning writing-related beliefs and is a factor measured with the IPCC to indicate one’s degree of efficacy, doubts, and fears about personal writing. Results showed that the Low Self-Efficacy Factor of the IPCC (Lavelle et al., 2013) did not appear to be a relevant factor in the study on writing approaches of nursing students and could have indicated that nursing students felt confident in their writing abilities as upperclassmen. No data was available to support the reliability and validity of the IPCC measuring tool. Lavelle et al. (2013) suggested that students’ writing techniques depended on the quality of writing instruction and students’ writing beliefs and that nurse educators were in the position to encourage students to incorporate deep reflection of writing content and writing processes. Students seemed to do better with academic writing when clear expectations were given, when sample papers were available, and when nurse educator feedback was timely and meaningful.
In summary, many writing educational strategies have been implemented in nursing education. However, the effectiveness of the writing enhancement strategies has not been established and cannot be applied to larger populations. General writing instruction did tend to lessen students’ writing anxieties (Mascle, 2013). Evidence-based data and scholarly research is needed to support writing educational strategies (Regan & Pietrobon, 2010) so that writing educational strategies may be offered based on student need with the goal of increasing BSN student writing self-efficacy.

Overall, the scholarly literature lacked information about the writing self-efficacy phenomenon in nursing education. Therefore, the gap in scholarly literature supported the need for this study that focused on BSN entry-level students’ writing self-efficacy and previous encounters with academic writing. Analysis of the scientific data can be used to more fully understand and appreciate the students’ perspectives regarding hindrances and facilitators of with academic writing in nursing education. Future research can include experimental designs in which writing self-efficacy can be monitored before and after writing educational interventions to determine the effectiveness of the interventions.

**Review of Methodological Issues**

The scholarly literature revealed that academic writing in nursing education has been studied using quantitative, qualitative, and mixed-methods designs. Articles were found that included many expository articles that provided information about academic writing in nursing education (Bruning & Horn, 2000; Cho & Schunn, 2007; Dick & Wills, 2001; Diehl, 2007; Giddings, 2006; Kelley & Preacher, 2012; Leigh, 2008; Lightfoot, 2007; Lloyd, 2007; Luszczynska et al., 2005; Luthy et al., 2009; McMillan & Raines, 2010; Nascimento, Rodrigues, Middleton, & Buckner, 2008; Newbold et al.,
2010; Regan & Pietrobon, 2010; Silva et al., 1999; Valkenburg, n.d.). Good’s (2009) Delphi study showed that academic writing was a critical skill needed in nursing education. Bickes and Schim (2010) noted a problem with writing incompetency, which prompted an immediate educational intervention by using a trial-and-error method. The expository articles provided detailed explanations about self-efficacy, writing skills, and writing education interventions in nursing education that provided narratives, insight, and support for this mixed methods study.

**Quantitative Methods**

Several quantitative pretest and posttest survey designs about self-efficacy in nursing education were documented in the literature (Babenko-Mould et al., 2004; Collins, 2005; Darkwah et al., 2011; Goldenberg et al, 2005; Kameg et al., 2010; Kuznar, 2009; Larsen & Rief, 2011; Liu et al., 2008; Newton & Moore, 2010; Raman, 2010; Schmidt, 2004; Slimmer, 1992). However, reliability and validity information for some of the measurement tools was not available. Quantitative descriptive correlational methods were documented in the nursing education scholarly literature (Liu et al., 2008; Raman, 2010; Slimmer, 1992) to demonstrate operationalization of a non-tangible construct, such as self-efficacy.

Giddens and Lobo’s (2008) study described a method of grading consistency that involved the revision of a writing assignment grading rubric so that several nursing faculty could grade student papers consistently based on the same rubric. The purpose of the study was to identify trends in student writing skills. It was found that nursing students’ writing skills improved, but interrater reliability for the grading rubric was not demonstrated. A study by Mandleco et al. (2012) used two measurement tools to
determine writing skills knowledge and level of students’ writing self-confidence, but the reliability and validity of the tools was not available, which was noted as a limitation in the study.

The purpose of a descriptive correlational study by Newton and Moore (2010) was to determine relationships between formal writing ability, English aptitude, and reading. The research site for the Newton and Moore study (2010) used The Test of Essential Academic Skills (TEAS) as a standardized exam taken by all incoming nursing students to measure reading and English skills. Newton and Moore explained that the TEAS did not directly measure writing ability, but reading and English skills are “closely related to writing” (p. 222). Therefore, the TEAS scores were used as a measure of writing ability and were examined to determine relationships between reading skills, English skills, and writing abilities. Reliability and validity of the TEAS in regards to measurement of writing skills was not demonstrated. The results showed that some students were underprepared to meet college writing expectations. Students who demonstrated low reading and English aptitudes were more apprehensive about writing skills and had difficulty achieving competent writing skills. Because the study was done within one nursing program, generalizations could not be made to a larger population.

Thorpe and Kulig’s (1997) pretest/posttest design included a perception of writing knowledge inventory, but reliability and validity information for the tool was not accessible. Mandleco et al. (2012) conducted a pretest/posttest design using a computerized writing skills assessment and a student self-evaluation of confidence measurement for which reliability and validity were unknown. Mandleco et al. stated that a recommendation for future research should include measurement tools that have an
established reliability and validity. Schmidt (2004) used an attitudes survey but no established reliability and validity of the tool was reported. Schmidt referred to the instrument’s use in a previous study by Dobie and Poirrier (1996), who reported significant differences in pretest and posttest scores. Findings were uncertain because reliability and validity were not reported.

Roberts and Goss (2009) conducted a mixed-methods study and used a self-designed pretest/posttest knowledge inventory after a writing tutorial intervention. Information was not available about content validity of the knowledge inventory. Based on an analysis of previous research, this study was designed to advance the literature by using a mixed-methods approach that was appropriate for the topic being investigated and incorporated rigor in collecting data. First, this mixed-methods design included multiple ways to enhance data triangulation. Second, data was collected at multiple nursing programs in a Midwestern state. Third, data were collected using an established writing self-efficacy survey with a Cronbach’s alpha of $\alpha = .95$. Lastly, the quantitative data collection process needed a sample size of 84 BSN entry-level students to address the correlational research subquestions and address the hypotheses and null hypotheses. The sample size for this study exceeded the minimum requirement.

**Qualitative Methods**

The qualitative studies (Lavelle et al., 2013; Weaver & Jackson, 2011; Whitehead, 2002) provided written and oral responses to qualitative questions about nursing student perspective on writing abilities. Weaver and Jackson (2011) qualitatively explored writing experiences of English-as-second-language students by using a qualitative written survey in which students wrote answers to the qualitative questions on
the survey. Whitehead’s (2002) phenomenological study explored the lived experiences of 10 nursing students from one nursing program. The interview protocol provided data about the nursing students’ academic writing experiences and their processes of developing and incorporating writing abilities into nursing education assignments, but writing self-efficacy was not specifically addressed.

**Mixed Methods Literature**

Mixed methods designs that incorporate both quantitative and qualitative types of data collection enhance a study’s credibility because the participants’ feelings, opinions, and past experiences are made known (Creswell, 2009; Houser, 2008). When the qualitative data is combined with quantitative data, the two types of data collection comprehensively explore an intangible construct (Creswell, 2009; Houser, 2008). The research design that best supported this study was the mixed-method design.

Research designs that incorporated descriptive surveys and qualitative interviews best supported this mixed-methods design on writing self-efficacy and academic writing experiences. The research study that best supported this study was Kuznar’s (2009) study because the descriptive surveys and qualitative interviews that were used for data collection about the intangible construct of self-efficacy were similar to the design used for this study about writing self-efficacy.

The phenomenological approach was used in Kuznar’s (2009) qualitative research because the focus was on exploring the essence of the participants’ simulation experiences. Kuznar’s intent was to show how complex meanings could be analyzed from the students’ basic experiences with simulation. The Kuznar (2009) study used descriptive surveys to operationalize situational aspects of the self-efficacy phenomenon.
The self-efficacy surveys in both the Kuznar study and this study were similar because both asked participants to rate individual confidence levels in their ability to do certain tasks. The reliability of all three scales ranged from $r = .95$ to $r = .96$.

In summary, the scholarly literature review revealed that academic writing in nursing education has been studied using quantitative, qualitative, and mixed-methods designs. Most of the studies were pretest/posttest designs to test knowledge levels or confidence levels before and after an intervention. The gap in literature revealed that there was very little information found about writing self-efficacy in nursing education.

**Synthesis of Research Findings**

The majority of scholarly literature on self-efficacy, writing abilities, and writing educational strategies in nursing education confirmed that nursing students lacked sufficient knowledge about writing competent formal academic papers and that nursing students found it very challenging and difficult to meet nurse educators’ expectations about formal academic writing. The literature also confirmed that writing competencies in nursing education were imperative for nursing students’ academic success and for the long-term sustainability and scientific progression of the nursing profession (AACN, 2008; McMillan & Raines, 2010; Whitehead, 2002). Nurse educators did understand that nursing students struggled with achieving competent academic writing (Whitehead, 2002). To help nursing students achieve writing competencies, nurse educators have implemented a multitude of writing educational strategies (Bickes & Schim, 2010; Dick & Wills, 2001; Lloyd, 2007; Luthy et al., 2009; O’Neill, 2012; Roberts & Goss, 2009; Slimmer, 1992) that were aimed to help students achieve academic writing competence. The literature indicated that most of the educational strategies that were implemented to
improve writing abilities contributed to an increase in writing competence. However, the validity of the findings in some cases was uncertain due to convenience sampling and undocumented reliability and validity of measurements tools.

The literature review also confirmed that the phenomenon of writing self-efficacy has been sparsely addressed in the scholarly literature. Two articles were found that identified and explored the writing self-efficacy phenomenon: a 1985 research study by McCarthy et al. and a study by Lavelle et al. (2013). Other nursing education research studies about writing self-confidence have been documented, but according to Bandura (1986), confidence is not technically the same as the self-efficacy construct. Very few research studies have been conducted about writing self-efficacy in nursing education, which represents a gap in the scholarly literature and a need for scientific data about the writing self-efficacy phenomenon in nursing education.

Additionally, the literature review indicated that, despite the many types of writing educational interventions that have been implemented, seldom was any type of scientific assessment done first to determine the root cause of the writing deficiency, such as a knowledge deficiency or a self-efficacy concern. Thorpe and Kulig (1997) implemented a writing skills knowledge inventory prior to initiating a writing workshop, but self-efficacy was not addressed on the inventory. Silva et al. (1999) addressed assessment of self-confidence prior to a writing educational intervention, but the writing self-efficacy phenomenon was not mentioned. Whitehead’s (2002) phenomenological study provided information from students’ perspectives about writing experiences in nursing education, but writing self-efficacy was not addressed. The literature review revealed that writing self-efficacy has been sparsely assessed in prior nursing education
research studies. It has not been determined from the students’ perspectives what specific writing skill areas are rated as low self-efficacy.

In summary, the gap in scholarly literature indicated a lack of scientific information about writing self-efficacy and academic writing in nursing education. This mixed-methods study may be used to provide quantitative and qualitative information about writing self-efficacy and academic writing. The scientific data gained from this study might inform nurse educators about the hindrances and facilitators of competent academic writing of entry-level BSN students.

**Critique of Previous Research**

The literature review included topics of self-efficacy, self-efficacy in nursing education, writing abilities of nursing students, writing educational strategies in nursing education, and research methodologies about writing in nursing education. Approximately three-quarters of the literature involved quantitative studies and expository articles. Approximately a quarter of the literature reported qualitative and mixed-methods designs. Some quantitative studies (Giddens & Lobo, 2008; Mandeleco et al., 2012; McCarthy et al., 1985; Newton and Moore, 2010; Roberts and Goss, 2009; Schmidt, 2004; Thorpe and Kulig, 1997) showed limitations concerning reliability and validity of the measurement tools, which limited the generalizability of the results. The gap in the literature suggested that substantive information from qualitative and mixed-methods studies was needed in order to provide a more comprehensive scientific inquiry about the intangible construct of writing self-efficacy in the nursing education scholarly literature.
Chapter 2 Summary

The purpose of this mixed-methodology research study was to empirically determine writing self-efficacy and qualitatively explore academic writing experiences of entry-level BSN students. The investigated research problem was the need to identify the facilitators and barriers to competent academic writing by examining writing self-efficacy and academic writing experiences of entry-level BSN students. The comprehensive approach of the dual data collection process was advocated for this study in order to comprehensively explore the intangible construct of writing self-efficacy.

The scholarly literature review showed that there was a gap in the literature about writing self-efficacy in nursing education. A majority of the literature focused on nurse educator discontent with nursing students’ academic writing abilities and the numerous writing educational strategies that were implemented in response to observed incompetent academic writing. Studies employing quasi-experimental designs appeared to show improvement of writing skills despite limitations regarding sample size, reliability and validity of measurement tools. Very few qualitative and mixed-methods studies were found in the scholarly literature about writing self-efficacy, writing experiences, and educational writing strategies. The limitations found in the scholarly literature review supported the need for reliable and valid designs and instruments to yield credible research findings about writing self-efficacy and academic writing in nursing education.

Pajares (2003) indicated that self-efficacy influenced writing outcomes and predicted students’ writing performances. Bandura (1997) indicated that having a high confidence level about accomplishing a specific task subsequently translated into
increased self-efficacy. Scholarly literature (Clark & Dodge, 1999; Laschinger, 1996; Pajares, 1996, 1997, 2003; Tresolini & Strittcher, 1994) reported that students’ self-efficacy was directly proportional to achievement of writing competencies.

Bandura’s (1994) self-efficacy theory was utilized in this study by using scholarly scientific methods. Additional knowledge about writing self-efficacy in nursing education was added to the theory. By quantitatively determining writing self-efficacy of entry-level BSN students and qualitatively exploring nursing students’ academic writing experiences, the discreet piece of theoretical knowledge about writing self-efficacy was expanded specifically for nursing education.

Understanding nursing students’ writing self-efficacy and academic writing experiences may be useful for nurse educators who might use the scientific data to identify low areas of writing self-efficacy and identify hindrances and facilitators to academic writing that nursing students encounter when trying to achieve competent academic writing. By basing writing education objectives and interventions on the scientific data, nurse educators have the potential to help nursing students improve writing self-efficacy and achieve competent academic writing (Bandura, 1994; Goldenberg et al., 1997, 2005; Multon et al., 1991), which is essential for academic and professional proficiency.
CHAPTER 3: METHODOLOGY

Chapter 3 presents the methodology that was used for this mixed-methods study about writing self-efficacy and academic writing experiences of entry-level bachelor of science in nursing (BSN) students. Information about the quantitative component of the study describes the target population, sampling method, sample size, setting, recruitment, instrumentation, data collection, and operationalization of variables, data analysis procedures, limitations of the research design, internal and external validity, and expected findings. Information on the qualitative component of the study describes trustworthiness, credibility, dependability, and transferability. Additionally, ethical issues concerning the researcher’s position are addressed as well as a conflict of interest statement and position statement.

Purpose of the Study

The purpose of this mixed-methodology research study was to empirically determine writing self-efficacy and qualitatively explore academic writing experiences of entry-level BSN nursing students. The investigated research problem was the need to identify the facilitators and barriers to competent academic writing by examining writing self-efficacy and academic writing experiences of entry-level BSN students. The comprehensive approach of the dual data-collection process because it allowed the researcher to comprehensively explore the intangible construct of writing self-efficacy.
Research Questions and Hypotheses

The following research questions, subquestions, and hypotheses were tested in this mixed-methods study.

Central Quantitative Research Question

What is the writing self-efficacy of entry-level BSN students?

Hypotheses and Null Hypotheses for the Quantitative Component

Research subquestion 1. Is there a relationship between entry-level BSN students’ writing self-efficacy and their age?

$H_1$. A statistically significant relationship exists between entry-level BSN students’ writing self-efficacy and their age.

$H_0$. No statistically significant relationship exists between entry-level BSN students’ writing self-efficacy and their age.

Research subquestion 2. Is there a relationship between entry-level BSN students’ writing self-efficacy and their gender?

$H_1$. A statistically significant relationship exists between entry-level BSN students’ writing self-efficacy and their gender.

$H_0$. No statistically significant relationship exists between entry-level BSN students’ writing self-efficacy and their gender.

Research subquestion 3. Is there a relationship between entry-level BSN students’ writing self-efficacy and nursing student status?

$H_1$. A statistically significant relationship exists between entry-level BSN students’ writing self-efficacy and their student status.

$H_0$. No statistically significant relationship exists between entry-level BSN students’ writing self-efficacy and student status.

Research subquestion 4. Is there a relationship between entry-level BSN students’ writing self-efficacy and their employment status?

$H_1$. A statistically significant relationship exists between entry-level BSN students’ writing self-efficacy and their employment status.
No statistically significant relationship exists between entry-level BSN students’ writing self-efficacy and their employment status.

**Research subquestion 5.** Is there a relationship between entry-level BSN students’ writing self-efficacy and their primary care-provider status?

**H₁.** A statistically significant relationship exists between entry-level BSN students’ writing self-efficacy and their primary care-provider status.

**H₀.** No statistically significant relationship exists between entry-level BSN students’ writing self-efficacy and their primary care-provider status.

**Research subquestion 6.** Is there a relationship between entry-level BSN students’ writing self-efficacy and their support-system status?

**H₁.** A statistically significant relationship exists between entry-level BSN students’ writing self-efficacy and their support-system status.

**H₀.** No statistically significant relationship exists between entry-level BSN students’ writing self-efficacy and their support-system status.

**Research subquestion 7.** Is there a relationship between entry-level BSN students’ writing self-efficacy and completion of a prior college-level writing course?

**H₁.** A statistically significant relationship exists between entry-level BSN students’ writing self-efficacy and completion of prior college-level writing course.

**H₀.** No statistically significant relationship exists between entry-level BSN students’ writing self-efficacy and completion of prior college-level writing course.

**Research subquestion 8.** Is there a relationship between entry-level BSN students’ writing self-efficacy and first-speaking language?

**H₁.** A statistically significant relationship exists between entry-level BSN students’ writing self-efficacy and first-speaking language.

**H₀.** No statistically significant relationship exists between entry-level BSN students’ writing self-efficacy and first-speaking language.

**Central Qualitative Research Question**

What has hindered or facilitated past writing experiences of entry-level BSN students?
Research subquestion 1. What events, resources, issues, and relationships do entry-level BSN students perceive to be significant in their nursing education writing experiences?

Research Design

The concurrent triangulation strategy was used for this study so that the intangible construct (Creswell, 2009; Houser, 2008) of writing self-efficacy could be explored, both empirically with a writing self-efficacy survey (Shell et al., 1989) and qualitatively with focus group interviews to yield rich, meaningful data from the nursing students’ perspectives about their experiences with academic writing. Johnson and Turner (2003) indicated that a mixed-methods approach provided a more accurate and complete representation of the phenomenon in question than if a singular data collection method was used to explore the phenomenon. Therefore, the concurrent triangulation mixed-methods research design was an optimum approach to use for exploring the writing self-efficacy phenomenon of entry-level BSN students.

Framework and Focus

The mixed-methods design was supported by the pragmatist philosophical framework, which is an action-oriented approach and with a practical “what works” emphasis (Lodico, Spaulding, & Voegtle, 2010, p. 16). The focus of the study was on exploring participants’ perceptions in order to describe and understand the writing self-efficacy phenomenon (Lodico et al., 2010). The data from this study might be used to improve nursing education processes. This study was designed to explore the writing self-efficacy phenomenon and discover scientific data that could enable nurse educators to determine writing self-efficacy. This study was also designed to determine the
hindrances and facilitators that entry-level BSN students may encounter while trying to achieve competent academic writing.

Integrating both quantitative and qualitative data collection methods, which is the nature of a mixed-methods design, provided a comprehensive approach to answering the research questions (Creswell, 2009; Houser, 2008). Both quantitative and qualitative data were collected in close time proximity, separately analyzed, and then uniformly compared to determine similarities and differences of the two data sets (Creswell, 2009; Houser, 2008; Tashakorri & Teddlie, 2003). The data sets were given equal priority and were analyzed separately because both data sets were essential for studying the writing self-efficacy phenomenon (Tashakorri & Teddlie, 2003). During qualitative data analysis, raw transcribed data was documented and categories were identified. The categories were grouped into main themes. Integration of the quantitative and qualitative data required comparing and contrasting of the results and findings.

**Attributes**

The mixed-methods dual data collection process was considered a positive attribute of this study because it counteracted the potential limitation of a single-method research methodology. The integration of the two data sets occurred when the quantitative results were compared to the qualitative data results (Creswell, 2009; Tashakkori & Teddlie, 2003). The study’s validity was strengthened by triangulation, or the use of multiple data collection sources. Because two research methods were utilized in this study, the methodology provided a more holistic, comprehensive, and credible approach to understanding and describing the writing self-efficacy phenomenon of entry-level BSN students.
One disadvantage of using a mixed-methods design is the potential for misunderstanding of terminology. According to Giddings (2006), it is an erroneous assumption to believe that the mixed-methods process is the “best of both worlds” (p. 202). Giddings referred to *methods* (p. 198) as the variety of ways used to collect and analyze data, such as survey tools, interviews, and technological programs. *Methodology* refers to the quantitative and qualitative designs of the research study. Giddings proposed that a “multi-methodological co-operative inquiry” (p. 202) approach be used when referring to mixed-methods designs in order to emphasize collective efforts when researching social issues.

**Summary**

In summary, the concurrent triangulation strategy was used for this study so that the writing self-efficacy phenomenon could be explored both empirically with a writing self-efficacy survey (Shell et al., 1989) and qualitatively with focus group interviews to yield comprehensive and meaningful data from the nursing students’ perspectives about their writing self-efficacy and academic writing experiences. The concurrent triangulation mixed methods design incorporated separate data collections in close time proximity. Separate data analyses were completed. Equal priority and weighting status (Tashakorri & Teddlie, 2003) were given for both data sets. Both data sets were compared and contrasted. Empirical trends were supported by qualitative themes (Tashakorri & Teddlie, 2003). The mixed methods dual data collection process generated a comprehensive and meaningful study that yielded credible scientific data from the nursing students’ perspectives about writing self-efficacy and academic writing experiences.
Target Population, Sampling Method, and Related Procedures

One of the critical elements in establishing the validity and reliability of a research study is the way in which the subjects of the study are chosen. The target population, sampling method, and other related research procedures will be identified.

Population and Sample

The population for both the quantitative and qualitative components of the study was defined as entry-level BSN students in the Midwestern section of the United States, which could include sophomore or junior entry-level BSN students. The sample was defined as entry-level BSN students in a Midwestern state. Inclusion criteria for the sample included entry-level BSN students in a Midwestern state who could speak, read, and write English and were considered traditional or nontraditional college students. A traditional college student was defined as one who customarily entered and attended college directly after earning a high school diploma by graduating from high school or by earning one of its equivalencies, such as successfully completing a home school program, successfully completing a high school equivalency program, or completing requirements for a general equivalency diploma (U.S. Department of Education, 2012). A nontraditional college student was defined as one who did not attend college directly after high school and may have met one or more of the following criteria: financially independent, care provider for dependents (children under the age of 18 years or adult over the age of 19 years), care provider for a spouse or significant other, employed part-time or full-time while enrolled in college classes, or classified as a single parent (Newbold et al., 2010).
Sampling Method

Non-probability convenience sampling was used for the quantitative component, and purposive sampling was used for the qualitative component. Convenience sampling, a type of non-probability sampling in which subjects are selected nonrandomly (Polit & Beck, 2008), indicated that research participants were selected according to their proximity, accessibility, and availability to the researcher (Urdan, 2005) and participants’ readiness to take part in the study (Urdan, 2005). Even though non-probability sampling is less likely to generate generalizable findings in quantitative research, it is used most often in nursing research (Polit & Beck, 2008).

For this study, a limitation of using non-probability convenience sampling was counteracted by selecting participants from three BSN nursing programs in a Midwestern state, which enhanced the generalizability of research findings. Purposive sampling was appropriate for the qualitative component because the participants were needed who had experienced the writing self-efficacy phenomenon in nursing education, had the ability to verbalize what it felt like to have experienced the writing self-efficacy phenomenon (Polit & Beck, 2008), and had the ability to provide rich and detailed information concerning academic writing experiences (Lodico et al., 2010).

The convenience sample consisted of entry-level BSN participants from three BSN nursing programs in a Midwestern state who were within driving distance of the researcher. Data collection at the three research sites occurred during a six-week time frame. One day for data collection was reserved for each research site.

The researcher contacted the directors of the BSN programs by emails and phone calls to seek preliminary interest in using their program as research sites. The targeted
sample inclusion criteria were discussed and confirmed. The directors’ approvals and research site permissions were received by letter confirmation. Institutional Review Board (IRB) approval from each research site was obtained as required. Data collection dates were discussed and approved by the directors at each research site. The directors reserved rooms for the focus group interviews and contacted the instructors who gave an introduction (prepared by the researcher) about the research study to the potential subjects who fit the sample inclusion criteria. The research sites accepted and welcomed the researcher into the program’s facility to conduct the research.

On the day of the planned data collection, the researcher was introduced into the instructor’s classroom in which potential subjects were attending class. The subjects were confirmed by the director to have already met inclusion criteria. The researcher explained the purpose of the study, the need for focus group interview volunteers, the informed consent process, and the monetary reward for those who completed the interviews. Volunteer subjects were secured who then completed the informed consent process and the writing self-efficacy surveys. Those who were interested in participating in the focus group interview met after the quantitative data collection.

After discussing the interview time and location with the group of potential subjects, the participants self-eliminated until there were five or six participants left who completed the interview process. Plans were made to meet with the focus group interview participants later the same day, after the quantitative survey data collection process had occurred. Participants were informed that the focus group interview would occur in a reserved college classroom and that the interview would be audio- and video-recorded to ensure accuracy of transcribed data. The participants were also informed that
withdrawal from the study was possible at any point and that the researcher would need to be notified of the participant’s withdrawal decision. A monetary reward from the researcher’s personal funds was given to each participant who completed the qualitative interview process because the qualitative component required an extended time commitment, unlike the time commitment required for completing the quantitative survey. The three focus group interviews included 17 participants, which met the study’s expectations of needing five to six participants per focus group. Five males and twelve females comprised the total focus group interview sample. Each focus group included at least one male.

The sampling method was supported by the scholarly literature (Cho & Schunn, 2007; McMillan & Raines, 2010) and indicated that nursing students demonstrate significant difficulty with academic writing abilities, demonstrate limited writing experiences, and demonstrate writing incompetency at their current collegiate academic level. Purposive sampling for the qualitative data collection process was used to obtain volunteer interview participants. Five or six participants from the quantitative data collection group volunteered their time. The focus group interview participants satisfied the criteria for the qualitative sample as long as they had experienced the phenomenon being studied, were able to verbalize what it was like to have experienced the phenomenon (Polit & Beck, 2008), were appropriate to represent the population for the study (Cassell & Symon, 2004), and were able to provide rich and detailed information concerning academic writing experiences in nursing education (Lodico et al., 2010).
**Sample Size**

For the quantitative sample, a minimum of 84 participants was needed to address correlations. The following parameters were used to determine the sample size of $N = 84$: a medium effect size of $d = .6$, an alpha error of probability of $\alpha = 0.05$, and a power of $1 - \beta = .80$, which is the conventional standard power in nursing research (Faul, Buchner, Erdfelder, & Lang, 2012; Polit & Beck, 2008). The medium effect size of $d = .6$ was used to detect a 1-point difference between groups when analyzing the data for the null hypotheses. Cohen’s (1988) standard for interpreting effect size indicated that a medium effect size is close to 0.5 and a large effect size is close to 0.8. Cohen urged researchers to interpret effect size based on the situational context of a study’s data. Based on these factors, an a priori sampling calculation determined that a minimum sample of 84 participants was needed to meet the power requirements. For this study, 91 subjects who met sample inclusion criteria completed the quantitative portion of the study. All of the participants were retained.

Data saturation occurred when no new data was obtained. The number of focus groups used depended on the time it took for the data saturation to occur (Creswell, 2007; Houser, 2008; Morgan, 1997; Siegle, 2000). Preliminary determination of data saturation occurred directly after the interview and confirmed during the interview transcription and data analysis in the researcher’s home. When new themes or familiar words were no longer revealed during data analysis, it was expected that data saturation had occurred and no more qualitative data were needed (Houser, 2008; Morgan, 1997; Siegle, 2000). The researcher was then able to critically analyze the data to address the study’s purpose, answer the research questions, and gain awareness and understanding of the phenomenon.
being studied. For this study, three focus groups, including 17 participants, were used to obtain the qualitative data.

Setting and Site Description

Three BSN programs in a Midwestern state were chosen for the data collection process. The sites were within driving distance for the researcher. The cities in which the nursing programs were located ranged in population from 19,000 to 52,000. The communities were considered college towns, and the area directly surrounding the college campus catered to the college students’ interests and needs, including fast food restaurants, shopping areas, gas stations, and lodging and entertainment facilities.

The campuses of the nursing program facilities were clean, organized, beautifully land-scape, and generally very appealing. Employees, faculty, and students on the college campuses were very polite and accommodating. College buildings and facilities were well kept and catered to the students’ transportation and educational needs. College-sponsored buses were available to transport students to and from classes. Many educational buildings were available, such as libraries, classrooms, and student activity and resource centers.

Recruitment

IRB approval to perform research in the programs’ facilities was obtained from Capella University and each of the participating BSN programs. Dates and times for the data collection were secured with each of the participating nursing program officials and faculty instructors.

For each of the participating research sites, the sample of entry-level BSN students agreed to gather in a college classroom, usually during the end of a regularly
scheduled class or immediately after the class had ended. The entry-level BSN students were informed about the research process, goals for the research, and need for student input about writing self-efficacy so nurse educators can better meet the writing educational needs of nursing students. Nursing student participants who agreed to complete the 20-minute quantitative writing self-efficacy survey remained in the room to take part in the study. Nursing students who did not wish to participate in the survey left the room. The informed consent process occurred after all of the participants’ questions were answered.

Additionally, during the informed consent process and prior to distributing the quantitative survey instruments, the qualitative component of the research study was introduced by explaining the need to collect data also by interviewing five or six entry-level BSN students in one focus group. Names and contact information of volunteer interview participants were obtained from the informed consents form and secured in confidence. The researcher informed the participants that if they decided to withdraw from the study, they could do so at any time by contacting the researcher. All survey participants were given a copy of the informed consent form with the researcher’s contact information.

**Instrumentation**

The quantitative data collection instruments included a self-reporting demographic survey (see Appendix A) and a subscale of a writing self-efficacy survey (see Appendix B). Permission to use and adapt the self-efficacy survey was obtained by its author, Roger Bruning. The purpose of the demographic survey was to obtain data to characterize the sample and identify variables or factors related to the sample that could
be correlated with writing self-efficacy and that could be used to suggest recommendations for future research. The demographic survey provided the means for participants to self-report data, such as age group (ordinal measurement), gender (nominal measurement), full-time or part-time student status (nominal measurement), employment outside the home (nominal measurement), role as primary care provider (nominal measurement), time frame of most recent collegiate-level writing course (nominal measurement), availability of a support system during times the nursing student perceives as stressful (nominal measurement), and the participant’s first-speaking language (nominal measurement). Most of the demographic survey questions were categorical in nature and were based on basic demographic information, scholarly literature review about English as second language students (Saban & Erkan, 2011; Williams & Takaku, 2011), and principles evident in Bandura’s (1977, 1986) self-efficacy theory regarding reciprocal determinism, including the influence of environmental factors, behavioral factors, and personal factors on one’s level of self-efficacy.

A writing self-efficacy survey, based on Bandura’s (1994) self-efficacy theory, was used to operationalize self-efficacy for eight basic writing skills. Bandura (2006) indicated that self-efficacy scales “must be tailored to the particular domain of functioning that is the object of interest” (p. 308). The domain of function in this study was confidence with writing abilities. The survey allowed participants to self-report perceived confidence about successfully performing eight writing skills: correct spelling of all words on one page, correct use of punctuation on one page, correct use of parts of speech (verbs, nouns, and adjectives), ability to construct a simple sentence with
appropriate use of punctuation and grammar, correct usage of plurals and verbs, ability to construct sentences with complex structure and appropriate use of punctuation and grammar, ability to develop meaningful paragraph structure, and ability to express ideas by writing an organized paper with use of paragraph transitions.

Each of the eight inquiries on the writing self-efficacy survey related to a different writing skill and was considered an interval measurement based on a scale of 0 (no chance of successfully performing the writing skill) to 10 (complete certainty of successfully performing the writing skill). The interval measurement was designed so that the rank-order scale had equal distance between each point. Cronbach’s alpha for the component skill subscale of the writing self-efficacy survey was reported as $\alpha = .95$, indicating a high internal consistency. Correlations between the items were positive and exceeded .60 and discriminated well among subjects (Shell et al., 1989).

Data Collection

Quantitative

Dates and times for the data collection were secured through each of the participating nursing program directors. Face-to-face data collection occurred at each research site in a quiet room during the last 20 minutes of a class or immediately after class. During the beginning of the quantitative data collection process, the group of entry-level BSN student volunteer participants was informed about the general purpose of the research study, the need to gather data by using a demographic survey and a writing self-efficacy survey, and the need for student input to support the science of nursing education. The need for qualitative data collection was also explained to the students and requests for volunteers were made. The participants were informed about the time
commitment of the interview process and that a monetary award would be given to those who volunteered and completed the focus group interview process. Names and contact information of potential volunteer interview participants were obtained and secured in confidence.

To begin the quantitative data collection process, the informed consent forms were distributed and explained. A question-and-answer period occurred in which the participants’ questions were answered before the researcher proceeded with survey distribution. The participants were informed of the data collection processes, need to collect demographic information (used as aggregate data for analysis of findings), length of time to complete the surveys, processes for maintaining confidentiality and anonymity, principal investigator’s contact information, and process to follow for potential participant withdrawal. The signed informed consents forms were collected by the researcher and secured in a confidential locked area. The researcher gave each participant a copy of the informed consent form for future reference.

The precoded writing self-efficacy survey and demographic survey were stapled together as a packet, with one packet designated for and distributed to each participant. The researcher explained the instructions for completing the surveys and the participants’ questions were answered. Participants were given sufficient time to complete the surveys, which took about 20 minutes. When the participants were finished with the surveys, the researcher collected them and placed them in a secured locked area to ensure confidentiality and anonymity. The survey responses were prepared for analysis by manually transferring the data to a spreadsheet and subsequently transferring it to a statistical program.
Qualitative

During the qualitative data collection process, the researcher’s role was as a complete non-biased observer (Creswell, 2007; Houser, 2008) and interviewer. The researcher noted the participants’ comments and non-verbal actions during the interview. Field notes were documented during and after the interviews (Tashakkori & Teddlie, 2003).

The qualitative interviews took place on the same day as the quantitative data collection in order to comply with the requirements of the concurrent triangulation design. Five or six subjects from each of the three quantitative survey groups volunteered to participate in the focus group interviews after the researcher had given an explanation about the interview process. Meeting arrangements were made with the volunteer participants. The interviews took place in a quiet room within the program’s facility. The informed consent process for the qualitative interview had already been completed during the quantitative data collection process. Prior to beginning the interview, the participants had the chance to ask additional questions. The participants were informed of the researcher’s activities during the interview, such as note taking and audio and video recording of the interview.

The interview participants were informed that the interview might take up to an hour to complete. The focus group was interviewed collectively and each participant was given the opportunity to answer each of the interview protocol questions. The researcher critically observed the participants during the responses and documented notes on the interview protocol. After the participants answered the interview questions and the researcher had completed field notes, the interview process for that focus group ended.
The interview group was notified that the interview was completed, and the audio- and video-recording devices were stopped. The participants were thanked and the monetary award was given to each of the participants. The reward was given because the time commitment for the interview process was about an hour and was significantly more than the time commitment for the 20-minute survey process. Additional questions from the interview participants were answered as needed.

Several hours after each focus group interview was completed, the participants’ e-mail addresses were confirmed for future member checks. After the researcher transcribed each interview, the transcription was sent to the interview participants to verify accuracy. Of the seventeen interview participants, nine of them confirmed accuracy of the transcribed data. The remaining participants did not respond to confirm accuracy. Preliminary coding and categorizing of the data were completed after each interview to determine degree of data saturation. The third focus group data analysis confirmed data saturation.

**Guiding interview protocol.** The guiding interview protocol was designed to inquire about the participants’ academic writing experiences and their perceived hindrances and facilitators to achieving competent academic writing (see Appendix C). The standardized open-ended interview approach (Johnson & Turner, 2003; Tashakkori & Teddlie, 2003) was used to collect the qualitative data and structured so that the questions on the interview protocol were consistently asked in an identical manner to all focus group participants. The researcher/interviewer also had the option to follow up each participant’s responses by asking probing questions (Johnson & Turner, 2003), which was done in some instances in order to obtain clarification. An advantage of using
the standardized open-ended interview approach was the consistency of the questioning process. Additionally, interviews yielded high response rates, were useful for exploration, allowed for good interpretive validity, and reduced researcher bias (Tashakkori & Teddlie, 2003). A disadvantage was that the researcher/observer could have inadvertently show reactions to participants’ comments, which could have altered the participants’ future responses. Therefore, the researcher/interviewer was extremely cognizant of all nonverbal communications during interview questioning. The standardized open-ended interview approach was appropriate for this research study that focused on the writing self-efficacy phenomenon and the participants’ experiences with academic writing in nursing education.

Other data collection tools. The participants were observed during the interview responses, and field notes were documented on an interview protocol during the interview process. The interview protocol with field notes served as an organized method of documenting descriptive comments and reflective notes of both the participants and the researcher.

The video recorder was used to capture participants’ consistencies and inconsistencies with verbal and nonverbal language. If an inconsistency was noted, additional questioning or nurturing support was implemented to determine why the inconsistency might have occurred. The researcher aimed to be empathetic and supportive of the participants during the interview so that the participants would feel safe (Patterson, Grenny, McMillan, & Switzler, 2002) and would continue openly exploring their experiences with academic writing.
Field Test

Six doctorally prepared nurse educator experts were invited to field test the guiding interview protocol and offer feedback. Three agreed to participate. The field test experts were familiar with the construct of self-efficacy and the concept of academic writing. The purpose of the field test was to assess the appropriateness of the open-ended interview questions for BSN entry-level nursing students. Information gained from the field test included guidance about the wording of the questions to avoid placing students in a stressful situation. In addition, feedback was received about the relevance of the interview questions in regard to alignment with the qualitative methodology and the main qualitative research question and subquestion. Revisions to the interview protocol were made according to the field test results and included rewriting of the questions to make the language more consistent and precise. For instance, instead of using the term *academic papers*, which could have meant reflection papers that were not APA formatted, the language was changed to *formal academic papers* to indicate formal APA–structured writing assignments.

Additional information from the field test included advice regarding wording of the interview questions in order to yield rich and meaningful data, such as beginning questions with “Tell me about a time when…”, or “Tell me about a writing assignment that…” The open-ended structure of the questions allowed participants to voice their stories within a framed context and an appreciative inquiry perspective (Preskill & Catsambas, 2006). The compassionate nature of the interview environment was supported during the interview process.
Operationalization of Variables

The demographic survey responses were categorical in nature and classified according to groups. The demographic variables included information on the participants’ demographics including age (ratio measurement), gender (nominal measurement), full-time or part-time student status (nominal measurement), employment outside the home (nominal measurement), role as primary care provider (nominal measurement), time frame of most recent collegiate-level writing course (nominal measurement), availability of a support system during times the nursing student perceives as stressful (nominal measurement), and the participant’s first language (nominal measurement).

The writing self-efficacy survey based on Bandura’s (1994) self-efficacy theory was used to operationalize writing self-efficacy. The eight writing skills on the survey included the following: correct spelling of all words on one page, correct use of punctuation on one page, correct use of parts of speech (verbs, nouns, and adjectives), ability to construct a simple sentence with appropriate use of punctuation and grammar, correct usage of plurals and verbs, ability to construct sentences with complex structure and appropriate use of punctuation and grammar, ability to develop meaningful paragraph structure, and ability to express ideas by writing an organized paper with use of paragraph transitions. Cronbach’s alpha for the component skill subscale of the writing self-efficacy survey was reported as $\alpha = .95$, indicating a high internal consistency. Correlations between the items were positive and exceeded .60 and discriminated well among subjects (Shell et al., 1989).
Writing self-efficacy was measured by the writing self-efficacy survey in which responses were based on an interval scale. The survey allowed participants to self-report perceived confidence with successfully performing eight different writing skills. Each of the eight questions related to a different writing skill and was considered an interval measurement based on a scale of 0 (no chance of successfully performing the writing skill) to 10 (complete certainty of successfully performing the writing skill). The writing self-efficacy scale had equal distance between each point, and a 1-point increase was equivalent to any other point increase, and is consistent with interval measurement (Lodico et al., 2010; Polit & Beck, 2008). Individual values for each of the eight writing self-efficacy items were summed to obtain individual composite scores for individual writing self-efficacy, which ranged from 0-80. All of the 91 individual writing self-efficacy values were summed to obtain a total composite score, which was then divided by 91 to obtain the total mean writing self-efficacy value.

Data Analysis Procedures

Quantitative Analysis

Quantitative analysis procedures included data preparation, use of descriptive statistics, and use of inferential statistics.

Data preparation. Data preparation for the quantitative component included the input of values from each of the demographic surveys and writing self-efficacy surveys into a spreadsheet and then into the SAS 9.3 statistical program. The spreadsheet was divided into columns, one for each of the eight questions on the writing self-efficacy survey (SE1, SE2, SE3, etc.), and columns that represented data for each of the demographic groups (age, gender, student status, employment status, children, support
system, writing course, and first spoken language). Two people entered the data: one person read the data and the other person typed the data onto the spreadsheet.

**Descriptive statistics.** Data from the quantitative writing self-efficacy surveys were analyzed to determine the values of individual self-efficacy for each writing skill as indicated on the writing self-efficacy survey, and to determine total self-efficacy data regarding mean, standard deviation, median, minimum score, and maximum scores. Statistical analysis also determined if relationships were shown between writing self-efficacy and nursing student demographic groups.

The central quantitative research question was as follows: What is the writing self-efficacy of entry-level BSN students? The variable for the central research question was writing self-efficacy, a continuous variable based on an interval scale. No hypotheses were identified for the central research question because the question was a descriptive survey question and was not measurable.

The central research question was answered by determining the total score of writing self-efficacy values, as well as total mean, total standard deviation, total median and total minimum score, and total maximum scores. In order to determine the summary of total self-efficacy data for the central research question, raw data for each writing self-efficacy question from each of the precoded writing self-efficacy surveys and demographic surveys were entered into SAS 9.3.

Descriptive statistics were used to interpret the data about singular self-efficacy related to each of the writing skills as indicated on the writing self-efficacy survey. The mean, standard deviation, median, minimum scores, and maximum scores were determined. Measures of central tendency for each of the eight subquestions related to
the different demographic groups included mean (average of all the scores) and median (the score that was in the direct middle of all scores and divided the scores exactly in the middle). Measures of variability included range, minimum scores, maximum scores, and standard deviation. The range of scores was the difference between the highest and lowest score for each writing component skill. The standard deviation examined the distance of a score from the mean distribution. A high standard deviation indicated a large variability of the scores from the mean. Likewise, a low standard deviation indicated a small variability of the scores from the mean. The data were also analyzed to determine if relationships were evident between writing self-efficacy and the eight demographic groups.

**Inferential statistics.** Eight quantitative correlational subquestions, hypotheses, and null hypotheses were developed in relation to the central quantitative research question in order to determine if relationships existed between writing self-efficacy and each of the eight demographic groups. Quantitative data analysis tested the eight null hypotheses for statistical significance and indicated that the data were not normally distributed on the bell curve. Since the data was not normally distributed, both one-way ANOVA and Kruskal-Wallis testing were used to determine statistical significance.

**Rationale for using ANOVA and Kruskal-Wallis.** The rationale for using one-way ANOVA in this study was that while the data did not have a normal bell-shaped curve, there was not a definite way to determine abnormal data distribution. Additionally, the higher the number of subjects that participated in the study, the less emphasis was placed on a normal bell curve distribution. For this study, both ANOVA $p$-
values and Kruskal-Wallis $p$-values values are reported to verify that the apparent violation of the normal distribution did not lead to inaccurate conclusions.

**ANOVA.** A parametric measurement to test several null hypotheses at the same time is called Analysis of Variance, or ANOVA. For this study, average writing self-efficacy values for each of the eight demographic groups was determined. Based on the variability in scores within each group, one-way ANOVA determined whether the differences between the groups were coincidental due to random variability or appeared to be due to a true difference among the groups in the populations (Triola, 2006; Statistics Solutions, 2013).

Assumptions for ANOVA are as follows: normal distribution of data, independence of cases, and homogeneity of the groups in which the variance between groups should be approximately equal (Statistics Solutions, 2012). The assumption that was not supported in this study was the normal distribution of data.

One major assumption for ANOVA is that the variable being compared among the groups has a normal distribution within each group showing an approximately bell-shaped shape (Lund Research, 2013). A normal bell-shaped curve is a particular statistical distribution of data that implies most individuals within a group have a score somewhere near the average, and fewer individuals have scores that are not close to the average on either side. When the data for this study was examined by histogram, it was noted that the distribution curve was left skewed and did not represent a bell-shaped curve.

**Kruskal-Wallis.** An appropriate nonparametric test used for unsymmetrical distributions is the Kruskal-Wallis test, which is considered distribution-free and
indicates that distribution does not matter. Kruskal-Wallis is based on the assumption that data is ranked from three or more independent samples (Triola, 2006). Assumptions for the Kruskal-Wallis test include the following: random samples are drawn from the population, cases for each group are independent, and the measurement scale should be at least ordinal (Statistics Solution, 2012). The assumptions for Kruskal-Wallis are supported in this study.

Kruskal-Wallis data analysis produced outcomes that were similar to the ANOVA results. The Kruskal-Wallis values were considered more accurate, since ANOVA could have been compromised by skewed data distribution. Both ANOVA and Kruskal-Wallis values are presented to verify that the apparent violation of the normal distribution did not lead to inaccurate conclusions.

The Kruskal-Wallis $H$ test statistics and corresponding $p$-values determined significance levels (Statistics Solution, 2013; Triola, 2006), which was previously set at 0.05, or 5%. A high Kruskal-Wallis $H$ test statistic and a low Kruskal-Wallis $p$-value of 0.05 or below indicated a statistically significant result, indicating that writing self-efficacy for a specific demographic group was statistically significant. A low Kruskal-Wallis $H$ test statistic and a high $p$-value above 0.05 indicated that there was not a statistically significant difference between writing self-efficacy and a specific demographic variable.

**Qualitative**

Qualitative analysis followed the process as outlined by Merriam (2009) in which a sequential procedure was used to code and categorize the data. Analysis of the qualitative focus group interview data began with data preparation by the researcher, and
included the researcher transcribing the raw data from the voice-recording device into a document. The transcribing process was completed after the focus group interviews. Initially, the transcribed data documents were organized by focus group, but then the transcribed data were organized by order of the interview questions. The transcribed data were critically reviewed. Open coding was initiated by identifying key terms that answered the central qualitative research question and subquestion and the qualitative interview questions about hindrances and facilitators with academic writing and resources that were useful and not useful in completing a formal academic writing assignment. Key terms were marked in the legend of the transcribed data document.

Analytical coding (Merriam, 2009) was used next to make inferences, interpretations, and reflections about the key terms so that categories and subcategories could be identified. The categories (or groupings) and subcategories were used to make a rudimentary outline of abstract concepts. Field notes that were taken during the interviews were also incorporated into the analysis process by using open coding and analytical coding (Merriam, 2009).

The categories, or themes, were named and were compatible with answering the qualitative research questions. Merriam (2009) suggested that the categorical themes be based on the following criteria: reflective of the study’s purpose, thorough so that all data can fit into a category, exclusive so that a piece of data can only fit into one category, discreet so that the name of the category fits the type of data that is in the category, and abstractly congruent so that all categories are at the same level of abstraction. The number of categorical themes was reduced to five or six in order to enhance the level of abstraction and enhance communication of findings. Models were devised so that the
categorical themes and subcategories could be linked together to demonstrate interrelationships and visualize a meaningful representation of the data analysis results. Finally, qualitative data analysis was compared with the empirical data analysis from the component skill subscale of the writing self-efficacy survey.

The following summary identifies the basic qualitative data analysis procedure suggested by Merriam (2009) that was used for this study:

1. Raw interview data from the voice recordings were transcribed.
2. Transcribed data from the interviews were organized in sequential order of the focus group interview protocol.
3. Open coding was used to identify exact words of the participants’ responses.
4. Analytical coding was used to group responses into categories and to interpret meanings from those responses.
5. Categories were grouped into main themes that supported the purpose and theoretical framework of the study.
6. Models were developed to show visual representation of the abstract categories, demonstrate the interrelations, and illustrate meaningful representation of the main themes.

The main qualitative research question was as follows: What has hindered or facilitated past writing experiences of entry-level BSN students? The subquestion was as follows: What events, resources, issues, and relationships do entry-level BSN students perceive to be significant in their nursing education writing experiences? The interview protocol (see Appendix C) was designed to ask questions to the participants so that the research questions could be answered. The data analysis was performed so that each interview inquiry could be addressed.
Limitations of the Research Design

The concurrent triangulation design was used to study the writing self-efficacy phenomenon. The method was preferred because it attempted to confirm, cross-validate, or corroborate findings within a single study. Incorporating both quantitative and qualitative methods in one study was a means to offset a limitation of using only one method of data collection method. Equal priority was given to both data collection methods. Data analysis results were integrated during the interpretation phase of the data analysis process (Tashakkori & Teddlie, 2003).

Convenience sampling posed a limitation for the study because the research participants were geographically available. However, the sampling issue was counteracted by using more than one research site. The number of participants needed for the study was 84. However, 91 participants volunteered to be in the study, and no one withdrew from participation.

The Kruskal-Wallis nonparametric test was used for this study because the data were not normally distributed. A parametric testing strategy, such as analysis of variance, could have been used had the data been normally distributed. A limitation of nonparametric testing is that it is not as rigorous as parametric testing. However, for this study, the nonparametric test was needed and aligned with what the data showed.

Internal Validity

In quantitative experimental studies, internal validity refers to the extent to which it can be concluded that an experimental treatment caused the observed effects rather than external factors that may have caused the observed effects (Polit & Beck, 2008; Trochim, 2006). For nonexperimental designs, internal validity is determined by the extent to
which a survey measures what it is intended to measure (Polit & Beck, 2008), which, for this study, was the writing self-efficacy phenomenon for the quantitative descriptive survey component.

**Determination**

Internal validity for this study was measured by the reliability and internal consistency of the survey instrument, the writing self-efficacy survey. Cronbach’s alpha for the writing self-efficacy survey was reported as $\alpha = .95$, indicating a high internal consistency. Correlations between the items were positive and exceeded $r = .60$ and discriminated well among subjects (Shell et al., 1989), all of which indicated that the component skill subscale of the writing self-efficacy survey measured the intended phenomenon of writing self-efficacy and strengthened the internal validity of the research findings. Additionally, objectivity was observed during quantitative data analysis so that researcher bias did not affect the research findings and threaten internal validity.

**Threats**

Threats to internal validity for nonexperimental research designs include sample and sample size, appropriate use of inferential statistics, subject mortality (Polit & Beck, 2008), lack of accuracy of the participants’ responses on a survey, and the Hawthorne effect (Mertens, 2005). The sample selected for this study was selected from three nursing program research sites within driving distance of the researcher. The sample may not be representative of the population for this study, which was entry-level BSN students in the Midwestern United States), but because three sites were chosen instead of one or two, the threat to internal validity was reduced. In addition, for this study, the total sample size of 91 exceeded the minimum sample size of 84, which was needed to
determine correlations. The power of $1 - \beta = .80$ was chosen because it is the conventional standard power in nursing research (Faul et al., 2012; Polit & Beck, 2008).

The appropriate use of inferential statistics can minimize the potential threat to internal validity. Because the data were not normally distributed, the Kruskal-Wallis nonparametric test was indicated instead of the more common ANOVA to determine statistical significance for the hypotheses. If the data had been normally distributed in a normal bell-shaped curve, the analysis of variance would be have been used. Nonparametric tests are not as rigorous as parametric tests, but the Kruskal-Wallis was appropriately used and aligned with the left-skewed data distribution of this study.

Potential threats to internal validity of the quantitative component of this mixed-methods design included participant withdrawal (mortality), lack of accuracy of the participants’ responses on the self-efficacy survey, and the Hawthorne effect. The Hawthorne effect is a phenomenon in which research participants modify their behavior because they know their behavior is being monitored in the research study (Mertens, 2005). The following steps were taken by the researcher to minimize threats to internal validity: using a writing self-efficacy survey that had a previously established internal reliability and consistency, ensuring that participants understood the process for completing the survey by giving examples and explanations, reiterating the instructions for the survey and answering questions as needed, ensuring that participants were comfortable with completing the survey, and ensuring that participants understood they were not obligated to participate in the study. Additionally, in order to minimize the Hawthorne effect, the participants were strongly encouraged to answer the survey questions as truthfully as possible so that the findings of the study provided sound
scientific data. By identifying the threats to internal validity and incorporating measures to counteract the threats to internal validity, this study’s design had internal validity, which supported academic rigor.

**Veracity Determinants for the Qualitative Research Component**

Reliability and validity of qualitative research focuses on the trustworthiness of data, with the researcher being the measurement instrument (Houser, 2008). The veracity of determinants addresses credibility, confirmability, and dependability in relation to this study’s qualitative data.

**Credibility**

*Credibility* of qualitative research is the construct that parallels *internal validity* of quantitative research (Lodico et al., 2010). Credibility focuses on the extent to which research findings match reality and the extent to which detailed and rich descriptions of data analysis are provided (Houser, 2008; Lodico et al, 2010).

**Researcher credibility and experience.** The researcher earned and maintained credibility in the nursing profession and as a nurse educator and sought guidance from colleagues who were experts in qualitative research. That guidance, as well as evidence in the scholarly literature, was used to maintain credibility during the qualitative processes.

Each of the focus group interviews lasted about 45 minutes to one hour. Almost three hours was spent in the field doing the focus group interviews. During the interview process, the researcher was cognizant of the main goal of the interview process, which was to explore academic writing experiences from the perspectives of entry-level BSN students. This mixed-methods study was not intended to provide data to indicate causal
relationships between the variables. The researcher was aware of and critically analyzed personal thoughts and biases about the research phenomenon. Bracketing was used to reduce researcher bias based on personal assumptions and experiences.

**Triangulation.** Triangulation occurred in several forms. Voice and video recordings of each of the focus group interviews ensured the accuracy of the data collection. Field notes were documented on the interview protocol. The interview protocol was asked consistently in the same order for each focus group interview.

The researcher noted the length of time spent with each focus group and the processes used to develop nurturing relationships with the participants. The researcher noted the participants’ authenticity and body gestures during the interview process as the participants shared academic writing experiences. Authenticity of the participants was ensured by the researcher noting consistencies and inconsistencies with verbal and nonverbal communications and noting recurring themes that became evident throughout the interviewing processes (Lodico et al., 2010). A review of the video recordings and transcribed data indicated that no inconsistencies were noted.

**Member checks.** Participant member checks were used. Transcribed data from the interviews were sent to the participants for review so that accuracy of the transcribed data could be verified.

**Confirmability**

*Confirmability* in qualitative research, which is the construct that parallels *objectivity* in quantitative research, was used to reduce bias in the methodology procedures (Houser, 2008). In addition to triangulation, several other methods were used to enhance confirmability: negative case analysis, bracketing, and triangulation.
**Negative case analysis.** Negative case analysis determined if certain data contradicted or negated something that was identified as common to the rest of the participants (Trochim, 2006). If contradicted data were obtained during the focus group interview, the participant was asked to provide additional information about the experience.

**Bracketing.** The researcher was aware of and critically analyzed personal thoughts and biases about the research phenomenon. Bracketing (Houser, 2008) was used to reduce researcher bias based on personal assumptions and experiences.

**Dependability**

*Dependability* in qualitative research is a construct that is parallel to *reliability* in quantitative research (Lodico et al., 2010). Dependability refers to the tracking of procedures and processes used for data collection and data interpretation so that the research process may be replicated (Houser, 2008). In addition to triangulation, several other methods were used to enhance dependability.

**Peer examination.** An objective external peer examined the field notes, and determined if the findings were substantiated in the data, themes were appropriate for the data, and researcher’s biases were controlled (Lodico et al., 2010). The external peer was a doctorally-prepared qualitative research expert who reviewed the raw transcribed data, initial open coding processes, analytical coding processes, and identification of themes. The qualitative expert concurred with the results and understood the theme emergence.

**Dense description of research methods.** A thick and rich description of the research setting was documented to enhance the dependability of the research findings as
true and valid interpretations. A detailed discussion was documented to provide a dense description of the qualitative data collection process.

**Audit trail.** During data analysis coding procedures, extensive notes were documented and the participants’ words were highlighted. Color coding was used during the naming of categories and identification of emergent themes. The theme identification was supported by the three factors of the reciprocal determinism model (Bandura, 1977, 1986).

**External Validity**

*External validity* refers to the generalizability of quantitative research findings from a sample to a larger population (Polit & Beck, 2008) and is significant because it defines the extent to which the research study findings may be applied to a larger population. Determining the sample for a descriptive correlational survey study was essential because the primary investigator needed to ensure that the sample was closely representative of the population (Leedy & Ormrod, 2005).

*Population validity* refers to how well the sample is a representation of the population (Renckley, 2013). Population validity can be a threat to external validity. The population for the quantitative component of the study was defined as entry-level BSN students in a Midwestern state, which could have included sophomore or junior entry-level BSN students, depending on the type of BSN program curricula. Inclusion criteria for the sample included students who could speak, read, and write English and who were considered traditional or nontraditional college students.

Non-probability convenience sampling was used to obtain the quantitative sample. Volunteer participants were selected according to their accessibility, proximity
to the researcher, and availability (Urdan, 2005). Another characteristic of convenience sampling is that the potential respondents are willing to volunteer for the study (Urdan, 2005). Even though non-probability sampling may not enhance generalizable findings in quantitative research, it is used most often in nursing research studies (Polit & Beck, 2008). The limitation of non-probability sampling was counteracted by selecting participants from multiple baccalaureate nursing programs in a Midwestern state.

Another important factor that was considered for obtaining an adequate sample was assurance that an appropriate number of participants who were representative of the population were being studied. To obtain the minimum number of sample participants \( N = 84 \), the primary investigator chose to use convenience sampling from three BSN programs that granted permission to accept the primary investigator into the nursing program to conduct research.

A minimum of 84 participants for the sample was needed for data analysis in order to answer the quantitative subquestions about relationships between entry-level BSN students’ writing self-efficacy and specific demographic variables. The following parameters were used to determine the sample size of \( N = 84 \): a medium effect size of \( d = .60 \), an alpha error of probability of \( \alpha = 0.05 \), and a power of \( 1 - \beta = .80 \), which is the conventional standard for power in nursing research (Faul et al., 2012; Polit & Beck, 2008). The medium effect size of \( d = .6 \) was able to detect a 1-point difference between groups when analyzing the data for the quantitative subquestions. Cohen’s (1988) standard for interpreting effect size indicated that a medium effect size is close to 0.5 and a large effect size is close 0.8. Cohen urged researchers to interpret effect size based on the situational context of a study’s data. Based on these factors, an a priori sampling
calculation determined \( N = 84 \) as the minimum required sample size needed to answer the quantitative subquestions.

Renckley (2013) explained that personological variable validity is another threat to external validity and refers to the relevance and completeness of demographic variables selected for the study. The demographic variables were selected based on demographic information, scholarly literature review about English as second language students (Saban & Erkan, 2011; Williams & Takaku, 2011), and principles evident in Bandura’s (1977, 1986) self-efficacy theory regarding reciprocal determinism. Reciprocal determinism included the influence of environmental factors, behavioral factors, and personal factors on one’s perception and level of self-efficacy (Bandura, 1977, 1986).

In summary, threats to external validity affect the external portion of a study concerning generalizability of research findings. Threats to external validity were addressed and measures were taken to enhance the generalizability of this study’s findings.

**Transferability**

*Transferability* in qualitative research is a construct parallel to *external validity* in quantitative research. In this study, *transferability* refers to generalizability of research findings from the study’s sample of entry-level BSN students in a Midwestern state to the population of entry-level BSN students in the Midwestern United States. Convenience sampling was used to acquire the sample that included data collection at three research sites. The researcher provided a thick and rich contextual description of the research site
and the participants involved in the focus group interviews, which enabled the reader to apply a transferability judgment to a different situation (Houser, 2008).

The researcher ensured that during data analysis, the qualitative research data provided an objective perspective of the findings by identifying pertinent (Patton, 1990; Turner, 2010). Ultimately, the reader is the judge of transferability (Lodico et al., 2010). Transferability is not essential in qualitative research but it provides a context of rich detail that may be used for future transferability and replication of the study (Lodico et al., 2010).

**Expected Findings**

Data analysis results from the writing self-efficacy survey were expected to show the ranking of the self-efficacy for eight writing skills. The range, mode, median, and mean scores of self-efficacy for each of the writing skills were determined. Results were expected to show which writing skills had the lowest self-efficacy in comparison to the other writing skills. The higher self-efficacy scores for the writing skills suggested that BSN entry-level nursing students felt confident about the particular writing. It was expected that some relationships between writing self-efficacy and the demographic variables would be statistically significant at the $p = .05$ level, which would indicate that relationships did exist between entry-level BSN students’ writing self-efficacy and some of the eight demographic variables including entry-level BSN students’ age, gender, student status, employment status, responsibility of being a primary care provider, history of having taken collegiate writing courses, the availability of support systems, and the participant’s first-speaking language. The research findings could be used to determine which BSN entry-level nursing students may be at risk for not being able to meet writing
competencies in nursing education and who may need special support and guidance from nurse educators, tutors, and academic advisors during the nursing education process.

For the qualitative component, the researcher expected to find rich and meaningful data about entry-level BSN students’ experiences with academic writing—specifically, any events, resources, and relationships that helped or hindered entry-level the subjects with achieving competent academic writing. The interview data yielded positive and negative influences that the subjects experienced while trying to achieve competent formal academic writing. The researcher expected to find that some of the demographic variables played a role in determining the writing success of entry-level BSN students, especially gender, employment status, primary care-provider status, length of time since the student completed a collegiate writing course, and first-speaking language. The participants’ experiences provided scientific data that could be used to suggest hindrances and facilitators to academic writing in nursing education. Nurse educators may use these research findings to develop strategies to increase writing self-efficacy that may help entry-level BSN students achieve competent academic writing.

**Ethical Considerations**

**Researcher’s Position Statement**

The researcher’s position statement includes information about potential ethical issues of the study and potential conflicts of interest. Focus is provided on ensuring IRB compliance.

**Conflict of interest assessment.** The researcher determined that there were no financial, academic, or other personal interests. The research sites in this study did not include the researcher’s place of employment.
**Researcher’s Position.** The researcher’s prior experiences, preconceptions, and biases were mentally noted and were found to support the researcher’s decision to design and conduct a research study on writing self-efficacy and academic writing experiences of entry-level BSN students. The researcher’s experiences as an instructor for entry-level BSN students have shown that nursing students appeared to show little or no enthusiasm to achieve academic writing competency, which has been consistently demonstrated on their academic writing assignments, even when constructive instructor feedback had been provided.

Multiple observations of consistent behaviors over years of academic educational experience reinforced the researcher’s impressions of entry-level BSN students’ typical responses when given a writing assignment. Several observations could be made about the entry-level BSN students’ behaviors when they were asked to complete a formal academic writing assignment. One impression based on observation was that nursing students did not value or respect the need for achievement of competent academic writing in nursing education or the nursing profession. Another impression based on observation was that nursing students might not have known or understood the correct way to write formal academic papers in regard to grammar, punctuation, or APA formatting. Another impression based on observation was that entry-level BSN students may have had the ability to successfully complete formal academic writing assignments but may also have had low self-efficacy and believed that they were not capable of successfully completing formal academic writing assignments.

The researcher highly valued and understood the need for entry-level BSN nursing students to achieve competent academic writing, which is needed to advance the
scholarship and scientific foundation of the nursing profession. The underlying preconceptions and biases were intentionally reserved during the interview data collection process.

When performing qualitative interviews, a researcher must intentionally bracket (Creswell, 2009; Houser, 2008), or set aside personal experiences, and show no visible biases by being acutely aware of verbal and nonverbal language used during the interview process. The researcher actively focused on new perspectives presented by the participants (Creswell, 2007) during the interview process. The participants viewed the researcher/nurse educator as a role model (Bruning & Horn, 2000), which encouraged and supported the researcher to display a positive, professional, yet nurturing persona during the interview process so that participants were relaxed and inclined to honestly voice their academic writing experiences. The researcher followed and adhered to the questions on the interview protocol, showed respect and courtesy to the participants, gave little advice, and was an attentive listener (Creswell, 2007).

**Ethical Issues**

Ethical issues for this study included IRB approval, potential negative risks for being a study participant, protection from harm, informed consent, assurance of voluntarism, anonymity and confidentiality, right to privacy, and honesty with professional colleagues. IRB approval from Capella University and the participating BSN nursing programs was granted before beginning data collection. The study was granted exempt review status by the Capella IRB, meaning that there was minimal, if any, risk for the participants involved in the study. A risk that the subjects may have had was the time required to complete the surveys due to busy schedules, but those who did
not choose to participate left the data collection room without coercion and did not participate.

Gaining IRB approval is ethically fundamental prior to initiating any data collection. Ethical considerations were strongly considered for the sample of entry-level BSN students in regard to beneficence, respect, privacy and confidentiality, justice, and bias (U.S. Department of Health & Human Services, 1979). The ethical principles guided the informed consent process, sample selection process, administration of the writing self-efficacy survey, and interview process.

**Beneficence.** The principle of beneficence specifies that the main purpose of the research study is to do good and maintain no harm to the participants (U.S. Department of Health & Human Services, 1979). The main purpose for conducting this study was to collect and explore scientific data from the perspectives of entry-level BSN students. The quantitative and qualitative data provided evidence about the participants’ writing self-efficacy and information about academic writing experiences. Survey data and interview data were kept confidential and were used only for the purpose of conducting this study. Names of participants were not used for any other purpose nor published or shared with anyone else.

**Respect.** The principle of respect for persons required that the subjects in the sample had the right to voluntarily choose to either participate or not participate in this study. Those who chose to complete the writing self-efficacy survey and voluntarily participated in focus group interviews were given a copy of the informed consent form, which included the study’s title and purpose, description of student participation rights and responsibilities, reassurance about the maintenance of confidentiality, and
researcher’s contact information. The participants read the consent form. The researcher verbally highlighted the main points of the informed consent form. Time was allowed for the participants to ask questions prior to the quantitative and qualitative data collection processes, and their questions were answered.

**Privacy and confidentiality.** Student privacy and confidentiality were protected by coding each informed consent document, each survey packet that included the demographic survey and self-efficacy survey, and each interview protocol. Only the researcher knew the coding process. All research documents were kept in a locked area accessible only by the researcher. Digital information and computer access were available only to the researcher by ensuring that the researcher’s computer was locked and accessible only by a password.

**Justice.** The principle of justice required that the subjects be treated fairly and (U.S. Department of Health & Human Services, 1979) with a right to privacy. The nursing student sample was selected according to those students who were enrolled as entry-level sophomores or juniors in a BSN nursing program, depending on the curricular structure of the nursing program major. The participants were treated with respect by the researcher’s being sincere and humanistic and by ensuring that all communications with them during the data collection process were fair, respectful, and private only with them.

While trying to gain permission to potential research sites, the researcher was careful to exhibit honesty, respect, and professionalism with the nursing program personnel. Six BSN nursing programs were asked for research site permission and permission was obtained from three nursing program facilities. The professional
colleagues were very respectful and sincerely helpful with ensuring that research permission was gained and that access to the needed sample was obtained.

**Bias.** An ethical issue that could have caused bias was the monetary award that was given to participants after the interview process was completed. The intent of the monetary award was to provide sufficient reward to attract five or six volunteer participants for each focus group interview of the qualitative data collection process because the interview process was much more time-consuming for the participants than the quantitative writing self-efficacy survey was. Each individual participant was thanked for their willingness to participate in the interview. The participants were informed prior to the interview that all responses would be reported as aggregate data and that participants’ identifiable data would not be reported.

**Chapter 3 Summary**

The purpose of this mixed-methodology research study was to empirically determine writing self-efficacy and qualitatively explore academic writing experiences of entry-level BSN nursing students. The research problem investigated was the need to describe writing self-efficacy and academic writing experiences of entry-level BSN students so that facilitators and hindrances to competent academic writing could be identified. A comprehensive and current scholarly literature review indicated that very little information was available about writing self-efficacy and academic writing experiences of entry-level BSN students.

Entry-level BSN students in three Midwestern states were asked to voluntarily participate in the research study. The goal was to obtain a minimum of 84 participants for the quantitative component and to obtain three focus groups, each comprised of five
or six participants, for the qualitative component. A survey was used to collect information about the participants’ demographic information. A writing self-efficacy survey was the instrument used to collect data for eight different writing skills. Focus group interviews were used to collect qualitative data about the participants’ academic writing experiences.

A mixed-methods research design was used for this research study because the primary research questions and subquestions were quantitative and qualitative in nature. The dual data collection processes provided a means to answer the research questions about the writing self-efficacy phenomenon. The traditional mixed-methods design used was the concurrent triangulation strategy, which specified that both quantitative and qualitative data be collected at about the same time, separately analyzed, and then uniformly compared to determine similarities and differences of the two data sets (Creswell, 2009; Houser, 2008). The dual data collection process of this mixed-methods study was a positive attribute that counteracted the potential limitations of a single-method research design.
CHAPTER 4: DATA ANALYSIS AND RESULTS

The purpose of Chapter 4 is to document the methodology and results of the data analysis for the quantitative and qualitative data. Chapter 1 identified the purpose and significance of this study and documented the research questions and hypotheses. Chapter 2 identified the gap in scholarly literature that supported the need for this study. The research methodology was explained in Chapter 3. Both quantitative and qualitative data were collected, and the methodology and results of that data collection are reported in Chapter 4.

The quantitative data was analyzed by using one-way Analysis of Variance, or ANOVA, and Kruskal-Wallis testing. ANOVA, a parametric measurement, tests several null hypotheses at the same time. For this study, mean writing self-efficacy values for each of the eight demographic variable groups was determined. Based on the variability in scores within each group, one-way ANOVA indicated whether the differences between the groups were coincidental due to random variability or appeared to be due to a true difference among the groups in the populations (Triola, 2006; Statistics Solutions, 2013).

Use of the ANOVA parametric measurement is typically indicated when the data presents in a normal bell curve distribution. Although the normal bell curve distribution was not present in the quantitative data reported, K. Love-Myers, PhD, professional statistician and consultant from the University of Georgia, advised that ANOVA was appropriate for this study (Statistics Solutions, 2012; Statistics Solutions, 2013; Triola,
A negative correlation existed between the number of participants in a study and the importance of the bell-curve distribution (personal communication, August 28, 2013), and this study’s number of participants was considered high enough for the ANOVA to be appropriate (Lund Research, 2013).

Because the data in this study may not have met normal distribution requirements for ANOVA, both ANOVA and Kruskal-Wallis tests were used to determine statistical significance. Kruskal-Wallis is an appropriate nonparametric test for unsymmetrical distributions and is considered distribution-free, indicating that distribution does not impact the outcomes. Kruskal-Wallis ranks data from three or more independent samples to test the null hypotheses (Triola, 2006).

Kruskal-Wallis data analysis showed outcomes that were similar to the ANOVA results. The Kruskal-Wallis values were considered more accurate, since ANOVA could have been compromised by skewed data distribution. Both ANOVA $p$-values and Kruskal-Wallis $p$-values for this study are reported to verify that the apparent violation of the normal distribution did not lead to inaccurate conclusions.

The qualitative data was analyzed by using the basic qualitative approach (Merriam, 2009). Categories and themes were identified. Data sets for the quantitative and qualitative components were analyzed separately and then compared and contrasted (see Chapter 5) to identify similarities, contrasts, and an overall view of the results in relation to the research questions.

Chapter 4 discusses the quantitative and qualitative data analyses. First, the research sample is identified and described. Secondly, a summary of results for the quantitative data is explained by referring to the central quantitative research question
and the quantitative subquestions and hypotheses. An introduction to the qualitative analysis is described. Lastly, a detailed analysis for the quantitative component is reported by addressing each of the interview protocol questions, which provides data to answer the main qualitative research question about the hindrances and facilitators to competent academic writing. Data results for the qualitative subquestion are addressed regarding events, resources, issues, and relationships that entry-level BSN students reported to be significant in their quest to achieve competent academic writing.

**Description of the Sample**

The population for both the quantitative and qualitative components of the study was defined as entry-level BSN students in the Midwestern United States, which could include sophomore or junior entry-level BSN students, depending on the type of BSN program. The sample included entry-level BSN students in a Midwestern state who could speak, read, and write English and who were considered traditional or nontraditional college students. A *traditional college student* was defined as one who enters and attends college directly after earning a high school diploma by graduating from high school or by earning one of its equivalencies, such as successfully completing a home school program, successfully completing a high school equivalency program or completing requirements for a general equivalency diploma (U.S. Department of Education, 2012). A *nontraditional college student* was defined as one who does not attend college directly after high school and may possess one or more of the following criteria: financially independent, primary care provider for dependents including children under the age of 18 years or adults 19 years of age or older, care provider for a spouse or
significant other, employed part-time or full-time while enrolled in college classes, or
classified as a single parent (Newbold et al., 2010).

An overall demographic description for the sample of entry-level BSN students
revealed the following most common characteristics: female, aged 18–25 years, full-time
nursing student status, not employed, not a primary care provider, and able to access a
support system. Most of the participants in the sample had taken a writing course more
than a year prior to the study, and English was the first-spoken language.

Table 1 summarizes the demographic characteristics for the sample of 91 entry-
level BSN students who participated in the research study. All participants were retained.

Table 1. Research Sample Demographic Data

<table>
<thead>
<tr>
<th>Variable</th>
<th>Frequency</th>
<th>Percent</th>
</tr>
</thead>
<tbody>
<tr>
<td>Gender</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Female</td>
<td>74</td>
<td>81.32</td>
</tr>
<tr>
<td>Male</td>
<td>17</td>
<td>18.68</td>
</tr>
<tr>
<td>Age groups</td>
<td></td>
<td></td>
</tr>
<tr>
<td>18-25</td>
<td>66</td>
<td>72.53</td>
</tr>
<tr>
<td>26-30</td>
<td>18</td>
<td>19.78</td>
</tr>
<tr>
<td>31-35</td>
<td>4</td>
<td>4.40</td>
</tr>
<tr>
<td>36-40</td>
<td>2</td>
<td>2.20</td>
</tr>
<tr>
<td>41-45</td>
<td>1</td>
<td>1.10</td>
</tr>
<tr>
<td>Student status</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Full-time</td>
<td>90</td>
<td>98.90</td>
</tr>
<tr>
<td>Part-time</td>
<td>1</td>
<td>1.10</td>
</tr>
<tr>
<td>Employment</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Full-time</td>
<td>6</td>
<td>6.59</td>
</tr>
<tr>
<td>Part-time</td>
<td>35</td>
<td>38.46</td>
</tr>
<tr>
<td>Not employed</td>
<td>50</td>
<td>54.95</td>
</tr>
<tr>
<td>Status as a care provider</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Yes</td>
<td>12</td>
<td>13.19</td>
</tr>
<tr>
<td>No</td>
<td>79</td>
<td>86.81</td>
</tr>
<tr>
<td>Presence of a support system</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Yes</td>
<td>89</td>
<td>97.80</td>
</tr>
<tr>
<td>No</td>
<td>1</td>
<td>1.10</td>
</tr>
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</table>
Table 1. Research Sample Demographic Data (continued)

<table>
<thead>
<tr>
<th>Variable</th>
<th>Frequency</th>
<th>Percent</th>
</tr>
</thead>
<tbody>
<tr>
<td>Both</td>
<td>1</td>
<td>1.10</td>
</tr>
<tr>
<td>Time of last writing course</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Less than a year prior to study</td>
<td>15</td>
<td>16.48</td>
</tr>
<tr>
<td>More than a year prior to study</td>
<td>76</td>
<td>83.52</td>
</tr>
<tr>
<td>First spoken language</td>
<td></td>
<td></td>
</tr>
<tr>
<td>English</td>
<td>83</td>
<td>91.21</td>
</tr>
<tr>
<td>Spanish</td>
<td>1</td>
<td>1.10</td>
</tr>
<tr>
<td>Other</td>
<td>7</td>
<td>7.69</td>
</tr>
</tbody>
</table>

The sample included 91 participants, which was more than the 84 participants needed to determine correlations for the eight hypotheses and null hypotheses. The participants in this study were entry-level BSN students in the first year of the nursing program major of an upper level nursing division program and were considered second semester juniors.

The gender allocation for the sample of 91 participants included 81% females and 19% males. The Department of Health and Human Services, Office of Minority Health (2009) reported that 5.8% of the total nursing population is male. Therefore, this study’s sample included a disproportionately large number of males in relation to the number of males in the general RN workforce.

**Alternate definitions.** Entry-level BSN student may be defined as a first or second year BSN student actively participating in a pre-licensure program. The definition of entry-level BSN student varies between nursing programs. Entry-level BSN
student does not refer to those enrolled in pre-nursing programs. Alternative situations may be used to define entry-level BSN student.

One alternative situation defined entry-level BSN students as those who are actively participating in the first year of upper division nursing education courses. Some BSN programs have two years of lower division pre-nursing courses and two years of upper division nursing courses. The pre-nursing student must be academically successful in the lower division pre-nursing courses before being admitted to the upper level division of the nursing program.

A second alternative definition included nursing students who take pre-nursing courses during the freshman year. If academically successful, the pre-nursing students continue with the main BSN pre-licensure program for the remaining three years and may be classified as sophomores, juniors, or seniors. Entry-level BSN students in this alternative definition are those in the first or second year of the BSN pre-licensure nursing program and may be classified as sophomores or juniors. The participants in this study were entry-level BSN students in the first year of the nursing program major of an upper level nursing division program and were considered second semester juniors.

Summary of the Results for the Quantitative Component

Central Research Question

The central research question was as follows: What is the writing self-efficacy of entry-level BSN students? The summary of results from the writing self-efficacy survey showed that the total mean score self-efficacy score for entry-level BSN students was 67 out of 80, with 80 being the highest possible score. Writing self-efficacy scores for each
of the eight writing skills to which students responded with their self-efficacy ranged from 7.989 to 8.626, with 10 being the highest possible score.

**Hypotheses and Null Hypothesis for the Quantitative Component**

**Research subquestion 1.** Is there a relationship between entry-level BSN students’ writing self-efficacy and their age?

- $H_1$. A statistically significant relationship exists between entry-level BSN students’ writing self-efficacy and their age.

- $H_0$. No statistically significant relationship exists between entry-level BSN students’ writing self-efficacy and their age.

**Results.** Data analysis results indicated that the difference in mean writing self-efficacy scores by age was not statistically significant.

**Research subquestion 2.** Is there a relationship between entry-level BSN students’ writing self-efficacy and their gender?

- $H_1$. A statistically significant relationship exists between entry-level BSN students’ writing self-efficacy and their gender.

- $H_0$. No statistically significant relationship exists between entry-level BSN students’ writing self-efficacy and their gender.

**Results.** Data analysis results indicated that writing self-efficacy for males and females were different to a degree that was statistically significant.

**Research subquestion 3.** Is there a relationship between entry-level BSN students’ writing self-efficacy and nursing student status?

- $H_1$. A statistically significant relationship exists between entry-level BSN students’ writing self-efficacy and their student status.

- $H_0$. No statistically significant relationship exists between entry-level BSN students’ writing self-efficacy and student status.
Results. Only one subject out of the 91 participants reported part-time nursing student status. Therefore, analysis between writing self-efficacy and student status could not be determined based on this study’s data set.

Research subquestion 4. Is there a relationship between entry-level BSN students’ writing self-efficacy and their employment status?

$H_1$. A statistically significant relationship exists between entry-level BSN students’ writing self-efficacy and their employment status.

$H_0$. No statistically significant relationship exists between entry-level BSN students’ writing self-efficacy and their employment status.

Results. Data analysis results indicated that the difference in mean writing self-efficacy scores by employment status was not statistically significant.

Research subquestion 5. Is there a relationship between entry-level BSN students’ writing self-efficacy and their primary care-provider status?

$H_1$. A statistically significant relationship exists between entry-level BSN students’ writing self-efficacy and their primary care-provider status.

$H_0$. No statistically significant relationship exists between entry-level BSN students’ writing self-efficacy and their primary care-provider status.

Results. Data analysis results indicated that the difference in mean writing self-efficacy by care-provider status was not statistically significant.

Research subquestion 6. Is there a relationship between entry-level BSN students’ writing self-efficacy and their support-system status?

$H_1$. A statistically significant relationship exists between entry-level BSN students’ writing self-efficacy and their support-system status.

$H_0$. No statistically significant relationship exists between entry-level BSN students’ writing self-efficacy and their support-system status.
Results. Only one subject out of the 91 participants reported no access to a support system. Therefore, statistical significance between writing self-efficacy and support-system status could not be determined based on this study’s data set.

Research subquestion 7. Is there a relationship between entry-level BSN students’ writing self-efficacy and completion of a prior college-level writing course?

$H_1$. A statistically significant relationship exists between entry-level BSN students’ writing self-efficacy and completion of prior college-level writing course.

$H_0$. No statistically significant relationship exists between entry-level BSN students’ writing self-efficacy and completion of prior college-level writing course.

Results. Data analysis results indicated that the difference in mean writing self-efficacy scores by prior writing course was not statistically significant.

Research subquestion 8. Is there a relationship between entry-level BSN students’ writing self-efficacy and first-speaking language?

$H_1$. A statistically significant relationship exists between entry-level BSN students’ writing self-efficacy and first-speaking language.

$H_0$. No statistically significant relationship exists between entry-level BSN students’ writing self-efficacy and first-speaking language.

Results. Data analysis results indicated that the difference in mean writing self-efficacy by first-speaking language was not statistically significant.

Qualitative Component Analysis

The basic qualitative design using conventional content analysis was used to analyze the qualitative focus group interview data. The main goal of conventional content analysis is to describe a phenomenon (Hsieh & Shannon, 2005), which was the intent of this study: to describe the writing self-efficacy phenomenon including the hindrances and facilitators that entry-level BSN students encounter while trying to achieve competent academic writing.
Initial Analysis

Raw data treatment. The raw data was transcribed verbatim by the researcher, arranged in order of the interview protocol, and read repeatedly in order to understand and identify key terms, repetitive words and phrases, impressions, thoughts, and potential themes. First, the raw data was read word for word in its entirety in order to grasp an understanding of the overall perspective. Secondly, the researcher highlighted words and phrases that answered the interview questions. Open coding was used to identify key terms that answered the central qualitative research question and subquestion and the qualitative interview questions. Key terms were marked in the legend of the transcribed data document. For example, comments related to Internet use, online data base searches, use of web sites to help with APA formatting, email communications with instructors, and submission of assignments online were identified as key terms and became a distinct category related to technology.

Note treatment. Notes from the open-coding process were used to conduct the analytical coding (Merriam, 2009). Inferences, interpretations, and reflections about the key terms were considered. Categories were identified and included the following examples: technology, family, friends/peers, motivation, attitudes, knowledge deficits, APA formatting, past writing experiences, helpful resources, non-helpful resources. The field notes were also open-coded and analytically coded. Categories were identified from the field notes, which were the same as those identified from the transcribed data. The main thematic categories were identified as behavioral factors, personal factors, and environmental factors that supported the terminology from Bandura’s self-efficacy theory (1977, 1986) and the reciprocal determinism model (Bandura, 1997; Lang, 2005; Pajares,
as illustrated in Figure 4. For example, the key terms/categories related to technology aligned with the environmental factor theme because technology is within one’s physical and social environment.

**Theme differentiation.** Definitions for the main themes were developed. The three main themes aligned and supported the three factors of reciprocal determinism: individual behavior, personal characteristics, and environmental influences (Bandura, 1977, 1986). Each of the three factors encompassed a distinct subset of characteristics. Environmental factors were composed of an individual’s social and physical surroundings that may provide reinforcement or punishment. Behavioral characteristics were defined as an individual’s skills and actions. Personal characteristics included one’s thoughts, motivations, perceptions, values, attitudes, emotions, beliefs, and goals. A change in one factor is reciprocated by a change in another factor.

**Models development.** Lastly, models were devised to illustrate the relationships between the entry-level BSN students, categorical themes and subcategories, and the three main influences of reciprocal determinism (Bandura, 1977, 1986). A variety of influences affected entry-level BSN students’ ability to achieve competent academic writing.

**Peer examination.** After the data analysis, an objective external peer examined the field notes, and determined if the findings were substantiated in the data, themes were appropriate for the data, and if researcher’s biases were controlled (Lodico et al., 2010). The external peer was a doctorally-prepared qualitative research expert who reviewed the raw transcribed data, initial open coding processes, analytical coding processes, and
identification of themes. The qualitative expert concurred with the results, understood the theme emergence, and verified accuracy of data interpretation.

**Detailed Data Analysis for the Quantitative Component**

A detailed analysis for the quantitative data follows by identifying the research subquestions and the corresponding null hypothesis. The results are reported. The statistical analysis procedure is explained. The resulting data is presented in visual format.

**Central Research Question**

The central research question was as follows: What is the writing self-efficacy of entry-level BSN students? A hypothesis was not generated for the central research question because it was worded as a descriptive survey question without a correlational component and was not testable.

The summary of results from the writing self-efficacy survey showed that the total mean self-efficacy score for entry-level BSN students was 67.209, with 80 being the highest possible score. Writing self-efficacy values for each of the eight writing skills to which students responded ranged from 7.989 to 8.626, with 10 being the highest possible score. Table 2 summarizes statistical analysis of individual and total writing self-efficacy scores.
An analysis was conducted for each of the eight writing self-efficacy items by entering data from the pre-coded writing self-efficacy survey into a spreadsheet with labeled columns for each of the eight self-efficacy items (SE1, SE2, SE3, SE4, SE5, SE6, SE7, and SE8). The self-efficacy scores for each of the eight writing skills were ranked from lowest score to highest score.

Table 3 identifies individual writing skills and mean self-efficacy values ranked in order from lowest to highest on a scale of 0-10, 10 being the highest self-efficacy value. The writing skills with the lower self-efficacy suggested that entry-level BSN students did not feel confident in their abilities to successfully complete the writing task. Higher self-efficacy indicated that entry-level BSN students did feel confident in their abilities to successfully complete the writing task.
Table 3. Ranking of Writing Skills with Corresponding Mean Self-Efficacy Score

<table>
<thead>
<tr>
<th>Writing skill</th>
<th>Self-efficacy mean score</th>
</tr>
</thead>
<tbody>
<tr>
<td>Correct punctuation</td>
<td>7.989</td>
</tr>
<tr>
<td>Correct compound/complex sentence structure</td>
<td>8.088</td>
</tr>
<tr>
<td>Correct spelling</td>
<td>8.231</td>
</tr>
<tr>
<td>Correctly use parts of speech (nouns, verbs, adjectives, adverbs)</td>
<td>8.264</td>
</tr>
<tr>
<td>Overall organization of paper, ideas in order, and correct use of transitions</td>
<td>8.495</td>
</tr>
<tr>
<td>Correct organized paragraph structure</td>
<td>8.571</td>
</tr>
<tr>
<td>Correct use of plurals, verb tenses, prefixes, and suffixes</td>
<td>8.626</td>
</tr>
<tr>
<td>Correct simple sentence structure</td>
<td>8.945</td>
</tr>
</tbody>
</table>

Secondly, the total self-efficacy score was determined by calculating each of the participants’ SE1 through SE8 responses. The sum of the participants’ survey scores was determined and divided by 91 (total number of participants) to find the mean total writing self-efficacy score of 67.209. The standard deviation, minimum total self-efficacy score, maximum total self-efficacy score, and the median total self-efficacy score were determined. Descriptive statistics were appropriate for answering the central research question about quantitatively determining self-efficacy of entry-level BSN students.

A histogram of the total writing self-efficacy values is shown in Figure 5. The total writing self-efficacy score distribution was not symmetric and did not form a normal bell-shaped curve. The distribution was skewed to the left, where many scores were near the mean of 67.209. Some participants scored very far from average on the low end.
This scoring pattern suggested that many participants gave themselves very high marks on most of the writing self-efficacy survey questions.

![Total Writing Self-Efficacy Scores](image)

**Figure 5.** Total Writing Self-Efficacy Scores.

Because this study’s data set may or may not have met the normal distribution requirement, both standard one-way ANOVA and the nonparametric Kruskal-Wallis test were used to test each null hypothesis. The Kruskal-Wallis test was used to verify that the apparent violation of normal distribution did not lead to inaccurate conclusions.

For each analysis, the following sections include a table with means, standard deviation, and medians of the writing self-efficacy values for each demographic group.
Box plots demonstrate the distribution of self-efficacy for each group. A combined ANOVA and a Kruskal-Wallis table are included for each section to verify accuracy. The Kruskal-Wallis did produce outcomes similar to the ANOVA outcomes. Kruskal-Wallis data is more accurate for this study since ANOVA can be compromised by non-normal data distribution.

**Null Hypothesis for Research Subquestion 1**

Research Subquestion 1 was as follows: Is there a relationship between entry-level BSN students’ writing self-efficacy and their age? The null hypothesis for Research Subquestion 1 was as follows: No statistically significant relationship exists between entry-level BSN students’ writing self-efficacy and their age. The analysis was accomplished by comparing the mean writing self-efficacy scores of the students in the different age groups. Data analysis results indicated that there was not a statistically significant difference in writing self-efficacy scores in this study’s sample of BSN nursing students based on age group.

As shown in Table 4, the mean writing self-efficacy in this study’s sample was approximately two points lower for the oldest age group than for the two younger age groups. To determine whether this was likely to be due to a true difference among age groups in the sample, or due only to random variability of the individuals chosen for the sample, the one-way ANOVA test and Kruskal-Wallis tests were performed.
Table 4. Total Writing Self-Efficacy by Age Group

<table>
<thead>
<tr>
<th>Age Group</th>
<th>Mean</th>
<th>SD</th>
<th>Median</th>
</tr>
</thead>
<tbody>
<tr>
<td>18–25</td>
<td>67.349</td>
<td>8.720</td>
<td>69.5</td>
</tr>
<tr>
<td>26–30</td>
<td>67.389</td>
<td>11.073</td>
<td>71.0</td>
</tr>
<tr>
<td>&gt; 31</td>
<td>65.429</td>
<td>11.688</td>
<td>60.0</td>
</tr>
</tbody>
</table>

Table 5 shows ANOVA and Kruskal-Wallis results for total writing self-efficacy by age. The analysis indicates that there was no statistically significant difference in writing self-efficacy in this study’s sample of entry-level BSN nursing students based on age group.

Table 5. ANOVA and Kruskal-Wallis Results of Total Writing Self-Efficacy by Age

<table>
<thead>
<tr>
<th>Source</th>
<th>df</th>
<th>Sum of squares</th>
<th>Mean square</th>
<th>ANOVA F-value</th>
<th>ANOVA p-value</th>
<th>Kruskal-Wallis H-statistic</th>
<th>Kruskal-Wallis p-value</th>
</tr>
</thead>
<tbody>
<tr>
<td>Age group</td>
<td>2</td>
<td>24.06</td>
<td>12.03</td>
<td>0.13</td>
<td>0.8740</td>
<td>0.3272</td>
<td>0.8491</td>
</tr>
<tr>
<td>Error</td>
<td>88</td>
<td>7846.98</td>
<td>89.17</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>*Corrected total</td>
<td>90</td>
<td>7871.03</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

Note: *Corrected total: Number of observations used in the model minus 1 to estimate true population mean of the self-efficacy scores. df = degrees of freedom related to the number of categories being compared in the sample; sample size minus 1. Sum of squares: measure of variability associated with each source. Mean square: standardization of variability. ANOVA F-value: standardized measure for ANOVA to compare variability associated with the group in the sample to the random variability among individuals, interpreted through the ANOVA p-value, analogous to the Kruskal-Wallis H-value. ANOVA p-value: $p = 0.05$, the probability that a difference in self-efficacy among the groups as large as that seen in this study would appear in this sample if there were no difference in self-efficacy based on this sample. Kruskal-Wallis H-statistic: standardized measure for Kruskal-Wallis, interpreted through the Kruskal-Wallis p-value in which large values lead to rejection of the null hypotheses. Kruskal-Wallis p-value: $p = 0.05$; probability value.
Figure 6 represents the box plot for total writing self-efficacy distribution by age. The two endpoints of the extended lines represent the minimum and maximum values of the writing self-efficacy scores in the sample. The two ends of the box represent the interquartile range that includes the middle 50% of observations. The line in the middle of the box represents the median total writing self-efficacy score for each group, and the diamond represents the mean self-efficacy score for each age group. The groups appear similar with respect to the means of the self-efficacy scores.

Figure 6. Total Writing Self-Efficacy Distribution by Age Group.
Null Hypothesis for Research Subquestion 2

Research Subquestion 2 was as follows: Is there a relationship between writing self-efficacy of entry-level BSN students and gender? The analysis was accomplished by comparing the mean writing self-efficacy scores of the subjects in the two different gender groups. The null hypothesis for Research Subquestion 2 was as follows: No statistically relationship exists between entry-level BSN students’ writing self-efficacy and gender. Data analysis results indicated that the difference between writing self-efficacy for males and females was statistically significantly. As shown in Table 6, the total mean writing self-efficacy for females in this study’s sample was approximately 5 points higher than for males.

Table 6. Summary of Total Writing Self-Efficacy by Gender

<table>
<thead>
<tr>
<th>Gender</th>
<th>Mean</th>
<th>SD</th>
<th>Median</th>
</tr>
</thead>
<tbody>
<tr>
<td>Female</td>
<td>68.135</td>
<td>9.001</td>
<td>71</td>
</tr>
<tr>
<td>Male</td>
<td>63.177</td>
<td>10.051</td>
<td>63</td>
</tr>
</tbody>
</table>

Table 7 shows ANOVA and Kruskal-Wallis results for total writing self-efficacy by gender. The analysis indicated that there was a statistically significant difference in writing self-efficacy in this study’s sample of entry-level BSN nursing students based on gender. To determine whether this was likely to be due to a true difference among age groups in the sample, or due only to random variability of the individuals chosen for the sample, the one-way ANOVA test and Kruskal-Wallis tests were performed.
Table 7. ANOVA and Kruskal Wallis Results for Total Writing Self-Efficacy by Gender

<table>
<thead>
<tr>
<th></th>
<th>df</th>
<th>Sum of squares</th>
<th>Mean square</th>
<th>ANOVA F-value</th>
<th>ANOVA p-value</th>
<th>Kruskal-Wallis H-statistic</th>
<th>Kruskal-Wallis p-value</th>
</tr>
</thead>
<tbody>
<tr>
<td>Gender</td>
<td>1</td>
<td>339.91</td>
<td>339.91</td>
<td>4.02</td>
<td>0.0481</td>
<td>3.9372</td>
<td>0.0472</td>
</tr>
<tr>
<td>Error</td>
<td>89</td>
<td>7531.12</td>
<td>84.62</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>*Corrected total</td>
<td>90</td>
<td>7871.03</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

*Note: *Corrected total: Number of observations used in the model minus 1 to estimate true population mean of the self-efficacy scores. df = degrees of freedom related to the number of categories being compared in the sample; sample size minus 1. Sum of squares: measure of variability associated with each source. Mean square: standardization of variability. ANOVA F-value: standardized measure for ANOVA to compare variability associated with the group in the sample to the random variability among individuals, interpreted through the ANOVA p-value, analogous to the Kruskal-Wallis H-value. ANOVA p-value: p = 0.05, the probability that a difference in self-efficacy among the groups as large as that seen in this study would appear in this sample if there were no difference in self-efficacy based on this sample. Kruskal-Wallis H-statistic: standardized measure for Kruskal-Wallis, interpreted through the Kruskal-Wallis p-value in which large values lead to rejection of the null hypotheses. Kruskal-Wallis p-value: p = 0.05; probability value.

Figure 7 demonstrates the box plot for total writing self-efficacy distribution by gender. The two endpoints of the extended lines represent the minimum and maximum values of the writing self-efficacy scores in the sample. The two ends of the box represent the interquartile range that includes the middle 50% of observations. The line in the middle of the box represents the median total writing self-efficacy score for each group, and the diamond represents the mean self-efficacy score for each gender group.
Null Hypothesis for Research Subquestion 3

Research Subquestion 3 was as follows: Is there a relationship between writing self-efficacy of entry-level BSN students and nursing-student status? The null hypothesis for Research Subquestion 3 was as follows: No statistically significant relationship exists between entry-level BSN students’ writing self-efficacy and student status. Only one subject out of the 91 participants reported part-time nursing student status. Therefore, analysis between writing self-efficacy and nursing student status could not be determined based on this study’s data set.
**Null Hypothesis for Research Subquestion 4**

Research Subquestion 4 was as follows: Is there a relationship between writing self-efficacy of entry-level BSN students and employment status? The null hypothesis for Research Subquestion 4 was as follows: No statistically significant relationship exists between entry-level BSN students’ writing self-efficacy and their employment status. Data analysis results indicated that the difference in writing self-efficacy by employment status was not statistically significant. Summary of total writing self-efficacy by employment status is shown in Table 8.

<table>
<thead>
<tr>
<th>Employment Status</th>
<th>Mean</th>
<th>SD</th>
<th>Median</th>
</tr>
</thead>
<tbody>
<tr>
<td>Full-time</td>
<td>59.833</td>
<td>15.342</td>
<td>59.5</td>
</tr>
<tr>
<td>Part-time</td>
<td>68.057</td>
<td>9.683</td>
<td>71.0</td>
</tr>
<tr>
<td>Not employed</td>
<td>67.500</td>
<td>8.019</td>
<td>70.0</td>
</tr>
</tbody>
</table>

Table 9 shows that the difference in mean writing self-efficacy scores by employment status was not statistically significant. To determine whether the result was likely to be due to a true difference among age groups in the sample, or due only to random variability of the individuals chosen for the sample, the one-way ANOVA test and Kruskal-Wallis tests were performed.
Table 9. ANOVA and Kruskal-Wallis Results of Total Writing Self-Efficacy by Employment Status

<table>
<thead>
<tr>
<th></th>
<th>df</th>
<th>Sum of squares</th>
<th>Mean square</th>
<th>ANOVA F-value</th>
<th>ANOVA p-value</th>
<th>Kruskal-Wallis H-statistic</th>
<th>Kruskal-Wallis p-value</th>
</tr>
</thead>
<tbody>
<tr>
<td>Employment</td>
<td>2</td>
<td>355.81</td>
<td>177.91</td>
<td>2.08</td>
<td>0.1306</td>
<td>1.6174</td>
<td>0.4454</td>
</tr>
<tr>
<td>Error</td>
<td>88</td>
<td>7515.22</td>
<td>85.40</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>*Corrected total</td>
<td>90</td>
<td>7871.03</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

Note: *Corrected total: Number of observations used in the model minus 1 to estimate true population mean of the self-efficacy scores. df = degrees of freedom related to the number of categories being compared in the sample; sample size minus 1. Sum of squares: measure of variability associated with each source. Mean square: standardization of variability. ANOVA F-value: standardized measure for ANOVA to compare variability associated with the group in the sample to the random variability among individuals, interpreted through the ANOVA p-value, analogous to the Kruskal-Wallis H-value. ANOVA p-value: p = 0.05, the probability that a difference in self-efficacy among the groups as large as that seen in this study would appear in this sample if there were no difference in self-efficacy based on this sample. Kruskal-Wallis H-statistic: standardized measure for Kruskal-Wallis, interpreted through the Kruskal-Wallis p-value in which large values lead to rejection of the null hypotheses. Kruskal-Wallis p-value: p = 0.05; probability value.

Figure 8 shows the box plot for total writing self-efficacy distribution by employment status. The two endpoints of the extended lines represent the minimum and maximum values of the writing self-efficacy scores in the sample. The two ends of the box represent the interquartile range that includes the middle 50% of observations. The line in the middle of the box represents the median total writing self-efficacy score for each group, and the diamond represents the mean self-efficacy score for each age group.
Null Hypothesis for Research Subquestion 5

Research Subquestion 5 was as follows: Is there a relationship between writing self-efficacy of entry-level BSN students and primary care-provider status. The null hypothesis for Research Subquestion 5 was as follows: No statistically significant relationship exists between entry-level BSN students’ writing self-efficacy and primary care-provider status. Data analysis results indicated that the difference in mean writing self-efficacy by care-provider status was not statistically significant.
The results showed that entry-level BSN students who were also primary care providers had a higher total mean self-efficacy and median compared to those who were not primary care providers. Table 10 shows the difference in mean writing self-efficacy by care-provider status.

Table 10. Total Writing Self-Efficacy by Care-Provider Status

<table>
<thead>
<tr>
<th>Care-Provider Status</th>
<th>Mean</th>
<th>SD</th>
<th>Median</th>
</tr>
</thead>
<tbody>
<tr>
<td>No</td>
<td>66.772</td>
<td>9.000</td>
<td>69.0</td>
</tr>
<tr>
<td>Yes</td>
<td>70.083</td>
<td>11.437</td>
<td>72.5</td>
</tr>
</tbody>
</table>

Table 11 shows the difference in mean writing scores by care-provider status and indicated that there was no statistical significance. To determine whether the result was likely to be due to a true difference among age groups in the sample, or due only to random variability of the individuals chosen for the sample, the one-way ANOVA test and Kruskal-Wallis tests were performed.

Table 11. ANOVA and Kruskal-Wallis Results of Total Writing Self-Efficacy by Care-Provider Status

<table>
<thead>
<tr>
<th></th>
<th>df</th>
<th>Sum of squares</th>
<th>Mean square</th>
<th>ANOVA F-value</th>
<th>ANOVA p-value</th>
<th>Kruskal-Wallis H-statistic</th>
<th>Kruskal-Wallis p-value</th>
</tr>
</thead>
<tbody>
<tr>
<td>Care provider</td>
<td>1</td>
<td>114.22</td>
<td>114.22</td>
<td>1.31</td>
<td>0.2554</td>
<td>2.3882</td>
<td>0.1223</td>
</tr>
<tr>
<td>Error</td>
<td>89</td>
<td>7756.82</td>
<td>87.16</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>*Corrected total</td>
<td>90</td>
<td>7871.03</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>
Note: *Corrected total: Number of observations used in the model minus 1 to estimate true population mean of the self-efficacy scores. \( df \) = degrees of freedom related to the number of categories being compared in the sample; sample size minus 1. Sum of squares: measure of variability associated with each source. Mean square: standardization of variability. ANOVA \( F \)-value: standardized measure for ANOVA to compare variability associated with the group in the sample to the random variability among individuals, interpreted through the ANOVA \( p \)-value, analogous to the Kruskal-Wallis \( H \)-value. ANOVA \( p \)-value: \( p = 0.05 \), the probability that a difference in self-efficacy among the groups as large as that seen in this study would appear in this sample if there were no difference in self-efficacy based on this sample. Kruskal-Wallis \( H \)-statistic: standardized measure for Kruskal-Wallis, interpreted through the Kruskal-Wallis \( p \)-value in which large values lead to rejection of the null hypotheses. Kruskal-Wallis \( p \)-value: \( p = 0.05 \); probability value.

Figure 9 demonstrates the box plot for total writing self-efficacy distribution by care-provider status. The two endpoints of the extended lines represent the minimum and maximum values of the writing self-efficacy scores in the sample. The two ends of the box represent the interquartile range that includes the middle 50% of observations. The line in the middle of the box represents the median total writing self-efficacy score for each group, and the diamond represents the mean self-efficacy score for each age group.
Null Hypothesis for Research Subquestion 6

Research Subquestion 6 was as follows: Is there a relationship between entry-level BSN students and support status. The null hypothesis for Research Subquestion 6 was as follows: No statistically significant relationship exists between entry-level BSN students’ writing self-efficacy and their support-system status. Only one subject reported no access to a support system. Therefore, statistical significance between writing self-efficacy and support-system status could not be determined based on this study’s data set.
Null Hypothesis for Research Subquestion 7

Research Subquestion 7 was as follows: Is there a relationship between entry-level BSN students writing self-efficacy and completion of a prior college-level writing course? The null hypothesis for Research Subquestion 7 was as follows: No statistically significant relationship exists between entry-level BSN students’ writing self-efficacy and completion of a prior college-level writing course. Data analysis results indicated that the difference in mean writing self-efficacy by prior writing course was not statistically significant.

Table 12 shows that entry-level BSN students in this study who took a prior writing course less than a year prior to the study scored a higher writing self-efficacy mean and median than those who took a prior writing course more than a year ago.

Table 12. Total Writing Self-Efficacy by Prior Writing Course

<table>
<thead>
<tr>
<th>Prior Writing Course</th>
<th>Mean</th>
<th>SD</th>
<th>Median</th>
</tr>
</thead>
<tbody>
<tr>
<td>Less than a year ago</td>
<td>69.133</td>
<td>10.357</td>
<td>71.0</td>
</tr>
<tr>
<td>More than a year ago</td>
<td>66.829</td>
<td>9.167</td>
<td>69.5</td>
</tr>
</tbody>
</table>

Table 13 shows that the difference in mean writing self-efficacy scores by time since the prior writing course was not statistically significant. To determine whether the result was likely to be due to a true difference among age groups in the sample, or due only to random variability of the individuals chosen for the sample, the one-way ANOVA test and Kruskal-Wallis tests were performed.
### Table 13. ANOVA and Kruskal-Wallis Results of Total Writing Self-Efficacy by Prior Writing Course

<table>
<thead>
<tr>
<th></th>
<th>df</th>
<th>Sum of squares</th>
<th>Mean square</th>
<th>ANOVA F-value</th>
<th>ANOVA p-value</th>
<th>Kruskal-Wallis H-statistic</th>
<th>Kruskal-Wallis p-value</th>
</tr>
</thead>
<tbody>
<tr>
<td>Prior writing course</td>
<td>1</td>
<td>66.52</td>
<td>66.52</td>
<td>0.76</td>
<td>0.3861</td>
<td>0.9615</td>
<td>0.3268</td>
</tr>
<tr>
<td>Error</td>
<td>89</td>
<td>7804.51</td>
<td>87.69</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>*Corrected total</td>
<td>90</td>
<td>7871.03</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

*Note:* *Corrected total: Number of observations used in the model minus 1 to estimate true population mean of the self-efficacy scores. df = degrees of freedom related to the number of categories being compared in the sample; sample size minus 1. Sum of squares: measure of variability associated with each source. Mean square: standardization of variability. ANOVA F-value: standardized measure for ANOVA to compare variability associated with the group in the sample to the random variability among individuals, interpreted through the ANOVA p-value, analogous to the Kruskal-Wallis H-value. ANOVA p-value: p = 0.05, the probability that a difference in self-efficacy among the groups as large as that seen in this study would appear in this sample if there were no difference in self-efficacy based on this sample. Kruskal-Wallis H-statistic: standardized measure for Kruskal-Wallis, interpreted through the Kruskal-Wallis p-value in which large values lead to rejection of the null hypotheses. Kruskal-Wallis p-value: p = 0.05; probability value.

Figure 10 box plot shows total writing self-efficacy distribution by prior writing course. The two endpoints of the extended lines represent the minimum and maximum values of the writing self-efficacy scores in the sample. The two ends of the box represent the interquartile range that includes the middle 50% of observations. The line in the middle of the box represents the median total writing self-efficacy score for each group, and the diamond represents the mean writing self-efficacy score for each age group.
Null Hypothesis for Research Subquestion 8

Research Subquestion 8 was as follows: Is there a relationship between entry-level BSN students’ writing self-efficacy and first-speaking language? The null hypothesis for Research Subquestion 8 was as follows: No statistically significant relationship exists between entry-level BSN students’ writing self-efficacy and first-speaking language. Data analysis results indicated that the difference in writing self-efficacy by first-speaking language was not statistically significant.
Table 14 shows that entry-level BSN students in this study whose first-speaking language was English scored a higher self-efficacy mean and median than those whose first-speaking language was not English.

Table 14. Total Writing Self-Efficacy by First-Speaking Language

<table>
<thead>
<tr>
<th>First-Speaking Language</th>
<th>Mean</th>
<th>SD</th>
<th>Median</th>
</tr>
</thead>
<tbody>
<tr>
<td>English</td>
<td>67.530</td>
<td>9.323</td>
<td>70.0</td>
</tr>
<tr>
<td>Not English</td>
<td>63.875</td>
<td>9.613</td>
<td>61.5</td>
</tr>
</tbody>
</table>

Table 15 shows that the difference in mean writing self-efficacy scores by first-speaking language was not statistically significant. To determine whether the result was likely to be due to a true difference among age groups in the sample, or due only to random variability of the individuals chosen for the sample, the one-way ANOVA test and Kruskal-Wallis tests were performed.

Table 15. ANOVA and Kruskal-Wallis Results of Total Writing Self-Efficacy by First-Speaking Language

<table>
<thead>
<tr>
<th></th>
<th>df</th>
<th>Sum of squares</th>
<th>Mean square</th>
<th>ANOVA F-value</th>
<th>ANOVA p-value</th>
<th>Kruskal-Wallis H-statistic</th>
<th>Kruskal-Wallis p-value</th>
</tr>
</thead>
<tbody>
<tr>
<td>Language</td>
<td>1</td>
<td>97.48</td>
<td>97.48</td>
<td>1.12</td>
<td>0.2936</td>
<td>1.5269</td>
<td>0.2213</td>
</tr>
<tr>
<td>Error</td>
<td>89</td>
<td>7773.55</td>
<td>87.34</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>*Corrected total</td>
<td>90</td>
<td>7871.03</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

Note: *Corrected total: Number of observations used in the model minus 1 to estimate true population mean of the self-efficacy scores. df = degrees of freedom related to the number of categories being compared in the sample; sample size minus 1. Sum of squares: measure of variability associated with each source. Mean square: standardization of variability. ANOVA F-value: standardized measure for ANOVA to compare variability associated with the group in the sample to the random variability among individuals, interpreted through the ANOVA p-value,
analogous to the Kruskal-Wallis $H$-value. ANOVA $p$-value: $p = 0.05$, the probability that a difference in self-efficacy among the groups as large as that seen in this study would appear in this sample if there were no difference in self-efficacy based on this sample. Kruskal-Wallis $H$-statistic: standardized measure for Kruskal-Wallis, interpreted through the Kruskal-Wallis $p$-value in which large values lead to rejection of the null hypotheses. Kruskal-Wallis $p$-value: $p = 0.05$; probability value.

Figure 11 shows the box plot for total writing self-efficacy distribution by first speaking language. The two endpoints of the extended lines represent the minimum and maximum values of the writing self-efficacy scores in the sample. The two ends of the box represent the interquartile range that includes the middle 50% of observations. The line in the middle of the box represents the median total writing self-efficacy score for each group, and the diamond represents the mean self-efficacy score for each language group.
In summary, two of the eight research subquestions concerning student status and support-system status could not be addressed because of lack of participant representation in this study’s data set. The hypothesis concerning gender did demonstrate a statistically significant difference in the sample: females tend to have a higher mean writing self-efficacy score than males. A significance level of \( p = 0.05 \) (Polit & Beck, 2008) was chosen for this study, which implied there was a 5% margin of error that could have been made regarding difference in writing self-efficacy across the eight demographic variables, based on random variation in the individuals who were chosen for the study. Eight tests were performed, each one with a 5% margin of error.
Summary of Detailed Findings for the Qualitative Component

Three focus groups included 17 participants who took part in the qualitative data collection process. All of the participants were retained. During each focus group interview, each of the participants voluntarily answered the seven interview protocol inquiries that were asked in the same order for each focus group. Data from the interview protocol answered the main qualitative research questions and the qualitative subquestion. The main qualitative research question was as follows: What has hindered or facilitated past writing experiences of entry-level BSN students? The qualitative subquestion was as follows: What events, resources, issues, and relationships do entry-level BSN students perceive to be significant in their nursing education writing experiences?

The basic qualitative design using conventional content analysis was used to analyze the interview data. The detailed summary identifies detailed content, comments, and phrases for each of the interview inquiries in order to provide a detailed perspective. Categories and themes were identified for the data analysis of each of the interview protocol questions.

Interview Protocol Inquiry 1

The first interview protocol inquiry was as follows: Think about your learning experiences in nursing education and the formal academic papers (not reflective writing assignments) that you have been required to write for a course grade. Tell me about your general self-confidence with writing and your ability to meet grading criteria guidelines established for the formal academic papers.
Some participants expressed that they were highly self-confident with their writing abilities. Comments that were made included the following statements: “I felt self-confident in my abilities to write.” “I was able to come up with ideas and make them flow really easily.” “I am able to express my thoughts.” “Writing has always come easier for me than speaking.” “I am really confident with my writing.” Most expressed that they were moderately self-confident with their writing abilities. Comments about moderately high self-confidence included, “I felt pretty good about the paper,” and “My self-confidence was fine.” Some expressed low self-confidence with their writing abilities. Comments about poor self-confidence included, “I have problems with writing,” and “My self-confidence with writing was probably not good at all.” In general, most of the participants explained that they were at least moderately self-confident with their writing abilities.

Figure 12 illustrates the percentage of those who verbally expressed varying degrees of writing self-confidence, ranging from highly self-confident to poorly self-confident.
The participants commented on a variety of resources that facilitated and hindered achievement of competent academic writing. *Helpful resources* were defined as the facilitators that helped students meet grading criteria and achieve competent academic writing. *Non-helpful resources* were defined as the hindrances that did not help students meet grading criteria and achieve competent academic writing. Table 16 summarizes the resources that facilitated and hindered academic writing experiences for the subjects in this study. The resources are grouped according to category and theme. The number in parentheses is the approximate number of interviewed participants out of a total of 17 who identified the factor as significant.
Table 16. Influences for Meeting Grading Criteria for Competent Academic Writing

<table>
<thead>
<tr>
<th>Facilitators</th>
<th>Hindrances</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Category: Education and Educational Strategies</strong></td>
<td></td>
</tr>
<tr>
<td>Theme: Environmental Factor</td>
<td></td>
</tr>
<tr>
<td>Past writing experiences and classes in junior high, high school, and college (17)</td>
<td>College-level writing courses that did not focus on writing skills education or experience (7)</td>
</tr>
<tr>
<td>Nursing education professors who were willing to help with writing skills and APA formatting (6)</td>
<td>Minimal education with APA formatting in high school and college (17)</td>
</tr>
<tr>
<td>Detailed grading criteria guidelines established by the nursing education professors (7)</td>
<td>Formatting requirements: “APA formatting was very difficult to do.” (17)</td>
</tr>
<tr>
<td>Scaffolded writing assignments (3)</td>
<td></td>
</tr>
<tr>
<td>Sample papers (5)</td>
<td></td>
</tr>
<tr>
<td><strong>Category: Scholarly Assets</strong></td>
<td></td>
</tr>
<tr>
<td>Theme: Environmental Factor</td>
<td></td>
</tr>
<tr>
<td>College textbooks, APA manual, and other scholarly resources including access to websites (EBSCOhost, BibMe.com, Purdue Owl) (15)</td>
<td></td>
</tr>
<tr>
<td>College-related resources: library, librarian, writing center (15)</td>
<td></td>
</tr>
<tr>
<td><strong>Category: Time Management</strong></td>
<td></td>
</tr>
<tr>
<td>Theme: Behavioral</td>
<td></td>
</tr>
<tr>
<td>Personal planner (8)</td>
<td>Poor time management (17)</td>
</tr>
<tr>
<td>Summer courses to lighten the fall course load (3)</td>
<td>Procrastination (17)</td>
</tr>
<tr>
<td>Peer’s paper to review (5)</td>
<td></td>
</tr>
<tr>
<td>Efficient use of time by using past writing experiences and applying those experiences to the current writing assignment (6)</td>
<td></td>
</tr>
<tr>
<td><strong>Category: Self</strong></td>
<td></td>
</tr>
<tr>
<td>Theme: Personal</td>
<td></td>
</tr>
<tr>
<td>Self-reliance on inherent skills (3)</td>
<td></td>
</tr>
<tr>
<td>Ability to do own research and generate ideas (6)</td>
<td></td>
</tr>
<tr>
<td>Positive attitude, persistence, motivation, personal goals (8)</td>
<td></td>
</tr>
</tbody>
</table>
The resources were categorized and then divided into three main themes that were consistent with the three factors of reciprocal determinism inherent in the self-efficacy theory: environment factors, personal characteristics, and behavioral factors (Bandura, 1977, 1986; Lang, 2005; Pajares, 2002). Each of the three factors encompassed a distinct subset of characteristics. The environment was defined as one’s social and physical surroundings that may provide reinforcement or punishment. Behavior is defined as one’s skills and actions. Personal characteristics include thoughts, motivations, perceptions, values, attitudes, emotions, beliefs, and goals. The three factors are inherent in everyone’s well-being and affect levels of self-efficacy (Bandura, 1977, 1986; Lang, 2005; Pajares, 2002).

**Interview Protocol Inquiry 2**

The second interview protocol question set was as follows: Do you remember submitting a formal academic paper where you did well? If so, what do you believe is the main reason for doing well on the paper? What resources (academic resources/technological resources/friends/family) did you use to complete the paper? Why do you think the resources helped you do well on the paper?

A majority of participants remembered submitting a formal academic paper in which they did well. Participants defined ‘did well’ as having received a good grade and
passed the assignment. The reasons for doing well related to the resources that were used to complete the assignment. A variety of resources that subjects used provided academic, technological, and emotional support to help them do well on the paper. Categories were assigned to the resources. Table 17 provides a summary of participants’ responses, which are organized by categories and themes. The number in parentheses is the approximate number of interviewed participants out of a total of 17 who identified the factor as significant.

Table 17. Stated Academic Writing Resources Used and Reasons Resources Were Helpful

<table>
<thead>
<tr>
<th>Resource</th>
<th>Reason</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Category: Technology</strong>&lt;br&gt;<strong>Theme: Environmental</strong>&lt;br&gt;Websites, including EBSCOhost, BibMe.com, Purdue Owl (17)</td>
<td>Citation makers made it easy to APA format references for the reference page.&lt;br&gt;Purdue Owl was recommended by the nurse educator and was considered a reliable Internet resource for APA formatting.&lt;br&gt;“Purdue Owl was a reliable resource.”</td>
</tr>
</tbody>
</table>
| **Category: Friends and Family**<br>**Theme: Environmental**<br>Friends, peers, family, parents, spouse (16) | Willingness to make comments and criticism<br>Willingness to check grammar, wording, sentence structure, flow of thoughts, understandability, and punctuation.<br>Willingness to critique: “Criticism of your paper helped a lot.”
Willingness to review: “Helpful to have an extra set of eyes look over [the paper]”<br>Willingness to help with APA formatting: Spouse was familiar with APA formatting and reading of research articles. |
<table>
<thead>
<tr>
<th>Category: Educators and Teaching Strategies</th>
<th>Theme: Environmental</th>
</tr>
</thead>
<tbody>
<tr>
<td>Nurse educators who were willing to provide student assistance (6)</td>
<td>Assisted with helping student narrow down topics</td>
</tr>
<tr>
<td>Portfolio assignment (1)</td>
<td>Assisted students with identifying key terms for article searches</td>
</tr>
<tr>
<td>Sample papers (15)</td>
<td>Provided proofreading with immediate feedback</td>
</tr>
</tbody>
</table>

"The teacher looked over my paper and made comments on structure."

"Utilizing the professor as a resource, I was able to kind of talk through the main points."

Provided phone and e-mail accessibility.

Was consistently correct with APA information, which increased student’s self-confidence.

Double-checked thesis statement and flow of thought.

"Teacher helped me bring [my paper] back to the thesis and simplify some of the topics."

Instructor was intelligent and knowledgeable with APA formatting and writing.

"I felt confident based on what [the instructor] taught me."

Provided sample papers and reserved books in the library

Detailed grading rubric

"Obey the rubric and you will pass the assignment."

Demonstrated APA formatting in addition to offering verbal explanations

Educator knew what had helped her as a student, and she informed her students of those same knowledge/skills/resources
Table 17. Stated Academic Writing Resources Used and Reasons Resources Were Helpful (continued)

<table>
<thead>
<tr>
<th>Category: Educators and Teaching Strategies</th>
<th>Theme: Environmental (continued)</th>
</tr>
</thead>
<tbody>
<tr>
<td>Scaffolding of major writing assignments so that small sections of the paper were due at incremental due dates.</td>
<td></td>
</tr>
<tr>
<td>“We worked on the portfolio all semester--small portions [of the assignment] that we tweaked.”</td>
<td></td>
</tr>
<tr>
<td>Broke the paper down into smaller assignments so that the paper did not seem like a huge project due all at once</td>
<td></td>
</tr>
<tr>
<td>Provided sample papers and outlines to help with APA-formatted headings, margins, and paragraph structure</td>
<td></td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Category: Self</th>
<th>Theme: Behavioral</th>
</tr>
</thead>
<tbody>
<tr>
<td>Student as self (9)</td>
<td>Made revisions by proofreading own paper</td>
</tr>
<tr>
<td>Read paper out loud to reconsider flow of thought, wording, and organization of ideas</td>
<td></td>
</tr>
<tr>
<td>“I read the paper out loud to make sure it sounded OK.”</td>
<td></td>
</tr>
<tr>
<td>Had many ideas about content needed for paper</td>
<td></td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Category: Scholarly Assets</th>
<th>Theme: Environmental</th>
</tr>
</thead>
<tbody>
<tr>
<td>Scholarly resources (15)</td>
<td>Scholarly resources were needed to support personal ideas used in the paper.</td>
</tr>
<tr>
<td>Writing Center (15)</td>
<td></td>
</tr>
<tr>
<td>Library/librarians (15)</td>
<td></td>
</tr>
</tbody>
</table>
The main categories about helpful resources included technology, friends and family, educators and teaching strategies, personal/self, scholarly assets, time management, and behavioral/attitude. The categories were further allocated into three major themes that were supported by the three factors of reciprocal determinism: environment factors, personal characteristics, and behavioral factors (Bandura, 1997; Lang, 2005; Pajares, 2002).

**Interview Protocol Inquiry 3**

The third interview protocol question set was as follows: Do you remember submitting a formal academic paper where you did not do well? What do you believe is the main reason for not doing well on the paper? What interfered? What resources (academic resources/technological resources/friends/family) did you use to complete the paper? If you used resources, why do you believe that you still did not do well on the paper?

Participants defined ‘did not do well’ as having received a low score on a writing assignment, or a personal subjective idea of poor quality of work. A majority of participants recalled submitting a formal academic paper in which they did not do well. The participants elaborated on reasons why they did not do well and interferences that inhibited them from not doing well on the formal academic paper.

Even though participants may have not done well on an academic paper, they still reported a variety of resources that were used to complete the formal academic paper, including environmental and personal resources, websites (Purdue Owl, BibMe.com, EBSCOhost), instructor who encouraged student questions by e-mail and cell phone, friends and peers who provided assistance and support, and scholarly assets, including the
APA manual and other course-related textbook. Table 18 provides a summary of participants’ responses. The number in parentheses is the approximate number of interviewed participants out of a total of 17 who identified the factor as significant.

Table 18. Subjects’ Reasons for Not Doing Well on a Formal Academic Paper

<table>
<thead>
<tr>
<th>Category: Educators and Teaching Strategies</th>
<th>Theme: Environmental</th>
</tr>
</thead>
<tbody>
<tr>
<td>&quot;What I wrote was not what the teacher wanted.&quot; (12)</td>
<td></td>
</tr>
<tr>
<td>Instructions/grading rubric/outline for the academic paper were not clear or absent. (9)</td>
<td></td>
</tr>
<tr>
<td>Instructors held different viewpoints about how to teach APA (9)</td>
<td></td>
</tr>
<tr>
<td>Inconsistencies between instructors regarding correct way to do APA formatting (9)</td>
<td></td>
</tr>
<tr>
<td>Untimely feedback from instructor because student did not have much turn-around time to learn from APA errors from first writing assignment and apply format to next assignment (5)</td>
<td></td>
</tr>
<tr>
<td>Excessive APA/writing feedback from nursing instructor led to a student's decreased self-confidence, anticipation of doing poorly on next writing assignment (1)</td>
<td></td>
</tr>
<tr>
<td>Had decreased education on APA formatting (17)</td>
<td></td>
</tr>
<tr>
<td>Lacked pertinent high school education on English and writing skills (15)</td>
<td></td>
</tr>
<tr>
<td>Some nursing instructors unwilling to help students with APA and writing (9)</td>
<td></td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Category: Scholarly Assets</th>
<th>Theme: Environmental</th>
</tr>
</thead>
<tbody>
<tr>
<td>APA manual helpful at times but was also complicated to understand (9)</td>
<td></td>
</tr>
<tr>
<td>Other APA resources not consistent with the APA manual (5)</td>
<td></td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Category: Attitude</th>
<th>Theme: Personal</th>
</tr>
</thead>
<tbody>
<tr>
<td>Lack of understanding why APA formatting is important for professional nursing practice (17)</td>
<td></td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Category: Time Management</th>
<th>Theme: Behavioral</th>
</tr>
</thead>
<tbody>
<tr>
<td>“Did paper 20 minutes before the assignment was due” (1)</td>
<td></td>
</tr>
<tr>
<td>Poor time management during finals week, a very stressful week with procrastination (1)</td>
<td></td>
</tr>
<tr>
<td>Prioritization of paper and all of the other homework, exams, and finals that were due about the same time (17)</td>
<td></td>
</tr>
<tr>
<td>Hectic life in general—kids, job, school, nontraditional student (15)</td>
<td></td>
</tr>
</tbody>
</table>
Reasons for not doing well on an academic paper, which are equivalent to hindrances to achieving competent academic writing, included the categories of educators and teaching strategies, scholarly assets, attitudes, time management, interests and enthusiasm, and writing abilities. The categories were further allocated into three major themes that were consistent with the three factors of reciprocal determinism that were inherent in the self-efficacy theory: environment factors, personal characteristics, and behavioral factors (Bandura, 1977, 1986; Lang, 2005; Pajares, 2002).

<table>
<thead>
<tr>
<th>Table 18. Subjects’ Reasons for Not Doing Well on a Formal Academic Paper (continued)</th>
</tr>
</thead>
<tbody>
<tr>
<td>Category: Interest and Enthusiasm</td>
</tr>
<tr>
<td>Theme: Personal</td>
</tr>
<tr>
<td>&quot;I forgot to read the instructions.&quot; (1)</td>
</tr>
<tr>
<td>Had decreased knowledge on topic or was not familiar with the topic assigned for the paper (13)</td>
</tr>
<tr>
<td>Did not like the topic and was not motivated to write (10)</td>
</tr>
<tr>
<td>Did not care for the paper and took no care in writing the paper—&quot;word vomit&quot; (1)</td>
</tr>
<tr>
<td>Category: Writing Abilities</td>
</tr>
<tr>
<td>Theme: Behavioral</td>
</tr>
<tr>
<td>&quot;I didn’t do enough revisions.&quot; (4)</td>
</tr>
<tr>
<td>&quot;I did too many revisions.&quot; (4)</td>
</tr>
<tr>
<td>&quot;I didn’t have enough resources.&quot; (5)</td>
</tr>
<tr>
<td>&quot;It was hard to tie everything together.&quot; (10)</td>
</tr>
<tr>
<td>Hard to organize thoughts and paragraph flow (11)</td>
</tr>
<tr>
<td>Hard to get used to scholarly writing language instead of talking/texting language (3)</td>
</tr>
<tr>
<td>Difficulty with paraphrasing and using direct quotes (17)</td>
</tr>
</tbody>
</table>

Reasons for not doing well on an academic paper, which are equivalent to hindrances to achieving competent academic writing, included the categories of educators and teaching strategies, scholarly assets, attitudes, time management, interests and enthusiasm, and writing abilities. The categories were further allocated into three major themes that were consistent with the three factors of reciprocal determinism that were inherent in the self-efficacy theory: environment factors, personal characteristics, and behavioral factors (Bandura, 1977, 1986; Lang, 2005; Pajares, 2002).
**Interview Protocol Inquiry 4**

The fourth interview protocol question set was as follows: Do you remember submitting a formal academic paper on time by the due date? If so, what do you believe was the main reason for submitting the paper on time? What resources (academic resources/technological resources/friends/family) did you use to complete the paper? Why do you think the resources helped you submit the paper on time? A majority of participants remembered submitting a formal academic paper on time by the due date. The reasons for the timely submission related to the resources that were used to complete the assignment. A variety of resources was used that provided academic, technological, and emotional support to help the participants submit the paper on time by the due date. Table 19 provides a summary of participants’ responses. The number in parentheses is the approximate number of interviewed participants out of a total of 17 who identified the factor as significant.
<table>
<thead>
<tr>
<th>Category: Time Management</th>
<th>Theme: Behavioral</th>
</tr>
</thead>
<tbody>
<tr>
<td>Goal was to “stay on task.” (15)</td>
<td></td>
</tr>
<tr>
<td>“Obsessed about time” (6)</td>
<td></td>
</tr>
<tr>
<td>Goal was to start early and stay focused to complete the assignment successfully and on time (7)</td>
<td></td>
</tr>
<tr>
<td>Be responsible with time management (7)</td>
<td></td>
</tr>
<tr>
<td>Read someone else’s paper (7)</td>
<td></td>
</tr>
<tr>
<td>Devised a personal planner and/or a computerized planner (10)</td>
<td></td>
</tr>
<tr>
<td>Exhibited self-confidence due to past writing experiences (6)</td>
<td></td>
</tr>
<tr>
<td>Made APA template to save time with formatting (1)</td>
<td></td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Category: Values</th>
<th>Theme: Personal</th>
</tr>
</thead>
<tbody>
<tr>
<td>“Always submit something by the due date, good or bad (1)</td>
<td></td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Category: Financial</th>
<th>Theme: Environmental</th>
</tr>
</thead>
<tbody>
<tr>
<td>“Good grades mean money.” (3)</td>
<td></td>
</tr>
<tr>
<td>Financial responsibility of paying for college lies with the students, so the student is more serious about getting good grades, which may help with getting a good job (7)</td>
<td></td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Category: Educators and Teaching Strategies</th>
<th>Theme: Environment</th>
</tr>
</thead>
<tbody>
<tr>
<td>Instructor developed a course calendar with assignment due dates. (3)</td>
<td></td>
</tr>
<tr>
<td>Instructor divided large academic writing assignment into smaller assignments (Scaffolded assignment) so the large assignment did not seem so daunting and stressful. (4)</td>
<td></td>
</tr>
</tbody>
</table>
Table 20 summarizes the resources that participants used to submit a formal academic paper on time. The number in parentheses is the approximate number of interviewed participants out of a total of 17 who identified the factor as significant.

Table 20. Stated Resources for Submitting a Formal Academic Paper on Time

<table>
<thead>
<tr>
<th>Resource</th>
<th>Reason Helpful</th>
</tr>
</thead>
</table>
| **Category: Friends and Family**  
**Theme: Environmental** |
| Parents (9) | Instilled values about timeliness and success  
Cared for children  
Proofread |
| Spouse (8) |  |
| **Category: Technology**  
**Theme: Environment** |
| Personal computer (17) | Enabled global internet searches  
Could keep multiple tabs open simultaneously |
| YouTube (17) | Easy to access Internet resources  
Could watch videos, video resources  
Saw lectures about APA formatting |
| Web sites such as BibMe.com, Google, Purdue Owl, EBSCOhost citation (17) | Easy to locate online journals  
Easy to document APA reference  
Narrowed searches by using key terms |
| **Category: Scholarly Assets**  
**Theme: Environmental** |
| Professor (9) | Proofread paper, gave helpful feedback |
| Library/library assistance (17) | Located online scholarly articles |
| APA Manual (17) | Referenced for formatting, sentence structure, citation of resources |

In summary, the interviewed participants reported several reasons for submitting a formal academic paper on time, as well as the resources used to complete the assignment.
Reasons why the resources were helpful were also documented. Categories were identified and allocated into three major themes that were consistent with the three factors of reciprocal determinism inherent in the self-efficacy theory: environment factors, personal characteristics, and behavioral factors (Bandura, 1997; Lang, 2005; Pajares, 2002).

**Interview Protocol Inquiry 5**

The fifth interview protocol question set was as follows: Do you remember submitting a formal academic paper past the due date? What do you believe was the main reason for submitting the paper past the due date? What interfered? What resources (academic resources/technological resources/friends/family) did you use to complete the paper? If you used resources, why do you believe you still did not submit the paper on time?

A majority of participants remembered submitting a formal academic paper past the due date. Reasons for the untimely submission related to environmental, personal, and behavioral circumstances and were considered hindrances that entry-level BSN students encountered while trying to achieve competent writing. One remark from a subject suggested that some students write better under pressure and that the writing assignment was successful when it was completed “at the last minute,” even though it may not have been submitted on time.

A variety of resources that the participants used were the same as the resources identified in previous interview inquiries. One new resource was identified, which was personal time management. Subjects reported that some students stayed up all night to complete a writing assignment. Table 21 summarizes the responses about untimely
submission of formal academic paper. The number in parentheses is the approximate number of interviewed participants out of a total of 17 who identified the factor as significant.
Table 21. Stated Reasons for Submitting a Formal Academic Paper Past the Due Date

<table>
<thead>
<tr>
<th>Category: Educators and Teaching Strategies</th>
<th>Theme: Environmental</th>
</tr>
</thead>
<tbody>
<tr>
<td>“You can turn it in whenever you like.” (2)</td>
<td></td>
</tr>
<tr>
<td>“Doesn’t matter when you turn it in.” (2)</td>
<td></td>
</tr>
<tr>
<td>“Very hard [program]; Nursing program was very detailed, difficult, and demanding (14)</td>
<td></td>
</tr>
<tr>
<td>Instructor’s leniency with writing assignment due date led to increased student laziness and procrastination (2)</td>
<td></td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Category: Time Management</th>
<th>Theme: Behavioral</th>
</tr>
</thead>
<tbody>
<tr>
<td>Procrastinating (17)</td>
<td></td>
</tr>
<tr>
<td>Not giving paper priority (12)</td>
<td></td>
</tr>
<tr>
<td>Waiting until last minute to find scholarly resources (10)</td>
<td></td>
</tr>
<tr>
<td>Leading a hectic lifestyle with so much to do (17)</td>
<td></td>
</tr>
<tr>
<td>“Murphy’s Law seemed to happen, when one thing goes wrong, it all goes wrong.” (1)</td>
<td></td>
</tr>
<tr>
<td>Leaving flash drive (with paper on it) at school so student could not work on paper at home or had to drive back to school to get flash drive (1)</td>
<td></td>
</tr>
<tr>
<td>“I stayed up all night to do the paper.” (5)</td>
<td></td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Category: Friends and Family</th>
<th>Theme: Environmental</th>
</tr>
</thead>
<tbody>
<tr>
<td>Being a single mom and still try to manage nursing homework, care for a minor child, and go to work (3)</td>
<td></td>
</tr>
<tr>
<td>Coping with a family medical emergency of a child (3)</td>
<td></td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Category: Technology</th>
<th>Theme: Environmental</th>
</tr>
</thead>
<tbody>
<tr>
<td>Internet happened to malfunction when trying to work on the paper (3)</td>
<td></td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Category: Attitude</th>
<th>Theme: Personal</th>
</tr>
</thead>
<tbody>
<tr>
<td>“I forgot the paper was due.” (1)</td>
<td></td>
</tr>
<tr>
<td>“I dreaded doing the paper.” (10)</td>
<td></td>
</tr>
</tbody>
</table>
In summary, comments were identified concerning reasons for submitting a formal academic paper past the due date. Categories were identified and further allocated into three major themes that were consistent with the three factors of reciprocal determinism inherent in the self-efficacy theory: environment factors, personal characteristics, and behavioral factors (Bandura, 1977, 1986; Lang, 2005; Pajares, 2002).

**Interview Protocol Inquiry 6**

The sixth interview protocol question set was as follows: Think about a significant experience that helped you complete a formal academic paper and the resources you used (academic resources/technological resources/friend/family). Why was that significant experience important to you as a nursing student?

During the focus group interview, participants remembered a significant experience that helped them complete a formal academic paper, and why the experiences were significant for them. Several resources were also identified that were the same resources mentioned previously, including EBSCOhost, the APA manual, friends and family, and scholarly resources. A summary of responses is presented in Table 22. The number in parentheses is the approximate number of interviewed participants out of a total of 17 who identified the factor as significant.
Table 22. Significant Experiences for Completing a Formal Academic Paper

<table>
<thead>
<tr>
<th>Experience</th>
<th>Reason for significance</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Category: Educators and Teaching Strategies</strong></td>
<td></td>
</tr>
<tr>
<td><strong>Theme: Environmental</strong></td>
<td></td>
</tr>
<tr>
<td>Teacher advice: “If you can speak well and write well, you can get anywhere in life.” (1)</td>
<td>Learned to value education and knowledge (regarding writing assignments) and also learned to take the writing assignments more seriously</td>
</tr>
<tr>
<td><strong>Category: Generational Writing Issues</strong></td>
<td></td>
</tr>
<tr>
<td><strong>Theme: Environmental</strong></td>
<td></td>
</tr>
<tr>
<td>Observing that younger generations are challenged with writing abilities because they use texting language more frequently than formal writing language (1)</td>
<td>Felt responsible for achieving competent academic writing so that educated communication was preserved and maintained for the dissemination of information to the community</td>
</tr>
<tr>
<td><strong>Category: Reading Experiences</strong></td>
<td></td>
</tr>
<tr>
<td><strong>Theme: Behavioral</strong></td>
<td></td>
</tr>
<tr>
<td>Read an influential book as a child (1)</td>
<td>Influential book led to student’s inspiration to excel in writing</td>
</tr>
<tr>
<td><strong>Category: Early Educational Experiences</strong></td>
<td></td>
</tr>
<tr>
<td><strong>Theme: Environmental</strong></td>
<td></td>
</tr>
<tr>
<td>High-school teacher’s advice: Write clearly enough so a stranger can understand. (1)</td>
<td>Realized the need to write clearly enough so a stranger can understand</td>
</tr>
<tr>
<td>Grade school teacher was a stickler for grammatical errors—made student cry (1)</td>
<td>Learned the importance of using grammatically correct language</td>
</tr>
<tr>
<td><strong>Category: Friends and Family</strong></td>
<td></td>
</tr>
<tr>
<td><strong>Theme: Environmental</strong></td>
<td></td>
</tr>
<tr>
<td>Sibling influences (7)</td>
<td>Sibling adamantly insisted that student write and speak well in order to better represent self for future job prospects.</td>
</tr>
<tr>
<td>Parental feedback and influence (9)</td>
<td>Parent proofread paper, gave feedback, and taught time-management skills</td>
</tr>
</tbody>
</table>
Table 22. Significant Experiences for Completing a Formal Academic Paper (continued)

<table>
<thead>
<tr>
<th>Category: Scholarly Assets</th>
<th>Theme: Environmental</th>
</tr>
</thead>
<tbody>
<tr>
<td>Three good resources that match the thesis statement found by student (8)</td>
<td>“Pertinent resources help me get into the paper and make the main point.”</td>
</tr>
<tr>
<td>Library orientation and librarian (16)</td>
<td>Helped students understand process for locating resources</td>
</tr>
<tr>
<td>Quiet library environment (16)</td>
<td>Quiet library environment resulted in better papers</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Category: Firsthand Working Experiences</th>
<th>Theme: Behavioral</th>
</tr>
</thead>
<tbody>
<tr>
<td>Learned while working on the job as a nursing assistant (9)</td>
<td>Helped student relate to the topic better</td>
</tr>
<tr>
<td></td>
<td>Was able to relate to the firsthand experience</td>
</tr>
<tr>
<td>Personal experience [of a phenomenon] first was beneficial (12)</td>
<td>Helped give student firsthand knowledge that made the paper easier to write.</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Category: Attitude</th>
<th>Theme: Personal</th>
</tr>
</thead>
<tbody>
<tr>
<td>Interest in topic (17)</td>
<td>Interest in topic made it easier to write</td>
</tr>
<tr>
<td>Personal goals to succeed (12)</td>
<td>Did not have time to take the class again, so there was a high motivation to do well the first time</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Category: Bad Past Experiences</th>
<th>Theme: Personal</th>
</tr>
</thead>
<tbody>
<tr>
<td>Suffered through a very bad writing experience in high school where a 10-page paper was written in one night (1)</td>
<td>Motivated student to prioritize and not to procrastinate</td>
</tr>
<tr>
<td>Prior college experience for “A” student who submitted a paper at the last minute and received a “C” grade, which led the “A” student to get a “C” in the class. (1)</td>
<td>Always remembered the bad experience because it was embarrassing, and it taught student to get paper done on time and not procrastinate</td>
</tr>
<tr>
<td>Student became very frustrated about a nursing care incident and the outcomes of that incident for the patient and nursing staff (3)</td>
<td>Helped student to reflect on the experience and “prove myself right” by referring to the experience in an academic writing assignment</td>
</tr>
</tbody>
</table>
In summary, several significant experiences were identified that helped entry-level BSN students complete a formal academic paper. Reasons for why the experiences were significant were also identified. Categories for the significant experiences were documented and allocated into three major themes that were consistent with the three factors of reciprocal determinism: environment factors, personal characteristics, and behavioral factors (Bandura, 1997; Lang, 2005; Pajares, 2002).

**Interview Protocol Inquiry 7**

The seventh interview question set was as follows: I am interested in what you perceive to be the most significant experience that prevented you from successfully completing a formal academic paper. What do you believe is the main reason for not doing well on the paper? What interfered? What resources (academic resources/technological resources/ friends/family) did you use to complete the paper? Why was that significant experience important to you as a nursing student?

Participants remembered significant experiences that prevented them from successfully completing a formal academic paper, which were considered hindrances while trying to achieve competent academic writing. Subjects reported comments regarding the significance of the experiences. Several resources were also identified, which were the same resources that have been mentioned previously. A summary of responses is identified in Table 23. The number in parentheses is the approximate number of interviewed participants out of a total of 17 who identified the factor as significant.
<table>
<thead>
<tr>
<th>Experience</th>
<th>Reason for Significance</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Category: Friends and Family</strong></td>
<td><strong>Theme: Environmental</strong></td>
</tr>
<tr>
<td>Parent has personal and familial struggles that affects student’s ability to succeed (1)</td>
<td>The problem with a parent’s personal/family relationships was long-term and caused a distraction with being successful on formal academic writing assignments.</td>
</tr>
<tr>
<td>Primary care provider for minor children in addition to being a nursing student; spouse working and could not help with the children (9)</td>
<td>Felt guilty about not spending time with children due to extensive homework and writing assignments</td>
</tr>
<tr>
<td>Very ill sibling (1)</td>
<td>Family was first priority, writing assignment second priority</td>
</tr>
<tr>
<td>Family emergency/death (4)</td>
<td>“Couldn’t deal with everything.” Did not really care about doing writing assignment during a family emergency/death</td>
</tr>
<tr>
<td></td>
<td>“When you don’t do [writing assignment] on time, it ends up being more work.”</td>
</tr>
<tr>
<td><strong>Category: Financial</strong></td>
<td><strong>Theme: Behavioral</strong></td>
</tr>
<tr>
<td>Financial situation, working two jobs in addition to being a nursing student (7)</td>
<td>Since the paper was completed immediately before the due date, student did not have time to access the writing center or have someone proofread the paper.</td>
</tr>
<tr>
<td><strong>Category: Time Management</strong></td>
<td><strong>Theme: Behavioral</strong></td>
</tr>
<tr>
<td>Arranging homework priorities/procrastination (17)</td>
<td>Prioritized studying for an exam more than arranging time to do a formal academic writing assignment</td>
</tr>
<tr>
<td></td>
<td>Learned to arrange time to get paper completed first and then schedule time for exam preparation.</td>
</tr>
<tr>
<td><strong>Category: Educators and Teaching Strategies</strong></td>
<td><strong>Theme: Environmental</strong></td>
</tr>
</tbody>
</table>
Table 23. Significant Experiences That Prevented Successful Completion of Formal Academic Paper (continued)

<table>
<thead>
<tr>
<th>Experience</th>
<th>Description</th>
</tr>
</thead>
<tbody>
<tr>
<td>Partners for writing assignment (7)</td>
<td>It was helpful knowing that workload was shared, but at the same time, it was stressful because extra time was needed to check partner’s work for accuracy</td>
</tr>
</tbody>
</table>
| Lack of formal education from nursing instructor on APA formatting (17)    | Had to self-teach APA formatting “Had to learn on own... Very difficult to do”  
“Had no idea there was APA writing style”  
Switching over (to APA) was a “huge issue”  
Was a Modern Language Association (MLA) expert |
| Instructor’s APA feedback was inconsistent with facts in the APA manual (7) | Suggestion: Nursing instructors integrate APA education courses into the curriculum to include instruction on documentation of citations, basic framework regarding headings and headers, and differences between MLA and APA |

| Category: Self-Confidence  
Theme: Attitudinal |

| “A” student grade (2)                                                                 | “If I know I’m getting an “A” in the course, I will not put much effort into the paper. Why try so hard?”                                                                 |

| Category: Student Illness  
Theme: Behavioral |

| Became ill with GI flu a week before the paper was due (1)                    | Tried to successfully complete the writing assignment “but it didn’t happen”                                                                                                                              |

| Category: Time Management  
Theme: Behavioral |

| Hectic life in general—kids, job, school, nontraditional student (14)       | “Hard to focus on school with everything else going on.”                                                                                                                                            |

| Category: Self-Defeating Behavior  
Theme: Personal |
In summary, several significant experiences were identified that prevented entry-level BSN students from completing a formal academic writing assignment. Reasons for why the experiences were significant were also identified. Categories for the significant experiences were documented and allocated into three major themes that were consistent with the three factors of reciprocal determinism that is inherent in the self-efficacy theory: environment factors, personal characteristics, and behavioral factors (Bandura, 1977, 1986; Lang, 2005; Pajares, 2002).

In regard to data that answered the qualitative research subquestion, Table 24 summarizes the significant resources that entry-level BSN students perceived to be significant in their nursing education writing experiences. The significant resources were categorized into the main themes of reciprocal determinism (Bandura, 1977, 1986): environmental factors, personal characteristics, and behavioral factors. The number in parentheses is the approximate number of interviewed participants out of a total of 17 who identified the factor as significant.

### Table 23. Significant Experiences That Prevented Successful Completion of Formal Academic Paper (continued)

<table>
<thead>
<tr>
<th>Category: Personal Tragedy</th>
<th>Theme: Personal</th>
</tr>
</thead>
<tbody>
<tr>
<td>Experienced a personal tragedy that disrupted routine study habits (1)</td>
<td>Decreased motivation to do writing assignment</td>
</tr>
</tbody>
</table>

| Not motivated to do the assignment, negative self-talk, decreased self-confidence (3) | Not motivated to do the assignment, negative self-talk, decreased self-confidence |

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Table 24. Significant Resources for Entry-Level BSN Students’ Academic Writing Experiences

<table>
<thead>
<tr>
<th>Theme: Environmental</th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td>Writing/grammar classes in secondary education (17)</td>
<td></td>
</tr>
<tr>
<td>Supportive nursing professors who proofread paper, provided feedback on paper, and provided contact information (6)</td>
<td></td>
</tr>
<tr>
<td>Scaffolding assignments (4)</td>
<td></td>
</tr>
<tr>
<td>Sample papers (15)</td>
<td></td>
</tr>
<tr>
<td>Detailed grading criteria/guidelines (17)</td>
<td></td>
</tr>
<tr>
<td>College textbooks, APA manual, and scholarly resources (15)</td>
<td></td>
</tr>
<tr>
<td>Library/librarian (15)</td>
<td></td>
</tr>
<tr>
<td>Writing center (15)</td>
<td></td>
</tr>
<tr>
<td>Friends and peers (16)</td>
<td></td>
</tr>
<tr>
<td>Family (parental influence, spouse) (16)</td>
<td></td>
</tr>
<tr>
<td>Websites (EBSCOhost, BibMe.com, Purdue Owl, YouTube videos) (17)</td>
<td></td>
</tr>
<tr>
<td>Personal computer (17)</td>
<td></td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Theme: Behavioral</th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td>Students’ skills to generate great ideas for the paper, ability to do own research (3)</td>
<td></td>
</tr>
<tr>
<td>Read someone else’s paper (7)</td>
<td></td>
</tr>
<tr>
<td>Develop a personal/computerized planner (10)</td>
<td></td>
</tr>
<tr>
<td>Past experience of writing papers helped with current writing assignment (6)</td>
<td></td>
</tr>
<tr>
<td>Summer course scheduling to free up busy fall semester (3)</td>
<td></td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Theme: Personal</th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td>Positive attitude (8)</td>
<td></td>
</tr>
<tr>
<td>Self-reliance on known skills (8)</td>
<td></td>
</tr>
<tr>
<td>Persistence (8)</td>
<td></td>
</tr>
<tr>
<td>Motivation (8)</td>
<td></td>
</tr>
<tr>
<td>Personal goals (8)</td>
<td></td>
</tr>
</tbody>
</table>

In regard to data that answered the qualitative research subquestion, Table 25 summarizes the significant events, issues, and relationships that entry-level BSN students
perceived to be significant in their nursing education writing experiences. The significant events, issues, and relationships were categorized into the main themes of reciprocal determinism (Bandura, 1977, 1986): environmental factors, personal characteristics, and behavioral factors. The number in parentheses is the approximate number of interviewed participants out of a total of 17 who identified the factor as significant.

Table 25. Significant Events/Issues/Relationships for Entry-Level BSN Students’ Academic Writing Experiences

<table>
<thead>
<tr>
<th>Theme: Environmental</th>
</tr>
</thead>
<tbody>
<tr>
<td>Teacher’s advice in high school and college was helpful (1)</td>
</tr>
<tr>
<td>Large high school population—English class taught writing skills (1)</td>
</tr>
<tr>
<td>Small high school population lacked classes on grammar and writing (1)</td>
</tr>
<tr>
<td>Nursing program instructor assigned partners for writing assignment (7)</td>
</tr>
<tr>
<td>Instructions and grading rubric were not clear (9)</td>
</tr>
<tr>
<td>Instructors would not provide assistance (9)</td>
</tr>
<tr>
<td>Untimely feedback from nursing program instructor (5)</td>
</tr>
<tr>
<td>Instructor leniency on assignment due date led to procrastination (2)</td>
</tr>
<tr>
<td>Very challenging nursing program (14)</td>
</tr>
<tr>
<td>Lack of formal APA education (17)</td>
</tr>
<tr>
<td>APA manual hard to understand (9)</td>
</tr>
<tr>
<td>Inconsistent APA feedback (9)</td>
</tr>
<tr>
<td>Technological-focused youth (17)</td>
</tr>
<tr>
<td>Sibling/parental support and feedback (16)</td>
</tr>
<tr>
<td>Scholarly resources (15)</td>
</tr>
<tr>
<td>Library orientation and quiet library environment (16)</td>
</tr>
<tr>
<td>Personal and family struggles (9)</td>
</tr>
<tr>
<td>Primary care provider to minor children (9)</td>
</tr>
<tr>
<td>Student and spouse working to support family (9)</td>
</tr>
<tr>
<td>Very ill sibling (1)</td>
</tr>
<tr>
<td>Family emergency/death (4)</td>
</tr>
<tr>
<td>Technology problem with Internet (3)</td>
</tr>
</tbody>
</table>
Table 25. Significant Events/Issues/Relationships for Entry-Level BSN Students’ Academic Writing Experiences (continued)

<table>
<thead>
<tr>
<th>Theme: Behavioral</th>
</tr>
</thead>
<tbody>
<tr>
<td>Student did not read instructions (1)</td>
</tr>
<tr>
<td>Read an influential book as a young child (1)</td>
</tr>
<tr>
<td>Reading inspired motivation (1)</td>
</tr>
<tr>
<td>Learned while working in health care (3)</td>
</tr>
<tr>
<td>Gained first hand experiences (3)</td>
</tr>
<tr>
<td>Suffered through a very bad high school writing experience in which a 10-page paper was written in one night (1)</td>
</tr>
<tr>
<td>Suffered through a very bad college experience in which an A student procrastinated with a critical writing assignment and earned a C on the assignment and a C as the final course grade (1)</td>
</tr>
<tr>
<td>Struggled financially by working two jobs (4)</td>
</tr>
<tr>
<td>Became ill a week before writing and could not complete the assignment (1)</td>
</tr>
<tr>
<td>Experienced hectic life in general (17)</td>
</tr>
<tr>
<td>Procrastinated with writing assignment (14)</td>
</tr>
<tr>
<td>Experienced difficulty with transitioning from creative writing to scholarly writing (9)</td>
</tr>
<tr>
<td>Experienced difficulty with paraphrasing and documenting direct quotes (9)</td>
</tr>
<tr>
<td>Experienced unorganized thoughts and resources (9)</td>
</tr>
<tr>
<td>Incorporated too many resources (5)</td>
</tr>
<tr>
<td>Did not incorporate enough resources (5)</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Theme: Personal</th>
</tr>
</thead>
<tbody>
<tr>
<td>Personal goal to succeed (12)</td>
</tr>
<tr>
<td>Very interested in the topic (17)</td>
</tr>
<tr>
<td>Witnessed a nursing care incident while working as a nursing assistant. The frustration helped motivate the student to do research on the incident and determine methods to ensure positive patient outcomes (3)</td>
</tr>
<tr>
<td>Student will not persist with a writing assignment if course grade is an ‘A’ (1)</td>
</tr>
<tr>
<td>No motivation to do assignment (3)</td>
</tr>
<tr>
<td>Negative self-talk (3)</td>
</tr>
<tr>
<td>Suffered through a personal tragedy (1)</td>
</tr>
</tbody>
</table>
Chapter 4 Summary

Data analysis and results for both the quantitative and qualitative data collections were reported in Chapter 4. An introduction to Chapter 4 was presented with a detailed description of the sample. A detailed summary of results for the quantitative data was reported for each of the eight hypotheses by using tables, figures, and narrative explanations. The research design and an introduction to the analysis for the qualitative component were explained.

Detailed qualitative findings were reported by referring to each of the eight interview protocol inquiries. Tables, figures, and narratives were used to summarize the data. Data from the interviews addressed the main qualitative research question and the qualitative research subquestion. Narratives were used to explain the coding, categories, and emerging themes. The three main themes that emerged supported the reciprocal determinism model that was a component of Bandura’s self-efficacy theory (Bandura, 1977, 1986). Quantitative measures were also used in the qualitative data analysis in order to more clearly visualize the distribution of ratings for the participants’ general self-confidence levels and to more clearly delineate the impact of reciprocal determinism factors (environmental, behavioral, and personal factors) on the participants’ abilities to achieve competent academic writing.
CHAPTER 5: CONCLUSIONS AND DISCUSSION

The purpose of this mixed-methodology research study was to empirically determine writing self-efficacy and qualitatively explore writing experiences of entry-level bachelor of science in nursing (BSN) nursing students. The investigated research problem was the need to identify the facilitators and barriers to competent academic writing by examining writing self-efficacy and academic writing experiences of entry-level BSN students.

The research methodology for this study was mixed methods using the concurrent triangulation design so that the intangible construct of writing self-efficacy could be comprehensively explored. Both quantitative and qualitative data were collected simultaneously, separately analyzed, and then uniformly compared to determine similarities and differences of the two data sets (Creswell, 2009; Houser, 2008). The addition of the qualitative portion of the study with equal emphasis on the empirical data analysis (Tashakorri & Teddlie, 2003) generated a strong, well-balanced, and meaningful research study that yielded valid and credible research findings.

Chapter 4 reported the results of the data collection. Chapter 5 focuses on conclusions from the quantitative and qualitative data analyses. The results of the data analyses are discussed in regard to the scholarly literature review. Limitations are reported, as well as implications for practice and recommendations for further research.
Summary of Quantitative Results

The statistical results from the study addressed the central quantitative research question and the eight quantitative subquestions. A summary of quantitative results is documented in response to the central quantitative research question and the eight null hypotheses for each of the quantitative subquestions.

Central Research Question

The central research question was as follows: What is the writing self-efficacy of entry-level BSN students? The summary of results from the writing self-efficacy survey indicated that the total mean score of writing self-efficacy for entry-level BSN students was 67.209 out of 80, with 80 being the highest possible score obtainable. The lowest total self-efficacy score was 42, and the highest total self-efficacy score was 80.

Self-efficacy scores for each of the eight writing skills for which subjects self-reported ranged from 7.989 to 8.626, with 10 being the highest possible score. Results showed that participants rated punctuation as the lowest self-efficacy score (7.989), indicating that punctuation was a writing skill with which the subjects did not feel confident in performing successfully. Participants felt the most self-confident (8.945) with correctly writing a simple sentence. Table 26 shows the writing skills and corresponding mean writing self-efficacy scores in order from the lowest to highest.
Table 26. Writing Skills and Mean Self-Efficacy

<table>
<thead>
<tr>
<th>Writing skill</th>
<th>Mean self-efficacy</th>
</tr>
</thead>
<tbody>
<tr>
<td>Correct punctuation</td>
<td>7.989</td>
</tr>
<tr>
<td>Correct structure for compound/complex sentences</td>
<td>8.088</td>
</tr>
<tr>
<td>Correct spelling</td>
<td>8.231</td>
</tr>
<tr>
<td>Correct use of parts of speech (nouns, verbs, adjectives, adverbs)</td>
<td>8.264</td>
</tr>
<tr>
<td>Organization of paper, ideas in order, and correct use of transitions</td>
<td>8.495</td>
</tr>
<tr>
<td>Correctly organized paragraph structure</td>
<td>8.571</td>
</tr>
<tr>
<td>Correct use of plurals, verb tenses, prefixes, and suffixes</td>
<td>8.626</td>
</tr>
<tr>
<td>Correct simple sentence structure</td>
<td>8.945</td>
</tr>
</tbody>
</table>

Subquestion 1: Writing Self-Efficacy and Age

The null hypothesis for Research Subquestion 1 was as follows: No statistically significant relationship exists between entry-level BSN students’ writing self-efficacy and their age. The null hypothesis was supported by the data. ANOVA p-value was 0.8740, and the Kruskal-Wallis p-value was 0.8491, which indicated that there was no statistically significant difference in writing self-efficacy scores in this study’s sample of BSN students based on age. The participants were divided into three age groups: 18–25, 26–30, and 31 and older. The age group that scored the highest self-efficacy mean (67.389, 80 as the highest self-efficacy score possible) was the 26–30 age group, and the age group that scored the lowest self-efficacy mean (65.429, 80 as the highest self-efficacy score possible) was the 31-and-older age group. The 18–25 age group scored a self-efficacy mean of 67.349. The differences in writing self-efficacy scores were not statistically significant.
Subquestion 2: Writing Self-Efficacy and Gender

The null hypothesis for Research Subquestion 2 was as follows: No statistically significant relationship exists between entry-level BSN students’ writing self-efficacy and their gender. The null hypothesis was not supported by the data. The mean writing self-efficacy score for females was 68.135, and the mean writing self-efficacy score for males was 63.177. The ANOVA p-value was 0.0481 and the Kruskal-Wallis p-value was 0.0472, which indicated that there was a statistically significant difference in writing self-efficacy scores in this study’s sample of BSN nursing students, based on gender.

Subquestion 3: Writing Self-Efficacy and Nursing Student Status

The null hypothesis for Research Subquestion 3 was as follows: No statistically significant relationship exists between entry-level BSN students’ writing self-efficacy and student status. Only one subject out of the 91 participants reported part-time nursing student status. Therefore, analysis between writing self-efficacy and student status could not be determined based on this study’s data set.

Subquestion 4: Writing Self-Efficacy and Employment Status

The null hypothesis for Research Subquestion 4 was as follows: No statistically significant relationship exists between entry-level BSN students’ writing self-efficacy and their employment status. The null hypothesis was supported by the data. The analysis results showed that the difference in mean writing self-efficacy scores by employment status was not statistically significant. Mean self-efficacy scores ranked from lowest to highest for the three different employment statuses was as follows: full-time status, 59.833; not employed, 67.500; and part-time status, 68.057. The ANOVA p-
value was 0.1306 and the Kruskal-Wallis $p$-value was 0.4454, indicating that there was no statistical significance.

**Subquestion 5: Writing Self-Efficacy and Primary Care-Provider Status**

The null hypothesis for Research Subquestion 5 was as follows: No statistically significant relationship exists between entry-level BSN students’ writing self-efficacy and their primary care-provider status. The null hypothesis was supported by the data. The analysis results indicated that the difference in mean writing self-efficacy scores by care-provider status was not statistically significant. The mean writing self-efficacy score for those who did not consider themselves primary care providers was 66.772 and for those who considered themselves primary care providers was 70.083. The ANOVA $p$-value was 0.2554, and the Kruskal-Wallis $p$-value was 0.1223, which indicated no statistical significance based on primary care-provider status.

**Subquestion 6: Writing Self-Efficacy and Support-System Status**

The null hypothesis for Research Subquestion 6 was as follows: No statistically significant relationship exists between entry-level BSN students’ writing self-efficacy and their support-system status. The null hypothesis was supported by the data. Only one student reported no access to a support system. Therefore, statistical significance between writing self-efficacy and support-system status could not be determined based on this study’s data set.

**Subquestion 7: Writing Self-Efficacy and Completion of a Prior College-Level Writing Course**

The null hypothesis for Research Subquestion 7 was as follows: No statistically significant relationship exists between entry-level BSN students’ writing self-efficacy
and completion of prior college-level writing course. The null hypothesis was supported by the data. The analysis results indicated that the difference in mean writing self-efficacy scores by prior writing course was not statistically significant. The mean self-efficacy score for those who reported taking a college-level writing course less than a year prior to the study was 69.133, and the mean self-efficacy score for those who reported taking a college-level writing course more than a year prior to the study was 66.829. The ANOVA $p$-value was 0.3861, and the Kruskal Wallis $p$-value was 0.3268, which indicated no statistical significance.

**Subquestion 8: Writing Self-Efficacy and First-Speaking Language**

The null hypothesis for Research Subquestion 8 was as follows: No statistically significant relationship exists between entry-level BSN students’ writing self-efficacy and first-speaking language. The null hypothesis was supported by the data. The analysis results indicated that the difference in mean writing self-efficacy scores by first-speaking language was not statistically significant. The participants were divided into two groups: English as first-speaking language and non-English as first-speaking language. The self-efficacy mean for those in the English-as-first-speaking-language group was 67.530, and the self-efficacy mean for those in the non-English as first-speaking-language-group was 63.875. The ANOVA $p$-value was reported as 0.2936, and the Kruskal Wallis $p$-value was reported as 0.2166. The results indicated a difference in means, but the difference was not statistically significant.

The statistical results from the study addressed the central quantitative research question and the eight quantitative subquestions and corresponding null hypotheses. A
summary of quantitative results was documented in response to the central quantitative research question and the eight null hypotheses for each of the quantitative subquestions.

**Discussion of Quantitative Results**

The discussion relates the results of the study to findings from other studies reported in the literature. It also addresses possible rationales for the findings and their adequacy in answering the research questions.

**Central Research Question**

The central research question was as follows: What is the writing self-efficacy of entry-level BSN students? The analysis indicated that entry-level BSN students scored the lowest writing self-efficacy (7.989) on correctly performing punctuation, and entry-level BSN students scored the highest writing self-efficacy (8.945) on correctly writing a simple sentence, which suggested that entry-level BSN students felt more confident with successfully writing a simple sentence with correct grammar than they did with correctly performing punctuation. None of the writing skills on the writing self-efficacy survey (correct punctuation, correct structure for simple sentences, correct structure for compound sentences, correct spelling, correct use of parts of speech, organization and flow of ideas, correct paragraph structure, and correct use of plurals/verbs) scored a mean self-efficacy of 9 or above, with 10 being the highest possible score.

The lower writing self-efficacy ratings revealed that the students in this research sample did not self-report scores associated with high self-confidence (9 or 10), which showed that entry-level BSN students did not feel confident about having mastered basic writing skills that should have been mastered in high school and college courses.
Questions remain regarding concerns of academic deficiencies in high school courses and in college courses prior to nursing education. The literature suggested that nursing students demonstrate significant difficulty with academic writing (McMillan & Raines, 2010) and demonstrate writing incompetency at the college level (Cho & Schunn, 2007), which may have been due to the lack of academic writing experiences in high school courses and college writing courses prior to nursing education. The National Commission on Writing for America’s Families, Schools, and Colleges (2006) found that writing classes outside English composition courses in high school and college settings did not provide students with writing practice time nor were students assigned compositions as homework. Cho and Schunn (2007) cited statistics from the 1998 National Assessment of Educational Process that indicated 1% of senior high school students demonstrated proficient writing.

The lack of student experience with formal writing has the potential to negatively influence the development of competent academic writing. Therefore, the following questions remain concerning education prior to college nursing courses:

- Were students taught basic writing skills in high school and college?
- Were students held to high standards to master basic writing skills in high school and college?
- Were students required to take basic writing and grammar classes in high school or college?
- Were the writing courses focused on basic grammar and writing skills, but occurred years before the student entered a nursing program?
- Did the students have motivating interest for learning basic writing and grammar skills in high school and college?

Those who attain high self-efficacy have an advantage of potentially achieving personal goals (Bandura, 1977, 1986; Clark & Dodge, 1999; Lasschinger, 1996; Pajares, 1996, 1997, 2003; Tresollini & Stritter, 1994), including the goal of competent academic
writing. Awareness of the data might inspire nurse educators, and high school and college educators, to be informed about the effects of writing self-efficacy on the achievement of competent academic writing for entry-level BSN students.

**Research Subquestion 1**

Research Subquestion 1 was as follows: Is there a relationship between entry-level BSN students’ writing self-efficacy and their age? The analysis indicated that there were differences in the self-efficacy means of the three age groups, but the differences were not statistically significant and suggested that age did not statistically affect a student’s writing self-efficacy. Those who were 26 to 30 years old scored the highest self-efficacy scores (67.389), and those who were 18 to 25 years old followed with a total mean writing self-efficacy value of 67.349, which was 0.04 lower than the score of the 26-30 age group. Those who were ages 31 years and older scored the lowest writing self-efficacy scores (65.429).

An explanation for the results is related to various roles and responsibilities of young adults who were also entry-level students in rigorous nursing programs. Those who were ages 31 years and older scored the lowest writing self-efficacy mean, which may be due to nontraditional student status and having been out of academic study longer than other students. Additionally, those who were ages 31 years and older may discover challenges with re-establishing study habits and learn new concepts that are needed as an entry-level BSN student.

Those who were 26 to 30 years old scored the highest mean writing self-efficacy score, which could be associated with some students having just recently completed a prior college degree and who may have been accustomed to the academic rigor of a
college program. Those who were 18 to 25 years old scored the second highest mean writing self-efficacy score. This finding may have been associated with some students having recently attended high school or community college in which rigorous academic writing experiences were not available.

BSN students in different age groups may encounter role strain as an environmental stressor, which may impact the students’ academic performances. Bandura (1994) suggested that young adults who exhibit high self-efficacy and a strong will to persist are most likely to handle difficult situations in an optimistic manner and achieve positive results. Young adults who exhibit self-limiting thoughts will most likely not be able to handle challenging and stressful experiences in a positive manner. Student counseling services may be necessary in order to help entry-level BSN students cope with a variety of environmental role strains (Jannati, Khaki, Eftekhari, Peyrovi, & Nojadeh, 2012; Peyrovi, Parvizy, & Haghani, 2009).

**Research Subquestion 2**

Research Subquestion 2 was as follows: Is there a relationship between entry-level BSN students’ writing self-efficacy and their gender? The analysis showed that there were differences in mean writing self-efficacy scores. The differences were statistically significant, which indicated that gender does correlate with writing self-efficacy of entry-level BSN students. The total writing self-efficacy scores for females was 68.135, and the total writing self-efficacy score for males was 63.177. With a significance level of 0.05, the difference between the means was determined to be statistically significant by an ANOVA $p$ - value of 0.0481, and a Kruskal-Wallis $p$ - value
of 0.0472. The results indicated that female subjects had higher writing self-efficacy scores than male subjects in this study’s sample.

The findings were consistent with a meta-analysis done by Huang (2013), who suggested that females in late adolescence displayed a higher self-efficacy in language arts, whereas males in late adolescence displayed higher levels of self-efficacy in computers, social science, and mathematics. The gender difference in self-efficacy may have been due to the different stereotypical characteristics for males and females (Huang, 2013).

The American Academy of Child and Adolescent Psychiatry (2010) indicated that late adolescence is defined as teens in their late high school years and beyond, about 19 to 24 years of age. The data in this study is supported by the data from Huang’s (2013) study. The sample for this study included 81% females and 19% males, and 72% of the sample (both females and males) were aged 18 to 25, which included those who are in the late adolescent age range. In relation to the data analysis results, findings about late female and male adolescents supported the literature review.

Pajares (2003) indicated that self-efficacy influenced writing outcomes and predicted students’ writing performances. A high level of self-confidence about accomplishing a certain task potentially leads to realization of positive outcomes, an increase in self-efficacy and achievement of goals (Bandura, 1977, 1986). Theorists have stated that students’ self-efficacy is directly proportional to students’ achievement of writing and academic performance (Clark & doddges, 1999; Ergul, 2004; Kirk, 2012; Laschinger, 1996; Pajares, 1996, 1997, 2003; Tresolini & Stritter, 1994). Findings of this
study about relationships between gender and writing self-efficacy support Bandura’s self-efficacy theory (1977, 1986).

**Research Subquestion 3**

Research Subquestion 3 was as follows: Is there a relationship between entry-level BSN students’ writing self-efficacy and nursing student status? This research subquestion could not be answered because only one subject out of the 91 participants reported part-time nursing student status. Statistical analysis could not be generated on this study’s sample.

**Research Subquestion 4**

Research Subquestion 4 was as follows: Is there a relationship between entry-level BSN students’ writing self-efficacy and their employment status? Data analysis showed that there were differences between the mean writing self-efficacy scores for those who were employed full-time \((n = 6)\), part-time \((n = 35)\) and not employed \((n = 50)\), but the differences were not statistically significant. The lowest mean self-efficacy value \((59.833)\) was for those who were employed full time. The highest mean self-efficacy value \((68.057)\) was for those who were employed part-time. Those who were classified as not employed had a self-efficacy value of 67.500.

Employment status was an environmental factor as defined in the reciprocal determinism theory, which also included personal factors and behavioral factors (Bandura, 1986). The three factors are reciprocally interactive, influence each other, and affect human functioning. The reciprocal determinism model (Bandura, 1977, 1986) might suggest that employment role strain in addition to the role of being an entry-level BSN student may affect the students’ personal and behavioral sectors, including the
students’ desires and motivations to want to excel and feel self-confident with academic writing abilities.

Students may find it difficult to allocate time to successfully complete academic writing assignments. However, young adults who have a high self-efficacy and a strong will to persist have the potential to successfully manage role strain situations and achieve positive outcomes. Young adults who have negative self-thoughts may experience stress and find it challenging to persevere in a positive manner to achieve writing competence (Bandura, 1994).

**Research Subquestion 5**

Research Subquestion 5 was as follows: Is there a relationship between entry-level BSN students’ writing self-efficacy and their primary care-provider status? Data analysis results indicated that there were differences between the mean writing self-efficacy scores for those who were primary care providers (n = 12) and for those who were not primary care providers (n = 79). The differences were not statistically significant and suggested that primary care-provider status did not statistically affect a student’s writing self-efficacy. Those who were considered primary care providers scored a writing self-efficacy mean of 66.772, and those who were not primary care providers scored a writing self-efficacy mean of 70.083. The difference between the means was not statistically significant.

The role of primary care provider was an environmental factor as defined in the reciprocal determinism theory. The reciprocal determinism model also included personal factors and behavioral factors (Bandura, 1977, 1986) that all interacted, influenced each other, and affected human functioning. The reciprocal determinism model might suggest
that the role strain of being a primary care provider in addition to being an entry-level BSN student may affect the students’ personal and behavioral sectors, or the students’ desires and motivations to want to excel and feel self-confident with academic writing abilities. Students with high self-efficacy may be likely to persist during challenging times and meet goals or outcome expectations of achieving writing competence, but students with a lower self-efficacy may have difficulty persevering and may not meet outcome expectations of achieving academic writing competence (Bandura, 1994; Pajares, 2002).

Awareness of the theory of reciprocal determinism might help nurse educators understand the influence of environmental, personal, and behavioral factors on students’ abilities to meet a variety of environmental and academic demands. Students with multiple environmental stressors may benefit from psychological counseling that could assist students with managing and coping with a variety of environmental, personal, and behavioral stressors that could potentially affect academic success outcomes (Jannati et al., 2012; Peyrovi et al., 2009).

**Research Subquestion 6**

Research Subquestion 6 was as follows: Is there a relationship between entry-level BSN students’ writing self-efficacy and their support-system status? Statistical analysis could not be generated on this study’s sample because only one out of the 91 participants reported no support system and one subject’s answer to the demographic question was ambiguous. Support systems were also an environmental factor defined in the reciprocal determinism model, in which three main factors (environmental, personal, and behavioral) all interacted to influence each other and affect human functioning.
(Bandura, 1977, 1994). Helping BSN students to establish a support system and to focus on maintenance of a positive mental attitude (Timmins, Corron, Byrne, & Mooney, 2011) may be beneficial to increasing writing self-efficacy.

**Research Subquestion 7**

Research Subquestion 7 was as follows: Is there a relationship between entry-level BSN students’ writing self-efficacy and completion of a prior college-level writing course? Data analysis indicated that there were differences in mean writing self-efficacy scores for those who successfully took a writing course less than a year prior to the study ($n = 15$) compared to those who successfully took a writing course more than a year prior to the study ($n = 76$), but the differences were not statistically significant. The lowest mean self-efficacy value (66.829) was for those who successfully completed a writing course more than a year prior to the study. The highest mean self-efficacy value (69.133) was for those who successfully completed a writing course less than a year prior to the study.

The concept of a prerequisite writing course was suggested by O’Neill (2012), who explained that a prior writing course was a helpful resource for students who reported higher self-confidence levels after the course was completed. Therefore, awareness of the results could inform nurse educators about the possibility of requiring pre-requisite writing courses for admission into BSN programs, which could lead to increased writing self-efficacy and subsequent success with achieving competent academic writing.
Research Subquestion 8

Research Subquestion 8 was as follows: Is there a relationship between entry-level BSN students’ writing self-efficacy and their first-speaking language? Data analysis indicated that the results were not statistically significant between the groups of those participants whose first-speaking language was English (67.530) and those whose first-speaking language was not English (63.875).

Even though the results were not statistically significant, the data revealed that there was a difference in the mean writing self-efficacy scores. Mean writing self-efficacy for those whose first-speaking language was English was more than three points higher than for those whose first-speaking language was not English.

Nurse educators are in the position to provide academic support to those students who are culturally diverse (Hansen & Beaver, 2012; Olson, 2012). The data resulting from this study might inform nurse educators about culturally diverse BSN students who may benefit from academic writing support services. Examples of writing support could include tutorial services, individual and group meetings with writing experts, and individual writing support from nurse educators. The additional writing support has the potential to increase writing self-efficacy of those whose first-speaking language is not English and additionally, could potentially lead to academic writing competency and nursing education success. Culturally diverse nursing students may positively benefit from academic writing support services.

In summary, the quantitative central research question and the eight research subquestions were addressed. The discussion included remarks about the results, including what the results mean in general, what the results meant in relation to nursing
education practice, and how this study’s results support the self-efficacy theory and the reciprocal determinism model (Bandura, 1977, 1986).

**Summary of Qualitative Findings**

Data from the focus group interviews addressed the central qualitative research question and the qualitative research subquestion. The central qualitative research question asked about the hindrances and facilitators that entry-level BSN students encounter while trying to achieve competent academic writing. The qualitative research subquestion asked about events, resources, issues, and relationships that entry-level BSN students perceived to be significant in their nursing education writing experiences.

At each of the three research sites, the focus group interviews were completed on the same day as the quantitative data collections. The total number of participants in the three focus group interviews was 17, with six participants in two focus groups, and five participants in one focus group. The volunteer participants agreed to be interviewed. Their questions were answered and the consent forms were signed. Each of the three focus group interviews were video and audio recorded. After the interviews were completed, the researcher documented transcriptions for each of the interviews. Categories were determined and three main themes inherent in the reciprocal determinism model (Bandura, 1977, 1986) were identified from the categories.

The hindrances and facilitators are categorized according to the three factors shown in the reciprocal determinism model: environment factors, personal factors, and behavioral factors (Bandura, 1997; Lang, 2005; Pajares, 2002). Each of the three factors encompassed a distinct subset of characteristics. The environmental factor was composed of one’s social and physical surroundings. Behavioral factors included one’s
skills and actions. Personal factors included ones’ thoughts, motivations, perceptions, values, attitudes, emotions, beliefs, and goals.

Table 27 lists the main hindrances identified from the focus interviews that affected the achievement of competent academic writing for entry-level BSN students. The items are listed in order of priority based on the number of respondents for each. Slightly less than one-third (31%) of the hindrances were related to personal factors and suggested that the hindrances were due to factors that affected the entry-level BSN students’ thoughts, motivations, perceptions, values, attitudes, emotions, beliefs, and goals. About one-third (33%) of the hindrances were related to environmental factors that included one’s social and physical surroundings of entry-level BSN students and included actions of nurse educator, family members, and employers. More than one-third (36%) of the hindrances were due to behavioral factors and included entry-level students’ skills and actions.
### Table 27. Hindrances That Affected Achievement of Competent Academic Writing

<table>
<thead>
<tr>
<th>Environmental</th>
<th></th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td>1. College writing class did not teach writing skills or APA formatting.</td>
<td>2. Minimal exposure to APA education in high school and college, but was expected to know APA in nursing education program</td>
<td></td>
</tr>
<tr>
<td>3. Nursing education program very hard and put a strain on students' lifestyles, especially if student had a job and a family</td>
<td>4. Nursing instructors’ grading rubric/instructions not clear or absent</td>
<td></td>
</tr>
<tr>
<td>5. Nursing instructors’ inconsistencies with APA formatting procedures</td>
<td>6. Nursing instructors had limited APA knowledge and could not adequately guide nursing students on proper APA formatting.</td>
<td></td>
</tr>
<tr>
<td>7. Decreased nursing instructor support was not beneficial to student learning.</td>
<td>8. APA manual difficult to follow</td>
<td>9. Husband worked and could not care for children</td>
</tr>
<tr>
<td>10. Untimely feedback from nursing instructors on prior formal academic writing assignments</td>
<td>11. Unplanned student/family medical emergency/illness/death</td>
<td>12. Internet not working and technology problems</td>
</tr>
<tr>
<td>13. Nursing instructors were too lenient with due dates for formal academic writing assignments</td>
<td></td>
<td></td>
</tr>
<tr>
<td><strong>Personal</strong></td>
<td></td>
<td></td>
</tr>
<tr>
<td>1. Difficult to learn APA formatting and scholarly writing after having been proficient with creative writing</td>
<td>2. Difficult to understand formatting for paraphrased information and direct quotes</td>
<td></td>
</tr>
<tr>
<td>3. Did not like to do APA formatting</td>
<td>4. Did not like the assigned topic and very little interest in the topic</td>
<td>5. No motivation to do the writing assignment because of self-defeating behavior</td>
</tr>
<tr>
<td>6. Perception of past bad writing experience in which parent hounded student about incompetent writing and formatting skills</td>
<td>7. Personal tragedy affected thoughts, emotions, and goals and could not concentrate on writing assignments</td>
<td>8.Forgot paper was due</td>
</tr>
<tr>
<td>9. Did not like to write</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>
Table 27. Hindrances That Affected Achievement of Competent Academic Writing (continued)

<table>
<thead>
<tr>
<th>Personal</th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td>10. Felt guilty for not spending time with children</td>
<td></td>
</tr>
<tr>
<td>11. Increased stress level when with working with a partner on a writing assignment</td>
<td></td>
</tr>
<tr>
<td>12. Already getting an A in the course led to no desire or motivation to do well on a writing assignment</td>
<td></td>
</tr>
<tr>
<td>13. Too much nursing instructor feedback lowered student self-confidence in which student expected to perform badly on future writing assignments</td>
<td></td>
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</tbody>
</table>

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<thead>
<tr>
<th>Behavioral</th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td>1. Procrastination—Did not start early enough on the writing assignment</td>
<td></td>
</tr>
<tr>
<td>2. Prioritization of APA writing assignments and other nursing program homework</td>
<td></td>
</tr>
<tr>
<td>3. Hectic life in general (school, family, work) made it difficult to get everything done</td>
<td></td>
</tr>
<tr>
<td>4. Student did not have adequate time to work on formal academic writing assignment</td>
<td></td>
</tr>
<tr>
<td>5. Worked too much to support family</td>
<td></td>
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<tr>
<td>6. Did not have time to make revisions</td>
<td></td>
</tr>
<tr>
<td>7. Used too many resources that made it difficult to organize paragraph flow</td>
<td></td>
</tr>
<tr>
<td>8. Did not use enough resources to substantiate ideas</td>
<td></td>
</tr>
<tr>
<td>9. Improper use of grammar</td>
<td></td>
</tr>
<tr>
<td>10. Did not have time to use available resources (writing center, another person to proofread, search for resources)</td>
<td></td>
</tr>
<tr>
<td>11. Student did not read instructions</td>
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</tbody>
</table>

Figure 13 is a model adapted from the reciprocal determinism model (Bandura, 1977, 1986) that identifies the hindrances that entry-level BSN students encountered while trying to achieve competent academic writing. The items are listed in order of priority based on the number of respondents for each. The hindrances were categorized according to environmental, personal, and behavioral influences that are also shown in the reciprocal determinism model.
Figure 13. Adapted Reciprocal Determinism Model for Hindrances that Affected Achievement of Competent Academic Writing for Entry-Level BSN Students.
Table 28 lists 25 key facilitators that affected entry-level BSN students’ performance for achieving competent academic writing in this study. The items are listed in order of priority based on the number of respondents for each. Environmentally related factors include one’s social and physical surroundings and account for more than half (54%) of the facilitators that help entry-level BSN nursing students achieve competent academic writing. About one-quarter (23%) of the facilitators were behaviorally related, indicating that the facilitators were due to skills and actions of the entry-level BSN students. Another one-quarter (23%) of the facilitators were related to personal factors and included one’s thoughts, motivations, perceptions, values, attitudes, emotions, beliefs, and goals.

Table 28. Facilitators That Affected Achievement of Competent Academic Writing

<table>
<thead>
<tr>
<th>Environmental</th>
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</thead>
<tbody>
<tr>
<td>1. Positive influences from junior high and high school teachers</td>
</tr>
<tr>
<td>2. Past writing experiences in junior high and high school</td>
</tr>
<tr>
<td>3. Internet sites—EBSCOhost, BibMe.com, Purdue Owl</td>
</tr>
<tr>
<td>4. Peers/friends/parents/siblings</td>
</tr>
<tr>
<td>5. College textbooks and college-level writing experiences</td>
</tr>
<tr>
<td>6. College’s writing center</td>
</tr>
<tr>
<td>7. Library/librarian</td>
</tr>
<tr>
<td>9. Scholarly resources/journal articles</td>
</tr>
<tr>
<td>10. Nursing education instructors advice and feedback</td>
</tr>
<tr>
<td>11. Access to nursing education instructors by e-mail, phone calls, and texting</td>
</tr>
<tr>
<td>12. Grading criteria for writing assignments</td>
</tr>
<tr>
<td>13. Course scheduling for summer course to lighten course load for fall semester</td>
</tr>
<tr>
<td>14. Partner to work with on writing assignment</td>
</tr>
</tbody>
</table>
Table 28. Facilitators That Affected Achievement of Competent Academic Writing (continued)

<table>
<thead>
<tr>
<th>Personal</th>
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</thead>
<tbody>
<tr>
<td>1. Increased interest on topic generates enthusiasm and motivation to do well and succeed on the writing assignment</td>
</tr>
<tr>
<td>2. Positive attitude, strive for excellence</td>
</tr>
<tr>
<td>3. Motivated to stay focused on task</td>
</tr>
<tr>
<td>4. Desired to write well to enhance communication skills</td>
</tr>
<tr>
<td>5. Use of self for great ideas for writing assignment, for proofreading, and to make personal APA template from previous writing assignments</td>
</tr>
<tr>
<td>6. Remembered past bad writing experiences and takes measures to not experience the bad experiences again</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Behavioral</th>
</tr>
</thead>
<tbody>
<tr>
<td>1. Used time management strategies (both hard copy and digital personal planners) to get things done ahead of time</td>
</tr>
<tr>
<td>2. Need to be financial responsible because student is paying for college</td>
</tr>
<tr>
<td>3. First-hand experiences helped to increase knowledge on a topic made it easier to write about that topic</td>
</tr>
<tr>
<td>4. Used computer and access to unlimited Internet resources</td>
</tr>
<tr>
<td>5. Always submitted something by due date regardless if work was good or bad to ensure that points are earned and not deducted for late assignment</td>
</tr>
</tbody>
</table>

Figure 14 is a model adapted from the reciprocal determinism model (Bandura, 1977, 1986) that summarizes the facilitators that entry-level BSN students encountered while trying to achieve competent academic writing. The items are listed in order of priority based on the number of respondents for each.
### Environmental factors
1. Positive influences from secondary teachers
2. Past writing experiences in junior high and high school
3. Internet sites—EBSCOhost, BibMe.com, Purdue Owl
4. Peers/friends/parents/siblings
5. Scholarly resources—Hard copies and online copies
7. Writing center
8. Library/librarian
9. College textbook and college-level writing experiences
10. Partner to work with on writing assignment
11. BSN instructors advice and feedback
12. Easy communication access to BSN instructors
13. Nursing program grading criteria for writing assignments
14. Course scheduling for summer course to lighten next course load

### Personal factors
1. Increased interest on topic generates enthusiasm and motivation to do well and succeed on the writing assignment
2. Positive attitude, strive for excellence
3. Motivated to stay focused on task
4. Desires to write well to enhance communication skills
5. Use of self for great ideas for writing assignment, for proofreading, and to make personal APA template from previous writing assignments
6. Remembers past bad writing experiences and takes measures to not experience the bad experiences again

### Behavioral factors
1. Use of time management strategies (both hard copy and digital personal planners) to get things done ahead of time
2. Need to be financially responsible because student is paying for college tuition
3. First-hand experiences helped to increase knowledge on a topic made it easier to write about that topic
4. Always submit something by due date regardless if work is good or bad to ensure that points are earned and not deducted for late assignment

Figure 14. Adapted Reciprocal Determinism Model for Facilitators that Affected Achievement of Competent Academic Writing for Entry-Level BSN Students.
Figures were designed and adapted from the reciprocal determinism model (Bandura, 1977, 1986) to display the summarized results and identify data that answered the qualitative research subquestion about resources, events, issues, and relationships that significantly impacted entry-level BSN students’ quest to achieve competent academic writing. Figure 15, adapted from the reciprocal determinism model (Bandura, 1977, 1986), lists the resources that significantly impacted entry-level BSN students’ quest to achieve competent academic writing. Inter-relationships of the factors are represented. The items are listed in order of priority based on the number of respondents for each.
Significant Resources

Environmental factors
1. Writing/grammar classes in secondary education
2. Websites (EBSCOhost, BibMe.com., Purdue Owl, YouTube videos)
3. Personal computer
4. Friends and peers
5. Family (parental influence, spouse)
6. Sample papers
7. College textbooks, APA manual, and scholarly resources
8. Library/librarian
9. Writing center
10. Detailed grading criteria/guidelines
11. Supportive nursing professors who proofread paper, provided feedback on paper, and provided contact information
12. Scaffolded assignments

Personal factors
1. Positive attitude
2. Persistence
3. Motivation
4. Personal goals
5. Student’s inherent abilities to generate great ideas for the paper and ability to do own research
6. Self-reliance on known skills

Behavioral factors
1. Developed a personal/computerized planner
2. Remembered past good writing experiences and applied to current writing assignment
3. Read peer’s paper
4. Scheduled summer courses to free up busy fall semester

Figure 15. Resources that were Significant for Entry-Level BSN Students to Achieve Competent Academic Writing.
Figure 16, a model adapted from the reciprocal determinism model (Bandura, 1977, 1986), lists the events, issues, and relationships that significantly impacted entry-level BSN students’ quest to achieve competent academic writing. Inter-relationships of the factors are represented. The items are listed in order of priority based on the number of respondents for each.
### Significant Events, Issues, and Relationships

#### Environmental factors
1. Helpful advice from high school and college teachers
2. Lack of formal APA education and APA manual hard to understand
3. Sibling/parental support, advice, and feedback
4. Scholarly resources
5. Library orientation and quiet library environment
6. Very difficult nursing program in general
7. Occasionally, APA feedback from nursing instructors was inconsistent with AP manual
8. Nursing program instructions and grading rubric not clear
9. Some nursing instructors would not provide assistance
10. Nursing program instructor assigned partners for writing assignment
11. Primary care provider for minor children; working spouse and working student
12. Untimely feedback from nursing program instructor
13. Technology problem when Internet would not work
14. Family emergency/death, very ill sibling
15. Instructor leniency on due date for assignment led to procrastination
16. Observation of younger generations who have difficulty writing and communicating
17. Parent’s personal and family struggles affect student’s ability to succeed
18. Student did not read instructions
19. Smaller populated high school—Lacked classes on grammar and writing
20. Largely populated high school—English class taught writing

#### Personal factors
1. Personal goal is to succeed
2. Very interested in the writing assignment topic
3. Witnessed a nursing care incident while working as a nursing assistant and became very frustrated about the patient’s outcomes, which help motivate the student to do research on the incident and determine methods to ensure more positive outcomes
4. Decreased self-confidence and motivation to do paper
5. No motivation to do assignment due to suffering through a personal tragedy
6. Negative self-talk
7. An ‘A’ student will not work so hard on a writing assignment

#### Behavioral factors
1. Arranged homework priorities to avoid procrastination
2. Poor time management with doing a writing assignment during finals week
3. Difficult to transition to scholarly writing from creative writing
4. Difficult to paraphrase and use direct quotes according to APA format criteria
5. Hectic life in general—nursing school, kids, jobs
6. Hard to organize thoughts and resources in paragraph form
7. Struggled with finances by working two jobs as a nursing student
8. Too many or not enough resources
9. Wrote a 10-page high school paper in one night, which was a bad experience
10. An ‘A’ student procrastinated with a critical writing assignment and earned a C on the assignment and a ‘C’ as the final course grade
11. Became ill a week before writing assignment was due and could not complete paper

Figure 16. Events, Issues, and Relationships that were Significant for Entry-Level BSN Students to Achieve Competent Academic Writing.
In summary, a variety of resources, events, issues, and relationships were identified from the focus group interviews that facilitated and hindered this cohort of entry-level BSN students’ achievement of competent academic writing. Further research may show that nurse educators can proactively assist entry-level BSN students if educators consider entry-level BSN students’ perceptions of what they need to attain writing self-efficacy conducive for achieving competent academic writing.

**Discussion of Qualitative Findings**

The findings revealed that the central qualitative research and subquestion were adequately answered by data retrieved from the three focus group interviews. A variety of resources, events, issues, and relationships were identified that facilitated and hindered entry-level BSN students’ abilities to achieve competent academic writing.

The resources, events, issues, and relationships that facilitated and hindered entry-level BSN students’ achievement of competent academic writing were grouped into three categories, which were supported by the three factors shown in the reciprocal determinism model inherent in the self-efficacy theory (Bandura, 1977, 1986): environmental-related factors, personal-related factors, and behavioral-related factors, that all interact reciprocally with each other. The three categorical influences impacted writing self-efficacy as perceived by this cohort of entry-level BSN students. Discussion regarding the findings for the two qualitative research questions included what the results meant in general, what the results meant in relation to nurse educator practice, and how the results supported the self-efficacy theory and the reciprocal determinism model (Bandura, 1977, 1986).
Qualitative Central Research Question

The qualitative central research question was as follows: What has hindered or facilitated past writing experiences of entry-level BSN students? The research question was answered adequately. Different factors were identified for the hindrances and for the facilitators. Discussion was based on the qualitative findings, which were expressed in figures that identified the hindrances and facilitators in relation to the three factors of the reciprocal determinism model (Bandura, 1977, 1986).

Hindrances. The hindrances were divided into the three main themes of environmental factors, personal factors, and behavioral factors. All of the factors affected each other, impacted the achievement of competent academic writing for entry-level BSN students, and supported the reciprocal determinism model (Bandura, 1977, 1986). Environmental hindrances included prior writing education in high school and college, nursing educators, nursing program influences, family emergencies, and technology problems. Personal influences included lack of writing interest, decreased motivation, poor attitudes, forgetfulness, guilt, increased stress, and difficulty understanding APA criteria. Behavioral influences included time management issues, hectic daily schedule, and writing and grammar abilities. Data results from this study might inform nurse educators about the hindrances that negatively affect entry-level BSN students’ writing self-efficacy.

Environmental factors. Environmental hindrances included prior writing education in high school and college, nurse educators, nursing program influences, family emergencies, and technology problems.
Prior writing education in high school and college. Interviewed participants explained that they had minimal, if any, exposure to APA formatting guidelines in high school or in the beginning years of college. Additionally, participants explained that the writing courses focused on literature and short essay questions, which were not perceived as helpful by the BSN students. The focus was primarily on Modern Language Association (MLA) formatting and creative writing. Therefore, as BSN students, participants were expected to already know APA, which was affirmed in the literature by Boyer (1989) and Giddens and Lobo (2008), who indicated that competent academic writing was an essential skill that entry-level BSN students were expected to demonstrate in nursing education. The interviewed participants in this study explained that the APA manual was used as a learning resource, but was very difficult to understand.

Valkenburg’s (n.d.) study and that of Salahu-Din et al. (2008), indicated that college students were not beginning their nursing programs adequately prepared by their high school and college writing courses to do the academic writing that would be required. The students lacked skills in critical thinking, basic grammar usage, spelling, punctuation, and capitalization (National Center for Education Statistics, 2012). Students’ low self-confidence levels may be associated with minimal opportunities to have practiced academic writing in prior collegiate courses. Consequently, nurse educators become very frustrated because nursing students cannot meet writing expectations in the nursing program. A summary of the literature review (O’Neill, 2012; Bickes & Schim, 2010; Dick & Wills, 2001; Lloyd, 2007; Luthy et al., 2009; Roberts & Goss, 2009; Slimmer, 1992) indicated that most of the writing education interventions that were implemented to help nursing students write more competently were based on
general observations that nursing students could not meet writing expectations and that nurse educators became very frustrated about BSN students’ writing incompetencies.

Data resulting from this study might inform nurse educators about some negative influences that inadequate prior writing education in high school and college have on achievement of writing competency in nursing education. Accountability for high school and junior high education is a critical concern because, according to the interviewed participants, some of them were not prepared to write at the collegiate level upon high school graduation. The high school accountability issue is a state-level concern, varies from state to state, and may inspire the need for nurse educators to become politically active regarding high school accountability with student achievement of academic writing competencies. Some states are beginning to incorporate standardized college-level assessments for high school students, but not necessarily with immediate implementation, Illinois’s for an example, begins with the 2014-2015 academic year (Illinois Department of Education, 2013). Prior to the 2015 assessment data results, high school students could benefit from grammar and writing courses that focus on multiple writing-intensive assignments and increased student accountability with completing competent academic writing assignments.

Larsen and Reif (2011) suggested that multiple experiences and immersion into a particular skill increased self-efficacy, which is essential for BSN students so that they can feel confident with writing abilities and potentially be more successful with achieving competent academic writing. The findings from this study might inform nurse educators that it is essential for collegiate writing courses to be writing intensive so that BSN
students can gain multiple academic writing experiences and achieve high levels of writing self-efficacy.

Awareness of this study’s data might also encourage nurse educators to ensure that writing-intensive courses are included as prerequisites to nursing education programs. Intensive collaboration with the writing departments of colleges and universities could safeguard the rigorous quality of collegiate writing courses. In order to help entry-level BSN students achieve competent academic writing, the writing education courses need to be writing intensive and focused on basic writing skills and basic APA formatting guidelines.

A helpful resource for BSN students may be the availability of one-hour educational writing sessions within the nursing education program that focus on basic APA formatting guidelines, including correct APA formatting for the title, page, headers, headings, intent citations, and the reference page. This finding was revealed by an interviewed participant and supports the recommendation about the implementation of brief APA educational sessions. The sessions could be mandatory or optional depending on the nursing program’s faculty decision and would assist with increasing BSN students’ understanding of basic writing skills and basic APA formatting. Additionally, a grading rubric specifically for APA formatting could be developed so that BSN students would know precisely what was required of them for achieving competent academic writing in regard to APA formatting criteria.

Scholarly literature (National Center for Education Statistics, 2012; Salahu-Din et al., 2008; Valkenburg, n.d.) has indicated that high schools and colleges are not adequately preparing students to academically write at a competent level. The problem
becomes critical when BSN students are not able to demonstrate competent academic writing in nursing education. Students’ self-confidence levels may be low, which has the potential of causing them to be less self-efficacious with achievement of competent academic writing. Awareness of the qualitative data and potential collaborative solutions might inform high school and collegiate academic stakeholders about the writing competency situation of entry-level BSN students.

_Nurse educators and nursing program influence._ Some emerging themes about hindrances that the subjects expressed were focused on nurse educators and nursing programs. Expectations were unclear or absent for the assignment grading rubrics and instructions. Inconsistent information regarding APA formatting guideline was given by nurse educators, which suggested to the participants that nurse educators had limited APA knowledge. Additionally, participants revealed that some nurse educators provided minimal support, set lenient due dates for writing assignments, and provided untimely feedback on prior writing assignments.

Writing partners for academic writing assignments had mixed reviews by the participants. Working with a partner on a writing assignment was sometimes beneficial, but it was considered a potential hindrance because students were unsure of the other student’s writing competence and felt that they needed to check each other’s work, which was time-consuming and very stressful.

Awareness of the qualitative findings might motivate nurse educators to explore options for increasing entry-level BSN students’ writing self-efficacy about the hindrances involving nurse educators and nursing programs. The participants voiced desires concerning the need for definite due dates, concise instructions, and clear grading
rubrics designed for both assignment content and APA criteria, which would potentially help increase the students’ chances of being successful and competent with writing assignments. Clear and consistent timely feedback was a request voiced by participants. Nurse educators could address this issue by considering the establishment of criteria for return dates of assignment feedback.

This study supports the need for faculty to take initiatives for timely return of writing assignments. Two or more nurse educators could grade the same writing assignment as long as the same grading rubric was used that had an established inter-rater reliability. Scoring could be compared to determine consistencies and inconsistencies with grading. A high inter-rater reliability would ensure that students’ writing assignments were graded consistently and precisely.

Findings from this study might encourage nurse educators to consider faculty development workshops focused on APA formatting guidelines so that faculty could be assured of following consistent grading practices for APA criteria (Bickes & Schim, 2010). Lastly, findings from this study might encourage nurse educators to increase availability of student support and advisement and to refer students to a writing expert for supplementary writing education.

Technology problems. The emerging themes about hindrances that the subjects voiced concerning technological problems focused on intermittent Internet connectivity, which affected access to online research and retrieval of previously completed homework. Data resulting from this study might motivate nurse educators to advise students to consider an alternative plan for Internet access during instances of no Internet access. Alternative plans could include college-based computers, friend’s or family’s
computer, or a network Internet access card. Additionally, students may be informed to save writing assignments to secondary and tertiary resources in case of severe technology problems in which the computer malfunctioned. Examples of secondary and tertiary resources include a flash drive, or an external drive, and an e-mail of the writing assignment to the student’s e-mail address. Having alternative plans in place for Internet access and secondary and tertiary resources for saving writing assignments have the potential of helping relieve students’ stress levels. Decreasing negative environmental influences supports the environmental factor of the reciprocal determinism model (Bandura, 1977, 1986) in which environmental factors reciprocally influence personal factors and behavioral factors.

**Personal.** Personal influences included lack of writing interest, decreased motivation, poor attitudes, forgetfulness, guilt, increased stress, and difficulty understanding APA criteria.

**Decreased writing interest, motivation and self-confidence, and poor attitudes.** The emerging themes about hindrances that the subjects expressed were focused on decreased writing interest, decreased motivation, self-confidence, and poor attitudes. Interviewed participants explained that sometimes they had no interest or motivation to write and exhibited poor attitudes about not wanting to write. Additionally, participants voiced that if they were writing on topic that was interesting to them, they were more apt to enjoy the writing assignment and learn from the information. To address the hindrance, awareness of the findings in this study might encourage nurse educators to consider allowing students to choose a topic of interest for a writing assignment. Bruning et al. (2012) indicated that psychological barriers and other experiences may influence
achievement of competent writing and that writing was a difficult cognitive task that developed slowly over time. Additionally, the finding supported the personal factor influences of the reciprocal determinism model (Bandura, 1977, 1986) in which some students’ perceptions may be perceived as negative influences and reciprocally affect the other factors.

*Lowered self-confidence, perception of bad experience.* Interviewed participants identified that excessive constructive feedback on a writing assignment and negative past writing experiences caused them to experience decreased self-confidence and increased fears about performance on future writing assignments. Lowered self-confidence has the potential to cause lowered self-efficacy and supports Pajares’s (2003) assertions that self-efficacy influences writing outcomes and predicts students’ writing performances. Bandura’s (1977, 1986) self-efficacy construct indicated that individual behavior, personal factors, and environmental influences all interact to impact the degree of self-efficacy. High self-confidence about accomplishing a specific task translates into attainment of positive outcomes, an increase in self-efficacy, and achievement of goals (Bandura, 1977, 1986). The opposite premise may also be considered. Lowered self-confidence about accomplishing a task may translate into lowered self-efficacy and the potential of not attaining positive outcomes. Therefore, data from this study might encourage nurse educators to consider negative past experiences of BSN students and the consequences of those experiences on writing self-efficacy and writing competence. Provision of emotional support to BSN students may be necessary in order to help them focus confidently on future positive writing experiences.
**Increased stress and forgetfulness.** Interviewed participants revealed that excessive stress from many environmental demands caused them to forget assignments. Data from this study might encourage nurse educators to consider the negative effects of increased stress levels on BSN students’ academic performances. Robotham (2008) suggested that stress was increasing among students in higher education, especially in first-year students, and that excessive stress may lead to negative outcomes and unhealthy coping behaviors. Key roles of nurse educators and nursing program staff included the provision of referral resources to help at-risk students cope with stress in a healthy manner and learn and practice stress management strategies (Robotham, 2008).

**Difficulty understanding APA formatting.** Interviewed participants disclosed repeatedly that the APA manual was very difficult to understand and follow, especially in regard to citations for paraphrased information and direct quote information. Data from this study might motivate nurse educators to consider implementation of writing education classes within the nursing education program to help inform and demonstrate to BSN students about the correct application of APA formatting criteria. Morse (2009) indicated that a need existed for enhanced education of APA formatting guidelines for nursing students. In order to evaluate the effectiveness of the writing education, pre-session assessment and post-session evaluation should be incorporated based on the learning outcomes of the strategic writing educational intervention. Assessment could identify what students perceived as areas of improvement in the writing education session, areas of strengths in the writing education session, and overall knowledge base of APA formatting criteria. By working together and communicating together (Morse,
2009), faculty in a nursing program could share responsibilities for writing education and assist nursing students with attaining academic writing competency (Robotham, 2008).

**Behavioral.** Behavioral influences included time management issues, hectic daily schedules, and writing and grammar abilities.

**Time management issues.** Interviewed participants explained that procrastination was a major hindrance because of inefficient prioritization of nursing homework and other environmental responsibilities. Data from this study might encourage nurse educators to consider methods that would help students develop and implement efficient time-management strategies. Counselors may offer time management strategies to students (Jannati et al., 2012; Peyrovi et al., 2009) and nurse educators may reinforce the strategies so that students might expend their energy on academic responsibilities in a positive manner.

**Work, family life, and guilt, personal tragedy.** Interviewed participants revealed that excessive environmental role strains caused guilty feelings and decreased motivation that hindered their ability to achieve competent academic writing. Participants felt guilty about working on a writing assignment when their families needed attention. Data resulting from this study might encourage nurse educators to consider environmental role strains that students may encounter and to be alert to students’ environmental circumstances. Counseling referrals may be necessary to help students cope with environmental role strains. By decreasing environmental stressors, students may be able to focus more intently on BSN education and become competent with nursing skills and tasks, including academic writing. Bruning et al. (2012) indicated that psychological barriers and other experiences may influence achievement of competent writing and that
writing is a difficult cognitive task that develops slowly over time. The finding supports the personal factor influences of the reciprocal determinism model (Bandura, 1977, 1986) in which students’ perceptions of excessive role strain may be perceived as negative influences that reciprocally affect the other factors of the reciprocal determinism model.

*Writing and grammar abilities.* Students who were participants in the study identified that occasionally they had trouble with using too many resources or not enough resources, organizing those resources, and using correct grammar. Additionally, they had difficulty with organizing thoughts and managing the flow of those thoughts in correct paragraph form. This finding regarding organization of thoughts and paragraph flow was a criterion on the writing self-efficacy survey that was quantitatively scored as 8.495 out of 10, the fifth lowest self-efficacy value.

Interviewed participant stated that sometimes they did not read the instructions for the writing assignment, which caused the student to receive a low grade on the writing assignment. The reason for not reading the instructions was not determined. Findings from this study might encourage nurse educators to help students understand the necessity of reading assignment instructions and to ask questions if they do not understand the instructions. Open communication with students might encourage them to feel welcomed to ask questions if they did not understand.

The findings from this study might encourage nurse educators to acknowledge that nursing students struggle with academic writing. They may need additional support and education on the use of scholarly resources and managing and documenting the resources in an academic paper. Referrals to the college writing center and writing tutor may be essential so that willing students may receive individualized writing instruction.
Students may be able to focus more on academics and become competent with academic writing if their stress is reduced. Bruning et al. (2012) indicated that psychological barriers, including stress and other experiences, may impact the achievement of competent writing and that writing is a difficult cognitive task that develops slowly over time. High stress levels affect personal factors of the reciprocal determinism model (Bandura, 1977, 1986) in which students’ perceptions of excessive stress may be perceived as negative influences. The negative impact on personal factors impacted the environmental and behavioral factors of the reciprocal determinism model, which also threatened the attainment of high writing self-efficacy (Bandura, 1977, 1986).

A suggestion made during the focus group interview was that nurse educators should be willing to provide their e-mail address and phone number to students. The contact information would enable students to feel that they have a direct contact with the nurse educator and could ask for additional guidance and support. Students may feel more secure and confident if they know that writing assistance is just a contact away and that their writing-related questions and concerns may be addressed in a timely manner.

**Facilitators.** The facilitators that favorably affected achievement of competent academic writing for entry-level BSN students were divided into three main themes--environmental factors, personal factors, and behavioral factors that are inherent in the reciprocal determinism model (Bandura, 1977, 1986). Environmental facilitators include peers and family, high school teachers and writing experiences, scholarly assets, nurse educators and grading criteria, technology, and college-related resources. Personal factors included self-reliance, positive attitude, increased motivation, and increased interest in topic. Behavioral factors included time management strategies, financial
responsibility, and first-hand experiences. Discussion includes details about what the findings mean relative to nursing education practice.

**Environmental.** Environmental facilitators included peers and family, high school teachers and writing experiences, scholarly assets, nurse educators, nursing program grading criteria, technology, and college-related resources. According to the students who participated in this research study, the environmental facilitators were considered helpful resources and alleviated stress while they were trying to achieve competent academic writing. Data from this study might inform nurse educators that students may be able to focus more on academics and become more competent with academic writing if stress is reduced. Bruning et al. (2012) indicated that psychological barriers and other experiences might affect the achievement of competent academic writing. In addition, students’ stress levels affect the personal factors of the reciprocal determinism model (Bandura, 1977, 1986) in which students’ perceptions of little stress may be perceived as a positive influence and favorably impact the environmental and behavioral factors of the reciprocal determinism model.

**Peers and family.** Interviewed participants disclosed that they relied heavily on their peers, friends, spouse, and parents to proofread their writing assignments and to provide constructive criticism regarding grammar, sentence and paragraph structure, organization of thoughts, and resource referencing. Using friends and family for writing support was convenient and created an environment with little stress.

Data from this study might inform nurse educators that BSN students do consult with family and friends for academic writing assistance because they are readily available and easily accessible. Awareness of the findings from this study might inspire nurse
educators to consider making themselves readily available and easily accessible so that nursing students may contact them with questions or concerns.

**High school teachers and writing experiences.** Some interviewed participants stated that their high school teachers were “amazing” and integrated a variety of writing assignments into high school grammar courses. According to the interviewed participants, if the high school had a large student population, the students were provided a higher quality of education, more so than if students attended a high school with a small student population.

**Scholarly assets.** Interviewed participants revealed that scholarly assets included college textbooks, digital and hard copy journal articles, the APA manual, other resource books, and a book entitled *English for Dummies*. Data resulting from this study might inform nurse educators as to which resources were used by BSN students to better understand key concepts, basic writing skills, and APA formatting. Nurse educators may be able to ensure that students can more easily access the resources by providing a list of references on course syllabi and by having some of the resources on reserve in the library.

**Nursing educators and grading criteria.** Interviewed participants explained that they very much appreciated nurse educators who freely gave advice and provided timely feedback, offered their contact information to students, supplied well-defined grading rubrics and instructions, and sometimes incorporated a working partner for writing assignments. The partner intervention had mixed reviews: some students viewed it as a hindrance, while others viewed a partner as a facilitator. Those who viewed a writing partner as a facilitator revealed that they felt like they could rely on their partner for
concepts they did not understand and for additional support during the writing process. The presence of a writing partner provided a less stressful situation for the students as they completed the assignment because the students could divide the workload.

Data resulting from this study might encourage nurse educators to incorporate the helpful or facilitating factors to promote the achievement of competent writing into nursing education programs. Nurse educators could consider soliciting students’ opinions regarding having a writing partner for academic writing assignments. A class poll could be taken to determine if nursing students would consider having a writing partner for an academic writing assignment.

Interviewed participants stated that sometimes nurse educators would offer to proofread students’ papers, but that was more of the exception rather than the norm. Students were very appreciative of nurse educators who proofread their papers and provided oral or written feedback. Nurse educators’ schedules may be very demanding and the time needed to proofread students’ papers for content and grammar may not be a feasible expectation. Findings from this study might encourage nurse educators to consider briefly reviewing students’ papers for content if asked by the student, but that students may be referred to writing experts for review of writing mechanics. Students should be encouraged by nurse educators to use the college’s writing center. Staff from the writing center could be invited to nursing education classrooms in order to introduce themselves and provide an overview of the writing center’s services.

*Technology.* Students who participated in this study identified that they frequently used technological resources, including the Purdue Owl website, EBSCOhost, and BibMe.com. The students did not mention using college-sponsored web links. It
was not determined if nursing programs have helpful online writing-related resources. If college-sponsored websites or links were available, it was not determined that students used them. The Purdue Owl site was mentioned very frequently as being a helpful resource with learning how to do APA formatting. EBSCOhost was helpful with finding topic-related articles, and BibMe.com was helpful for correctly citing references in APA format. However, some students explained that they were not able to comprehend correct APA citation procedures due to their extensive reliance on the BibMe.com site. Data from this study might help nurse educators to understand that nursing students may be proficient with using technological resources for academic writing, but students may need additional education on APA mechanics.

**College-related resources.** College-related resources included the writing center, the library, the librarian, and the option to schedule writing-intensive courses during the summer. Interviewed participants revealed that the writing center was helpful with learning basic writing skills but not helpful with APA formatting. The library and librarian were very helpful because of availability and easy accessibility of resources, and the quiet library environment enabled students to focus on the writing assignment without distractions.

Data from this study might encourage nurse educators to collaborate with the writing center staff to determine the possibility of incorporating APA education into the writing center’s protocol for assisting students. Even without the writing center resource, the subjects in this study reported that the college-based library was conducive for learning and academic writing success.
**Personal.** Personal factors included self-reliance, positive attitude, increased motivation, and increased interest in topic. According to the students who participated in this research study, the facilitators of personal factors were considered helpful resources and alleviated some of the stress while they tried to achieve competent academic writing. Data from this study might inform nurse educators that students may be able to narrow their focus on academics and become more competent with academic writing if stress is reduced. Bruning et al. (2012) indicated that psychological barriers and other experiences might affect the achievement of competent academic writing. In addition, students’ stress levels affect the personal factors of the reciprocal determinism model (Bandura, 1977, 1986) in which students’ perceptions of decreased stress may be perceived as positive influences and favorably impact the environmental and behavioral factors of the reciprocal determinism model.

*Self-reliance and positive attitude.* Interviewed participants disclosed that they had learned from positive past writing experiences, and therefore, were self-reliant with their prior knowledge because they could refer back to prior successful assignments. Students who participated in this research study were able to devise personal APA-formatted templates based on prior successful writing assignments. The subjects who participated in this research study believed that they were capable of originating innovative ideas for writing assignments.

Some subjects exhibited positive attitudes, depending on the nature of the past experiences and revealed that positive attitudes translated to high self-confidence that they felt helped them achieve competent academic writing (Bandura, 1977, 1986; Pajares, 2003). Challenges appeared when some subjects did not exhibit positive attitudes due to
negative past experiences and negative self-talk. Subjects who faced the challenges required additional educational support, emotional support, and positive experiences in nursing education in order to achieve competent academic writing.

Pajares (2003) indicated that self-efficacy influenced writing outcomes and predicted students’ writing performances. Bandura (1997) indicated that having a high confidence level about accomplishing a specific task subsequently translated into increased self-efficacy. Scholarly literature (Clark & Dodge, 1999; Ergul, 2004; Kirk, 2012; Laschinger, 1996; Pajares, 1996, 1997, 2003; Tresolini & Stritter, 1994) reported that writing self-efficacy is directly proportional to achievement of competent academic writing. Therefore, a goal of achieving competent academic writing for BSN students may be attainable by increasing writing self-efficacy, increasing the prevalence of the facilitators, and decreasing the hindrances as reported by the subjects in this study.

*Increased motivation and interest in topic.* Interviewed participants explained that they excelled and had the motivation to want to excel on writing assignments if they exhibited an interest in the writing assignment topic. Subjects also disclosed that they desired to write competently in order to enhance their general communication skills necessary for professional enhancement.

Data resulting from this research study might encourage nurse educators to consider having students write about a topic of their interest within context of the nurse educators’ guidelines so that the students’ motivation and desire to succeed would be high, and which would subsequently enhance the prevalence of competent academic writing. The finding about enhanced oral and written communication was supported by the AACN (2008) who indicated that excellence in written and oral communication was
essential for improving the achievement of patient-care outcomes, for the advancement and integration of evidence-based practice, and for the dissemination of research findings.

**Behavioral.** Behavioral factors included time management strategies, financial responsibility, and first-hand experiences. According to the students who participated in this research study, the facilitators that were thematically categorized as behavioral factors were considered helpful resources and alleviated stress while trying to achieve competent academic writing. Data from this study might inform nurse educators that students may be able to narrow their cognitive focus on academics and become more competent with academic writing if stress is reduced. Bruning et al. (2012) indicated that psychological barriers and other experiences might affect the achievement of competent academic writing. Students’ stress levels affected the personal factors of the reciprocal determinism model (Bandura, 1977, 1986) in which students’ perceptions of little stress may be perceived as positive influences and favorably impact the environmental and behavioral factors.

**Time management strategies.** Interviewed participants explained that a facilitator to academic writing included students’ use of efficient time management strategies such as personal or digital planners so that specific dates and times could be allocated to completing and submitting homework assignments by the due date. Subjects also revealed that they always submitted “something” by the due date, even if it was not their best work, so they could be assured of earning some points for the assignment. Data from this study might inform nurse educators that nursing students may need to be
reminded about their time-management responsibilities and accountabilities regarding due dates and consequences for submitting late assignments.

*Financial responsibilities.* Some interviewed participants disclosed that they were financially responsible for their nursing education expenses, which motivated them to be competent and to earn excellent grades because, in their minds, time was equivalent to money. This philosophy was different for students who were not financially responsible for their education. Students who were not financially responsible may not have been serious about their academic courses, may not be strive for competence, and may not have been motivated to succeed.

Schwartz’s (2009) contention that the intrinsic motivation factor of financial responsibility coupled with the desire to succeed academically will increase one’s overall motivation was supported by the opinions voiced by the interviewed participants. Data from this study might encourage nurse educators to consider referring nursing students to the financial aid office to investigate financial support services. If financial worries are decreased, students’ stress levels may also decrease. Students might be able to narrow their focus on academic success in nursing education, which supports Bruning et al. (2012) who indicated that psychological barriers impact writing achievement and Bandura (1977, 1986), who indicated that students who have a perception of decreased stress may achieve writing self-efficacy and competent academic writing.

*First-hand experiences.* Interviewed participants identified that in their jobs as nursing assistive personnel, they had the opportunity to be involved in first-hand patient care experiences that enabled them to write better about certain topics. Data resulting from this study might encourage nurse educators to engage in narrative pedagogy and
allow students to openly explore and interpret their first-hand experiences. Communicating with others about first-hand experiences may help increase conceptual learning that can then be applied to successful completion of academic writing assignments (Mitchell, Jonas-Simpson, & Cross, 2013). Kolb’s experiential learning cycle (McLeod, 2013) also indicated that learning is enhanced by having a first-hand experience, reflecting on that experience to increase conceptualization, and then working to actively experiment with that experience, which could include the active process of writing about the experience.

In summary, a variety of facilitators related to environmental factors, personal factors, and behavioral factors were identified that were considered helpful for entry-level BSN students trying to achieve competent academic writing. All of the influences affected each other related to the reciprocal determinism model (Bandura, 1977, 1986) and influenced nursing student success with achieving competent academic writing. Findings from this study might influence nurse educators to consider the facilitators that assisted students in this study with the achievement of competent academic writing.

**Qualitative Research Subquestion**

The qualitative research subquestion asked about the resources and events, issues, and relationships that affect entry-level BSN students’ achievement of competent academic writing. A summary of findings is documented in visual format and identifies the resources according to the three different themes of the reciprocal determinism model (Bandura 1977, 1986): environmental factors, personal factors, and behavioral factors. Discussion includes details about what the findings mean relative to nursing education practice.
Resources. The resources that were significant for entry-level BSN students to achieve competent academic writing were divided into three main themes: environmental factors, personal factors, and behavioral factors that are inherent in the reciprocal determinism model (Bandura, 1977, 1986). All three themes affect the achievement of competent academic writing. Environmental factors included prior education, nursing educators and nursing program influences, collegiate resources, friends and family, and technology. Personal factors included attitude, persistence, motivation, and setting of personal goals. Behavioral factors included students’ inherent abilities, time management, past writing experiences, and course scheduling.

Environmental. Environmental factors included prior education, nursing educators and nursing program influences, collegiate resources, friends and family, and technology.

Prior education. Students identified that writing, grammar, and English classes in secondary education (high school and junior high school) were usually beneficial for applying writing abilities to college writing courses. This finding supports The National Commission on Writing for America’s Families, Schools, and Colleges (2006), which indicated that writing classes in high school and college settings did not provide students with writing practice time nor were students assigned compositions as homework. The lack of student writing experience with formal writing negatively influenced writing self-efficacy and the development of competent academic writing.

The data resulting from this study might convince nurse educators to reconsider admission criteria regarding writing abilities to ensure that qualified students are being admitted into the nursing program. Otherwise, if unqualified nursing students are
admitted into a nursing program, those students have the potential to struggle with academic content and writing assignments and not be successful.

**Nurse educators and nursing program influences.** The interviewed participants identified several factors that related to nurse educators and nursing programs in general that were helpful resources for successfully completing an academic paper. It was helpful when nurse educators proofread a student’s paper and provided critical feedback. It was also helpful if nurse educators provided e-mail and cell phone contact information.

Data resulting from this study might prompt nurse educators to provide only content feedback on academic assignments as requested by the students. Students may be referred to writing experts who may provide substantive individualized tutorial support regarding the students’ writing abilities. Nursing educators could make it a mandatory requirement for at-risk students to seek writing tutorial assistance. If the tutoring was mandated by the nurse educator, an accountability and communication process would need to be formalized to ensure that the student, nurse educator, and tutor were informed of the student’s writing needs and progress.

Scaffolding assignments was mentioned frequently as an alternative to completing an entire paper as one large assignment. Subjects liked the idea of breaking down large writing assignments into several small assignments that helped the writing task seem less formidable. An example of a scaffolded assignment is one in which different sections of the paper were due at incremental times until the entire paper was completed.

Another helpful resource was the provision of sample papers by the nurse educator so students could have a visual aid to use as a template or guide for the writing assignment. Nursing students learn by different modes, including visual, auditory, and
kinesthetic modes (Alkhasawneh, 2013). Therefore, student learning can be enhanced by providing a visual component such as a sample paper. Subjects also voiced that they benefitted from having detailed grading criteria and guidelines, which helped them to include all of the necessary requirements in their paper.

Collegiate resources. Interviewed participants identified that some collegiate resources were helpful, including college textbooks, the APA manual, digital and hard copies of scholarly literature, the library and librarian, and the writing center. Data from this study might inform nurse educators that collegiate resources could be made conveniently available for BSN students so that they may take advantage of the resources to help increase competent academic writing. This finding supports the environmental factor of the reciprocal determinism model (Bandura, 1977, 1986). A positive influence and decreased stress perception in the area of environmental collegiate resources could positively impact the other two areas of personal factors and behavioral factors. Decreased stress allowed for the development and attainment of writing self-efficacy.

Friends and family. Subjects who participated in this research study stated that friends, peers, parents, and spouses were considered helpful resources because “another set of eyes” could proofread papers for grammatical errors, paragraph flow and organization, and maybe for APA errors if the proofreader was proficient with APA formatting. Data resulting from this study might inform nurse educators that support systems are used by nursing students to help ensure achievement of competent academic writing. For those who do not have an adequate support system, alternative resources may need to be used for assignment revisions.
Technology. Interviewed participants stated that technological resources such as websites (Purdue Owl, BibMe.com, EBSCOhost, and YouTube videos) and personal computers were considered helpful resources. YouTube videos were helpful because of the visual formatting that helped some students understand the APA concepts better than just by reading about them in the APA manual. Subjects revealed that it was convenient to access digital scholarly journals on their personal computer. Data resulting from this study might encourage nurse educators to consider using YouTube videos that visually demonstrate APA formatting concepts. Personal laptops and computers were also considered beneficial, but not all students may be able to have access to a personal computer. Therefore, alternative computer resources would be necessary, such as computers in the college library or in a local library.

Personal. Interviewed participants stated that positive attitude, persistence, motivation, personal goals, and personal intrinsic abilities were helpful resources when trying to achieve competent writing. The contrary may also be true: Not having positive personal skills can lead to frustration and decreased writing self-efficacy. Pajares (2003) indicated that self-efficacy influenced writing outcomes and predicted students’ writing performances. Bandura (1997) indicated that exhibiting a high confidence level about accomplishing a specific task subsequently translated into increased self-efficacy. Scholarly literature (Clark & Dodge, 1999; Ergul, 2004; Kirk, 2012; Laschinger, 1996; Pajares, 1996, 1997, 2003; Tresolini & Stritter, 1994) reported that writing self-efficacy is directly proportional to achievement of writing competencies.

Data resulting from this study might encourage nurse educators to consider assessing BSN students’ writing self-efficacy by using the writing self-efficacy scale
(Shell, Murphy, Bruning, 1989) used in this study. The writing self-efficacy survey could identify the writing skills with which the students did not feel confident with successfully completing. Writing education could be offered on basic grammatical writing skills to help increase students’ writing self-efficacy.

Findings reported in this study might encourage nurse educators to consider implementing a variety of techniques to increase writing self-efficacy and could include the following: face-to-face activities, question and answer sessions in the classroom setting, collaborative learning, conceptual problem solving, and use of electronic applications (Fencl & Scheel, 2005; Kirk, 2012; Schunk, 1991). Additionally, writing experts in a writing lab (Slimmer, 1992) could provide individual writing assistance. The goal of the educational strategies is to increase writing self-efficacy which has the potential to improve achievement of competent academic writing.

**Behavioral.** Behavioral factors included time management strategies, financial responsibility, and first-hand experiences.

**Time management.** Subjects who participated in this study stated that efficient time management was a helpful resource and included the following: personal or computerized planners to ensure homework prioritization and course schedules with due dates provided by nurse educators. Data resulting from this study might encourage nurse educators to consider students’ stress levels and time-management methods, and to inform students about their role with being accountable and responsible for submitting assignments by the due date. Nurse educators could assist students with effective time management skills or referrals could be made to the college’s social worker. By decreasing students’ stress levels related to time management, students’ self-efficacy may
increase, and they may feel empowered to focus more on achieving competent academic writing. Bruning et al. (2012) indicated that psychological barriers and other experiences may impact the achievement of competent writing and that writing was a difficult task that develops slowly over time.

Past writing experiences and reading a peer’s paper. Interviewed participants stated that past successful writing experiences and reading a peer’s paper for a current assignment were helpful resources because they could apply previously learned experiences to current writing assignments. In addition, by reading a peer’s paper, students could determine if their writing assignments were congruent with the pre-established guidelines and instructions.

Although the subjects were positive about opportunities that benefitted from reading other students’ papers, that strategy also presents the potential for academic dishonesty. Data from this study might encourage nurse educators to consider the prospect of academic student deception. Plagiarism is an academic and ethical concern for higher education and is a necessary consideration in nursing education (Fowler & Davis, 2013). Therefore, plagiarism might be considered a student educational topic and nursing program policy with zero tolerance implications.

Turnitin (iParadigms, LLC, 2013), or a comparable computerized plagiarism program, could be incorporated as a required element for writing assignments in which potential acts of plagiarism could be detected electronically. After submitting a writing assignment to a computerized plagiarism program, students would be able to see their similarity indices that matched other scholarly resources and student papers. Revisions to
the writing assignment would need to be made if student similarity indices did not meet nursing program standards.

*Summer course schedule.* Students who participated in this study stated that taking a required nursing course during the summer term was beneficial because the particular nursing course was writing and labor intensive. By taking the writing-intensive nursing course during the summer, students reduced the number of courses for the next term and potentially increased personal time needed to complete work in each course.

Data from this study might influence nurse educators to consider offering writing-intensive nursing courses during the summer so that interested students could decrease the rigor of fall schedules. Summer course scheduling for required courses would not be considered a requirement, but a benefit for proactive students. However, at-risk potential students who scored unsatisfactorily on a pre-admission writing exam could also be required to take the writing-intensive nursing course during the summer term. Nursing programs could consider approval of summer course scheduling. Summer writing-intensive nursing courses could be offered, depending on student request and academic need.

The interviewed participants identified a variety of significant helpful resources. Data from this study might encourage nurse educators to consider increasing the prevalence of the helpful resources in nursing education programs. The significant helpful resources may increase student self-confidence, which have the potential of increasing writing self-efficacy and achievement of competent academic writing.

*Events, issues, and relationships.* The events, issues, and relationships that were significant for entry-level BSN students to achieve competent academic writing were
categorized into three main themes: environmental factors, personal factors, and behavioral factors, all of which are components of the reciprocal determinism model (Bandura, 1977, 1986), and all which affect the achievement of competent academic writing for entry-level BSN students. Environmental factors included prior education experiences in high school, influence of nurse educators, scholarly resources, collegiate resources, family influences, and technology influences. Personal factors included personal goals, interest and motivation, negative self-talk and decreased self-confidence. Behavioral factors included bad past writing experiences, time management, life outside of being a nursing student, and writing abilities. Discussion includes details about what the findings mean relative to nursing education practice.

**Environmental.** Environmental factors included prior educational experiences in high school, influence of nurse educators, scholarly resources, collegiate resources, family influences, and technology influences and may have exhibited positive or negative influences.

**Prior educational experiences.** Subjects who participated in this study stated that a lack of APA education in high school and college were considered hindrances to achieving competent academic writing. The subjects voiced that they learned APA on their own and that they perceived the APA manual to be very difficult to understand. Subjects also stated that the Purdue Owl website was very beneficial with learning APA formatting criteria. Findings from this study may motivate nurse educators to consider integrating mandatory APA writing education courses into nursing program curricula so that nursing students could have repeated exposure to the APA formatting criteria and
more likely remember the criteria. Repeated exposure and immersion in content increases the likelihood of successful performance (Larsen & Reif, 2011).

Students are being admitted to nursing education programs with varying degrees of writing abilities due to the varying qualities of high school and college education programs. The literature suggested that nursing students demonstrated significant difficulty with academic writing (McMillan & Raines, 2010) and demonstrated writing incompetency at the college level (Cho & Schunn, 2007), which may have been due to the lack of writing practice in high school courses and college writing courses. The National Commission on Writing for America’s Families, Schools, and Colleges (2006) found that writing classes outside English composition courses in high school and college settings were not providing students with writing practice time nor were students assigned compositions as homework. The lack of student writing experience with formal writing negatively influenced the achievement of competent academic writing.

Data resulting from this study and information from the scholarly literature (Cho & Schunn, 2007; McMillan & Raines, 2010; The National Commission on Writing for America’s Families, Schools, and College, 2006) might encourage nurse educators to consider the implementation of rigorous admission criteria to determine writing abilities of nursing program applicants. If nursing program applicants did not meet admission criteria guidelines for writing abilities, a policy and plan could be implemented to help remediate students’ writing abilities. Once a student was admitted to the program, nurse educators were then responsible for helping students meet writing competencies, which could include intensive collaboration with writing experts from local colleges and universities.
Academic writing education should focus on the content of prerequisite writing courses that need to focus extensively on the integration of writing immersion experiences and less on literary reading assignments. Collaboration with the provision of academic writing education should occur between institutions of higher learning and nursing education faculty in order to ensure that the main objective of writing education is aimed at the achievement of competent academic writing. Interprofessional collaboration and communication was a finding supported by the AACN (2008) who indicated that interprofessional education was related to enhanced outcomes (Barnsteiner, Disch, Hall, Mayer, & Moore, 2007). Additionally, the American Association of Colleges and Universities (2006, 2013) indicated that faculty was responsible for student learning as well as collaboration with professional colleagues to ensure that students were enabled to learn and were equipped to be contributing members of society.

Influence of nurse educators, nursing education programs, scholarly resources, collegiate resources, and technological resources. Interviewed participants stated that nurse educators had positively and negatively influenced their writing self-confidence and achievement of competent academic writing. Additionally, the subjects stated that using scholarly and collegiate resources had positively influenced writing self-confidence and writing abilities. In addition, subjects stated that using technology was viewed as a positive influence, except when the Internet was not accessible.

Subjects voiced concerns about nurse educator feedback. Interviewed subjects stated that they experienced frustrations when nurse educators did not return prior writing assignments in a timely manner, especially when feedback from the first writing assignment was needed for students to proceed with the second writing assignment.
Additionally, interviewed participants stated that a hindrance to achieving competent academic writing included the quality and consistency of APA feedback provided by nurse educators. Findings resulting from this study might influence nurse educators to consider and evaluate personal APA knowledge of formatting guidelines so that consistent and concise information may be provided to students. Additionally, findings from this study might influence nursing programs to consider the provision of APA-focused faculty development courses and writing workshops to enhance faculty knowledge of APA formatting guidelines.

Interviewed participants identified mixed reviews about having partners for writing assignments. Sometimes, having writing partners was beneficial and sometimes they were not, depending on the writing competency and abilities of the partner. Subjects stated that having writing partners was viewed as beneficial because the writing assignment workload could be equally divided, but sometimes having partners was viewed as a hindrance because the partner may have been a weaker student and was not competent in writing. The weaker student added more stress onto the stronger student who felt that proofreading the weaker partner’s work was necessary in order to verify competence.

Interviewed participants stated that sometimes nursing educators did not provide clear and concise instructions and grading rubrics for writing assignments, which made it very difficult for the subjects to understand the grading requirements. Subjects also stated that it was considered a hindrance when nurse educators did not provide definite due dates for assignments, which enabled students to procrastinate with completing writing assignments. Data resulting from this study might encourage nurse educators to
ensure that grading criteria and instructions are concise and succinct with definite due dates. Nurse educators could consider informing students about the necessity to read and understand the assignment guidelines and consequences for late submissions. Students could be strongly encouraged to read the instructions and to ask questions if something is not clear. Nursing educators could consider reviewing the grading rubric in class or provide an on-line podcast to verbally explain the instructions and grading rubrics. Nurse educators could peer review grading rubrics and instructions to ensure that the information is clear. Or, interested students could peer review writing assignment grading rubrics so that nurse educators could obtain student perceptions of the guidelines.

Subjects revealed that sometimes nurse educators did not provide assistance with writing assignments. Data resulting from this study might influence nurse educators to provide student assistance with writing assignments when requested to do so in order for the students’ questions to be answered. Additionally, students could be strongly encouraged to ask for clarification if something was not understood regarding the writing assignment. Students could be referred to writing experts for assistance with grammar mechanics.

Interviewed participants commented on a variety of positive and negative influences regarding nursing education programs. In general, the subjects stated that BSN programs were very “detail oriented” and very academically challenging because of the extensive content orientation and application to the clinical setting. The subjects stated that, prior to enrollment, they were not aware of the rigor and intensity of nursing education programs. Data resulting from this study might persuade nurse educators to
consider informing potential nursing program applicants about the academic challenges of BSN education programs.

Subjects who participated in this study stated that using collegiate resources, scholarly resources, and technological resources were considered helpful experiences when they tried to be successful with competent academic writing and included the following: APA manual, course textbooks, resource or topic-specific textbooks, online and digital copies of journal articles, a book called *English for Dummies©*, and other websites (the Purdue Owl, BibMe.com, and EBSCOhost). Some subjects identified that the ability to access Internet information from home was a helpful resource because they did not have to physically be at the college facility when working on an assignment. Technology was only perceived as a positive influence when it worked. When the Internet malfunctioned, the students’ experiences with technology were perceived as negative.

The subjects stated that using the college library and having the librarian available were positive influences when they tried to complete an academic writing assignment because scholarly resources were conveniently located in one central location, and the librarian or library personnel were present in case difficulties were experienced with locating scholarly articles. Data resulting from this study might inform nurse educators that a library orientation early in the academic year might provide nursing students with valuable knowledge regarding resources for future writing assignments.

*Family influences.* Interviewed participants stated that relationships with family members both positively and negatively significant influenced achievement of competent academic writing. The subjects reported positive influences when family members were
able to proofread the subjects’ assignments and make suggestions for revisions. The subjects reported negative familial influences when the subjects’ spouse was working excessively and could not care for the children or proofread the assignment, when the subjects’ parents had personal struggles that interfered with the subjects’ ability to concentrate on nursing homework, and when a family emergency or death occurred.

Although family support had positive outcomes, the subjects stated that they maintained persistence and strived to complete the writing assignments. One comment was made about observing the younger generation struggling to communicate by writing letters, which increased the desire and motivation of the subjects to want to communicate at an exceptional level for future professional needs and for the good of the global community.

Self-efficacy theory included the factors of persistence and motivation. Individuals who have a strong self-efficacy will persist longer and achieve positive outcomes, more so than individuals who do not have a strong self-efficacy (Pajares, 2002). Data resulting from this study might encourage nurse educators to consider the varying environmental situations of BSN students. Student success could be supported by acknowledging different environmental backgrounds and facilitating access to resources.

**Personal.** Personal influences included the subjects’ thoughts, motivations, perceptions, values, attitudes, emotions, beliefs, and goals. Interviewed participants identified positive issues that were significant for them to achieve competent academic writing and included students’ personal goals to succeed, an interest in the writing
assignment topic, and the witnessing of a first-hand experience that increased the student’s motivation to research and write on the topic.

Negative issues that were significant for entry-level BSN students to achieve competent academic writing included negative self-talk, decreased self-confidence, and motivation to do a writing assignment, and a personal tragedy that greatly diminished the student’s motivation and desire to succeed. One other factor was mentioned that influenced the students’ personal motivation. Success in a course can mitigate against putting in extra effort to do a writing assignment well if the grade on it will not influence the course grade.

The subjects stated that their internal struggles were sometimes not evident to nurse educators. Therefore, data from this study might influence nurse educators to encourage open communication with students. Provision of emotional support is recommended and would help students develop a positive self-concept, increase their self-confidence, and foster high motivation. Student counseling services might be considered in order to enhance entry-level BSN students’ abilities to cope with a variety of environmental role strains (Jannati, Khaki, Eftekhar, Peyrovi, & Nojadeh, 2012; Peyrovi, Parvizy, & Haghani, 2009).

**Behavioral.** Behavioral influences included individual skills and actions that can positively and negatively affect performance. Significant positive behavioral influences that subjects stated were the arrangement of homework priorities to avoid procrastination and complete timely submission of writing assignments by the due dates.

Negative behavioral influences that subjects stated were significant in this study included the categories of time management, writing abilities, and adverse writing
experiences. A very frequently mentioned time management problem was procrastination, which was worse if a writing assignment was due during finals week. When a subject’s life included children, spouse, job, and nursing program responsibilities, time management became very challenging. Personal calendars or schedules helped subjects become efficient with time management skills.

Subjects were aware of specific challenges with achieving competent academic writing and stated that writing abilities had a significant impact on the achievement of competent academic writing. Examples included difficulty with transitioning from creative writing to scholarly writing, difficulty with paraphrasing and citation of direct quotes, difficulty with organizing thoughts and resources in paragraph form, and difficulty with integrating and documenting resources. Subjects stated that unfortunate experiences in high school and college were negative influences that affected their self-confidence with achieving competent academic writing.

Subjects reported that student illnesses, which were a negative influence because the subjects did not have time to achieve writing proficiency. Subjects who had been ill reported that they subsequently had enough time to complete their assignments due to accommodations from the nurse educator.

Data resulting from this study might encourage nurse educators and nursing program staff to include methods that would help students learn and apply time management skills, enhance writing abilities, and cope with negative writing experiences. Subjects stated that personal planners and calendars promoted efficient time management. Nurse educators could consider providing course schedules with due dates, issuing reminders about due dates, and documenting consequences for late assignment
submissions in the syllabi. Including such information has been proposed as an ethical consideration for faculty, rather than an optional accommodation to make for students (You, Warchal, Ruiz, 2011). Students may be referred to counselors who could offer time management strategies (Jannati et al., 2012; Peyrovi et al., 2009), and nurse educators may reinforce the strategies so that students might efficiently expend their energy on academic responsibilities.

Writing abilities and APA formatting knowledge could be enhanced by offering mandatory writing education courses either within the nursing program or at a local college or university. If the local college or university offers the writing course, the course could be collaboratively designed to include multiple writing assignments and formal education on APA formatting criteria. Additional writing education sessions may be offered in nursing education program so students could become immersed in academic writing and APA formatting, which may help to increase writing self-efficacy and potential competency with academic writing. Bruning et al. (2012) indicated that writing is a difficult task that develops over time, and Larsen and Reif (2011) indicated that immersion experiences in a specific skill, such as repeated experiences with academic writing, would yield higher self-efficacy.

Events, issues, and relationships that were significant for entry-level BSN students to achieve competent academic writing were identified and included positive and negative influences that affected the participants’ abilities to achieve competent academic writing. The data results were discussed relative to nurse educator practice. The influences were thematically categorized according to the three factors of the reciprocal determinism model (Bandura, 1977, 1986) that is a part of the self-efficacy theory, in
which the three factors (environmental, personal, and behavioral) influence each other and subsequently affect entry-level BSN students’ capacity to achieve competent academic writing.

**Discussion of the Results and Findings in Relation to the Literature**

The quantitative results and qualitative findings are examined and discussed in relation to the literature. Results and findings were identified that supported the self-efficacy theory and the scholarly literature review.

**Relationship Between the Results and Findings and the Theoretical Framework**

The theoretical framework to support this study was Bandura’s (1997) self-efficacy theory. Key components of self-efficacy included students’ personal beliefs and perceptions about their capabilities in accomplishing tasks, including competent academic writing. Because self-efficacy is *situation-specific* (Rosenstock et al., 1988), this study about the self-efficacy phenomenon specifically for academic writing aligned with the purpose of this study. The purpose of this study was to empirically determine writing self-efficacy and qualitatively explore academic writing experiences of entry-level BSN students in order to determine hindrances and facilitators of academic writing in nursing education. This study addressed a gap in the literature concerning a lack of information and scholarly evidence about writing self-efficacy in nursing education.

that writing self-efficacy was directly proportional to achievement of writing competencies. Therefore, increasing writing self-efficacy has the potential of increasing the prevalence of academic writing competence.

The self-efficacy theory was applied in this study by using scholarly scientific methods. The discreet piece of theoretical knowledge about writing self-efficacy was expanded specifically for nursing education by quantitatively determining writing self-efficacy of entry-level BSN students and by qualitatively exploring nursing students’ academic writing experiences regarding the hindrances and facilitators to achieving academic writing. Figure 1 illustrates the social cognitive theory for writing self-efficacy that was identified in Chapter 1 to show specifically where the results of the study can be applied.

Figure 1 showed that the self-efficacy expectations theoretical component was the area that was enhanced due to the results found in this study. Entry-level BSN students’ writing self-efficacy was both quantitatively obtained and qualitatively explored to indicate that a variety of environmental, personal, and behavioral factors impacted writing self-efficacy expectations and subsequently affected the achievement of competent academic writing of entry-level BSN students.

**Quantitative Results.** Results found in the scholarly literature were supported by the quantitative results of this study. Lavelle et al. (2013) indicated that upper-level nursing students generally exhibit higher levels of self-confidence than entry-level BSN students. However, results of the Lavelle et al. study were uncertain because reliability and validity information for the measuring tool, Inventory of Processes in College Composition, was not available. The sample for this study included entry-level BSN
students, who may not have been as self-confident as upper level nursing students in the Lavelle et al. (2013) study, which makes the results of this study even more significant and applicable to entry-level BSN students.

Data from this study showed that entry-level BSN students might encounter challenges to achieving competent academic writing. The central quantitative research question was as follows: What is the writing self-efficacy of entry-level BSN students? The mean writing self-efficacy values reported in this study from the writing self-efficacy survey (Shell, Murphy, Bruning, 1989) ranged from 7.989 to 8.945. The self-efficacy results showed that entry-level BSN students might exhibit low self-confidence when trying to complete basic writing skills that, according to Bruning (2012), could translate to challenges with achieving competent academic writing.

The quantitative results from this study were supported in the literature review. Pajares (2003) indicated that self-efficacy influenced writing outcomes and predicted students’ writing performances. Valkenburg (n.d.) and Salahu-Din et al. (2008) suggested that nursing students were highly prepared technologically for college, but students were not prepared to critically think and demonstrate basic grammar skills. The National Center for Education Statistics (2012) reported that college students lacked skills in critical thinking, basic grammar usage, spelling, punctuation, and capitalization. Bruning et al. (2012) indicated that basic writing conventions were writing tasks with which students struggled. Since nursing students had to meet admission requirements to enter the nursing education program, nurse educators might reasonably expect a certain level of writing ability.
Bandura (1997) indicated that exhibiting a high confidence level about accomplishing a specific task subsequently translates into increased self-efficacy. Scholarly literature (Clark & Dodge, 1999; Ergul, 2004; Kirk, 2012; Laschinger, 1996; Pajares, 1996, 1997, 2003; Tresolini & Stritter, 1994) reported that writing self-efficacy was directly proportional to achievement of writing competencies. Therefore, as entry-level BSN students strive for legitimate high writing self-efficacy, the goal for them to achieve competent academic writing may be attainable with the assistance of nurse educators.

Data from one of the eight quantitative research questions showed a statistically significant difference between genders. Females scored higher. The results support the scholarly literature and were consistent with other findings about late adolescents (Meece, 1991; Rittamayer & Beier, 2008; Schunk & Pajares, 2002), since three-quarters of the subjects in the sample were 18 to 25 years old.

Self-efficacy differed between the younger ages of the genders, especially within the scholastic areas of science, technology, and mathematic, with males appearing to be more self-assured than females in those areas (Meece, 1991; Rittmayer & Beier, 2008). Both genders have shown the same confidence levels in some educational areas, including language arts and science classes, despite females usually scoring higher than males (Schunk & Pajares, 2002). The differences in gender may have been due to clichéd beliefs that males were more accepting and understanding of their male counterparts than they were of females (Schunk & Pajares, 2002).

However, a meta-analysis by Huang (2013) suggested that females in late adolescence displayed a higher self-efficacy in language arts than males in late
adolescence. The males displayed higher levels of self-efficacy in computers, social sciences, and mathematics. Bandura (1994) stated that young adults who have high a self-efficacy and a high degree of perseverance will successfully manage challenging situations, which could include nursing program education. However, young adults with self-defeating thoughts, a concept that was mentioned during a focus group interview, will experience stress and find it very demanding to persevere (Bandura, 1994).

Data from the other seven quantitative research subquestions were not statistically significant regarding writing self-efficacy in relation to the demographic variables of age, student status, employment, primary care-provider status, support system, and first spoken language. However, statistical analysis did show that there were differences in writing self-efficacy means as reported by the subjects.

Differences in writing self-efficacy for the demographic variable of first-speaking language showed that those whose first-speaking language was not English scored lower writing self-efficacy than those whose first-speaking language was English. This result correlates to a finding in the literature regarding cultural differences in self-efficacy (Graham, 1994; White & Bowers, 2008) in which those who were culturally diverse may have struggled with achieving high self-efficacy.

Bruning et al. (2012) indicated that writing was a difficult task that developed over time, and Larsen and Reif (2011) indicated that immersion experiences in a specific skill, such as repeated experiences with academic writing, would yield high self-efficacy. Therefore, entry-level BSN students, specifically those whose first-speaking language is not English, may benefit from repeated writing immersion experiences before entering a
nursing program and during a nursing program. The repeated writing experiences may help to increase writing self-efficacy, which was affirmed by Bruning et al. (2012).

**Qualitative results.** Focus group participants stated that their nurse educators who were taking graduate courses shared their academic resources with the subjects, which was perceived as a positive teaching strategy that supported student learning. The nurse educator was viewed as an effective role model because the nurse educator demonstrated competent writing, which enhanced the subjects’ confidence with academic writing experiences. Additionally, subjects indicated that family, friends, peers, and instructors were accommodating when they gave constructive feedback on academic writing assignments. The findings supported the literature regarding the actual performance of a behavior, the observation of role models, and serious contemplation of constructive criticism that all helped students develop positive efficacy expectations (Goldenberg et al, 1997; Rittmayer & Beier, 2008) and achieve positive outcomes (Pajares, 2003).

Focus group participants identified that they had difficulty with academic writing if they were not familiar with the topic or had no interest in the topic. This finding supports Schraw (2006) who indicated that writing involved the clustering of thoughts and experiences into meaningful mental visuals, and that generation of ideas for a writing assignment involved the development of writers’ thoughts and impressions and might be difficult to do especially if one has not had a prior experience with the topic or task. In addition, the interviewed participants remarked about first-hand experiences that were beneficial and helped them generate ideas and conceptualizations needed to complete a
competent academic writing assignment. This finding supported Bruning et al. (2012) who affirmed the participants’ comments.

Interviewed participants voiced their concerns many times about time management. Procrastination occurred due to a variety of reasons, including decreased motivation to do the writing assignment, decreased interest in the topic, and prioritization of other assignments that needed to be completed. Writing self-regulation as discussed by Bruning et al. (2012) included time management skills and procrastination that may occur even when a student had ideas for the assignment, but could not find the right words to express ideas. Some participants stated that sometimes the idea of even starting a writing assignment was very overwhelming.

**Relationship between the Results and Findings and the Literature Reviewed**

This study addressed a gap in the literature concerning information and scholarly evidence about writing self-efficacy in nursing education. A majority of the literature focused on nurse educator discontent with nursing students’ academic writing abilities and the numerous writing educational strategies that had been implemented in response to incompetent academic writing performance. The quasi-experimental designs appeared to show improvement of writing skills despite some study limitations regarding sample size, reliability and validity of measurement tools, and transferability and credibility of qualitative data collection processes. Very few qualitative and mixed-methods studies were evident in the scholarly literature about writing self-efficacy, writing experiences, and educational writing strategies. The limitations found in the quantitative studies supported the need for reliable and valid designs and instruments to yield credible
research findings regarding writing self-efficacy and academic writing in nursing education.

**Quantitative results.** Two scholarly articles were found that identified writing self-efficacy in nursing education: McCarthy et al. (1985) and Lavelle et al. (2013). McCarthy et al. (1985) suggested that writing self-efficacy did reveal a statistically significant outcome on the quality of academic writing. Data from the McCarthy et al. (1985) study might encourage nurse educators to consider the influence of self-efficacy on entry-level BSN students’ abilities to write competently and take proactive measures to increase writing self-efficacy, which include repeated experiences with academic writing, observation of peer role models, observation of teacher role models, integration of early success feedback, integration of timely ability feedback, and integration of a rewards system (Andrew & Vialle, 1998; Ergul, 2004; Schunk, 1991). Data from this study supported data from the McCarthy et al. (1985) study about the significant impact that writing self-efficacy has on competent academic writing, especially in regard to females scoring significantly higher writing self-efficacy than males. Gender does have a significant impact on writing self-efficacy.

Another quantitative study that identified writing self-efficacy was by Lavelle et al. (2013), who used a 71-question true/false questionnaire, *Inventory of Processes in College Composition* (IPCC). The sample included BSN students who had completed their second year of general baccalaureate work and were enrolled in a two-year nursing program. The IPCC measured student responses to questions concerning writing-related beliefs and strategies. The *Low Self-Efficacy Factor* pertained to the idea that subjects exhibited low self-efficacy, doubts, and fears about personal writing capabilities. Results
showed that the *Low Self-Efficacy Factor* of the IPCC (Lavelle et al., 2013) did not appear to be significant in the study on writing approaches of nursing students and could have meant that nursing students felt confident in their writing abilities as upperclassmen. Results were uncertain because no data was available to support the reliability and validity of the IPCC measuring tool. Lavelle et al. (2013) suggested that students’ writing techniques depended on the quality of writing instruction and students’ writing beliefs and that nurse educators are in the position to encourage students to incorporate deep reflection of writing content and writing processes. Some students excelled with academic writing when clear expectations were given, when sample papers were available, and when nurse educator feedback was timely and meaningful.

The results of this study did not support the results from the Lavelle et al. (2013) study that showed potentially high levels of self-confidence for upperclassmen. The quantitative data analysis in this study showed that individual writing self-efficacy means ranged from 7.989 to 8.94, and the total self-efficacy score was 67.209 out of 80. The sample in this study could be considered upperclassmen even though the participants were entry-level BSN students because they were actively enrolled in the second semester of their junior year. Even though entry-level BSN students may sometimes be considered upperclassmen depending on the type of nursing education program in which they are enrolled, their self-efficacy cannot be expected to be high as was indicated in the Lavelle et al. (2013) study.

**Qualitative findings.** The findings from this study supported findings from the scholarly literature review. Diehl (2007) affirmed that the most common writing concerns of nursing students included uncertainty about expression of ideas in writing
and frustration with following APA format. Diehl’s results were confirmed from the interviewed participants who stated that they struggled with the expression of ideas especially if the writing topic was unfamiliar and if there was no interest in the topic. In addition, students struggled with APA formatting criteria due to a lack of education about APA formatting in high school, college, and nursing education.

Interviewed participants stated that writing was a difficult task, especially if there was no interest in the topic and if there was no motivation to do the writing assignment. This finding supports Bruning et al. (2012), who asserted that writing was a difficult cognitive task that developed over time. Subjects also recognized that having first-hand experiences were very beneficial for successfully completing academic writing assignments because the subjects could relate to the experience, find literature to support ideas, and easily write the necessary documentation to meet grading criteria. This finding supports Schraw (2006) who indicated that writing involved the remembering of experiences that could be developed into meaningful mental images.

Research subjects mentioned several times the concept of Scaffolded assignments. Subjects explained scaffolded assignments as the breaking down of a large writing assignment into smaller tasks due at incremental due dates. Lloyd (2007), a United Kingdom nurse educator, suggested a holistic framework called PROCESS (planning and preparation, referencing, organization, composition, engineering, spelling, and structure) that helped students learn to write competently. This process was similar to the scaffolding concept and was advantageous to students because students could focus on small sections of the assignment, do the assignment slowly, do the assignment well,
and not feel overly stressed with having to do a large academic writing assignment all at once.

Botten (2012), who was a nontraditional nursing student from London, England, suggested several ideas that she realized were effective with improving academic writing abilities and competencies. She suggested that nursing students should take advantage of and use the college’s resources and tutors, ask experienced peers and parents or family to proofread writing assignments, use the grading rubric and instructions while doing the writing assignment, use proper APA referencing to avoid threats to plagiarism, and use time management skills to prioritize time and other homework assignments. The findings in this study are similar to Botten’s (2012) informational article regarding the use of multiple resources when trying to complete a competent academic writing assignment.

Lavelle et al. (2013) suggested that nursing students wrote more competently when they were encouraged to incorporate deep reflection of writing content and writing processes. Additionally, nursing students generally wrote more competently when clear expectations for the writing assignment were given from the nurse educator, when sample papers were available for student viewing, and when nurse educator’s feedback was timely and meaningful. Lavelle et al. (2013) findings were supported by the findings in this study in which research participants reported similar comments regarding clear expectations, sample papers, and timely nurse educator feedback.

Nursing students were not being adequately prepared for academic writing during high school and college. Valkenburg (n.d.) indicated that nursing students were highly prepared technologically but were ill-prepared to think critically. Salahu-Din et al.
(2008) indicated that nursing students were ill prepared to demonstrate basic writing abilities. The National Center for Education Statistics (2012) indicated that students lacked skills in critical thinking, basic grammar usage, spelling, punctuation, and capitalization.

A blog post by Bernstein (2013), a retired high school teacher, commented that the No Child Left Behind (NCLB) Act went into effect for the 2002-2003 academic school year. About ten years later, college professors were seeing the negative effects of NCLB on the quality of students now attending college. College students were not able to write competently, or read, or do basic math skills. The NCLB dictated to teachers what could be taught in high school curricula, which was to “teach by the test” so the students could pass the federally-regulated testing protocols. A college student who responded to Bernstein’s (2013) post graduated from high school in 2011 and wrote that “high school did not prepare me for the rigors of college in any way” (Norfolk, 2013). The web postings were supported by some of the research participants in this study who stated that they were not adequately prepared in high school or college to write at a competent academic level in nursing education.

When nursing students were assigned to write an APA paper in a nursing class, students’ self-confidence may have been low because they did not feel that they could successfully complete the writing task. Nurse educators become very frustrated because nursing students cannot meet writing expectations in the nursing program. Most of the literature review indicated that the writing education interventions that were developed by nurse educators to help nursing students write competently were based on general
observations that nursing students could not meet writing expectations and that nurse educators became very frustrated.

**Similarities and Differences between Quantitative Results and Qualitative Findings**

This study’s design was mixed methods and incorporated two data collection techniques: a quantitative writing self-efficacy survey and a qualitative focus group interview at three research sites. The concurrent triangulation design was used so that the two different data collections could be done separately and in close time proximity. The focus group interview for each of the three research sites was done during the afternoon of the same day as the morning quantitative data collection. Both quantitative and qualitative data were collected in close time proximity, separately analyzed, and then uniformly compared to determine similarities and differences of the two data sets (Creswell, 2009; Houser, 2008; Tashakkori & Teddlie, 2003). The dual data collection process of this mixed-methods study was considered a positive attribute because it reduced a potential limitation of a single-method research design with reduced generalizability (Tashakori & Teddlie, 2003).

The central quantitative research question and subquestions focused on objectively obtaining writing self-efficacy data in relation to the demographic variables of age, gender, student status, employment status, primary care-provider status, and support-system status. The central qualitative research question and subquestion focused on obtaining data about the hindrances and facilitators that entry-level BSN students encountered when trying to achieve competent academic writing. The two data sets were separate and distinct from one another and provided a comprehensive perspective about
the writing self-efficacy phenomenon from the subjects’ perspectives. Comparisons and contrasts were made about the two different data sets.

Three essential aspects were addressed during data collection and data analysis of the concurrent triangulation design: timing of the data collection methods, weighting of the data, and merging of the data (Creswell, 2009). The timing of the quantitative and qualitative data collection processes occurred at about the same time of each other. The priority of each set of data was given equal status (Tashakorri & Teddlie, 2003). Both data sets were analyzed separately because both the quantitative and qualitative data sets were each essential for determining research results and findings about the writing self-efficacy phenomenon. The two sets of data were compared with each other to determine similarities and differences.

**Writing Self-Efficacy Scores**

A main point that was reflected in the comparison of the results concerned the values of writing self-efficacy scores. The quantitative results indicated a mean writing self-efficacy range of 7.989 and 8.945. During the focus group interviews, participants commented about hindrances experienced when trying to achieve competent academic writing and about generally feeling ill prepared to write competently. The qualitative comments were consistent with the quantitative results that showed a range of writing self-efficacy between 7 and 8 and could be associated with environmental, personal, and behavioral factors (Bandura, 1977, 1986) that may have hindered the attainment of writing self-efficacy needed to achieve competent academic writing.
Gender Comparison

Gender comparison with the two sets of data showed that the quantitative sample included more females (81%) than males (19%). Each focus group included two-to-five females and one-to-three males. The number of males who participated in the focus group interviews in this study was 35%. The female to male participation rate for this study was more than the 9% of males who are registered nurses in the United States (United Census Bureau, 2011).

A comparison between the two sets of data showed that quantitatively, the gender impact of females showed statistically significant higher writing self-efficacy than males. However, the finding was not identified during the interviews because both males and females voiced concerns about the same hindrances to achieving competent academic writing and concerns with not feeling capable of meeting expectations for writing assignments. Additionally, both genders voiced similar comments about the facilitators to achieving competent academic writing.

Student Status and Support-System Status

Two of the quantitative subquestions could not be answered regarding nursing student status and support-system status because only one out of the 91 participants indicated that he or she was a part-time student and that he or she did not have an adequate support system. Comparison of the quantitative data with the qualitative data showed that student status and support-system status were not significant factors to consider for academic writing experiences. Researcher observations during the interviews revealed that the subjects supported each other, and many voiced that friends and family were used to proofread their writing assignments. Interviewed participants
were not asked about student status during the interview process. Part-time or full-time student status was not a factor when the participants discussed writing experiences during the interviews.

**Employment Status**

Many of the participants repeatedly stated that they were very busy with life in general, had very hectic lifestyles, and found it very difficult to prioritize homework, writing assignments, children, and jobs. The subjects stated that the external environmental demands were hindrances to achieving competent academic writing. The employment factor was supported by the quantitative results indicating that a little less than half of all students were employed either part-time or full-time. The quantitative result was supported by findings from the qualitative interviews. Research subjects stated that the added environmental stress of having to work was considered a hindrance that some entry-level students experienced when trying to achieve competent academic writing.

**Primary Care-Provider Status**

A difference between the two data sets was detected with the environmental factor of primary care-provider status. Interviewed participants reported that excessive environmental factors, including that of being a primary care provider, were a hindrance to achieving competent academic writing, indicating that writing self-efficacy may have been lowered by the environmental stressor. The quantitative data results showed that those who were primary care providers scored higher writing self-efficacy than those who were not primary care providers, but the mean differences were not statistically significant.
Cultural Diversity

Cultural diversity was also addressed in the results and findings. The quantitative results showed a difference in means between those whose first-speaking language was English and those whose first-speaking language was not English, but the results were not statistically significant. During the focus group interviews, cultural diversity was evident but did not alter feedback to the interview protocol or have a significant impact on the findings. Transcription of interview data was completed accurately regardless of the effects of cultural diversity detected in language and voice.

The purpose of this mixed methods data study was to provide a comprehensive overview of the writing self-efficacy phenomenon for entry-level BSN students. The quantitative and qualitative data sets were collected separately and analyzed separately. Similarities and differences were identified between the two data sets in regard to overall writing self-efficacy scores, gender differences, student status, support-system status, environmental hindrances, and cultural diversity.

Limitations

Quantitative Component

A limitation of the study was that the quantitative sample was a convenience sample in one Midwestern state. Three BSN programs were chosen that were in close proximity to the researcher. The BSN programs were similar in curricular structure and were located in large urban areas with rural agricultural farmland surrounding the major cities. The quantitative sample size for this study (N = 91) exceeded the minimum sample size of 84, which remedied the convenience sample limitation and provided
additional rigor. A recommendation for future research is to include several BSN nursing programs in multiple states, which could make the findings more generalizable.

Another limitation of the study concerned the quantitative data analysis procedure in which the population distribution was not a normal bell-shaped distribution and was skewed to the left. Some participants scored themselves very high on the writing self-efficacy survey. The data indicated that there were ten perfect writing self-efficacy scores of 80. The self-reported scores for each of the eight writing skills ranged from 0–10, with 10 being the highest score indicating that the participants felt very confident in successfully completing the writing skill.

**Qualitative Data Component**

A limitation that may have skewed results was the $25 monetary award from the researcher’s personal funds that was given to all of the interview participants who completed the interviews. During the recruitment phase, an explanation was given regarding the purpose of the monetary award, which was to provide a reward to those who agreed to complete the hour-long. The interview process was considered a significant time commitment. The 17 focus group participants completed the interviews and accepted the reward. One participant commented that the monetary reward was not the reason for contributing to the focus group interview. Participants were strongly encouraged to be as honest as possible with their interview responses. Body language and verbal language consistency was confirmed by video recordings. A recommendation for future research is to again offer the monetary reward for focus group interview participants because of the significant time commitment.
Even though a brief explanation was given about the writing self-efficacy scoring values on the writing self-efficacy survey, participants may not have fully understood the scoring values. To decrease the prevalence of this limitation for future research, it is recommended that additional explanations be verbalized to the participants about the self-reported ratings on the self-efficacy scale, indicating that a 10 score referenced that the participant felt that there was complete and total self-confidence with successfully performing the writing skill with no margin for making an error. Additional explanations could also be made regarding a zero score, which meant that the participants had no self-confidence with successfully completing the writing skill.

A final limitation concerned the analysis of the qualitative data. Since this study was an individual project, the researcher transcribed and interpreted the data for themes. A qualitative expert was consulted after data analysis to verify accuracy of data interpretation.

**Implications of the Results and Findings for Nurse Educator Practice**

Assessing and identifying nursing students’ writing self-efficacy and academic writing experiences may be useful for nurse educators. McCarthy et al. (1985) indicated that self-efficacy did reveal a statistically significant outcome on the quality of academic writing. Self-efficacy was an accurate predictor of skills performance and could be used to predict writing performance (Andrew & Vialle, 1998; Ergul, 2004; Schunk, 1991). Pajares (2003) indicated that self-efficacy influences writing outcomes and predicts students’ writing performances. Bandura (1997) indicated that exhibiting a high confidence level about accomplishing a specific task subsequently translates into increased self-efficacy. Scholarly literature (Clark & Dodge, 1999; Ergul, 2004; Kirk,
that self-efficacy is directly proportional to outcome achievement. Kirk (2012) and Ergul (2004) indicated that individuals with a high sense of self-efficacy might be able to withstand challenges and be more motivated. Therefore, as nursing students strive to reach high writing self-efficacy with the assistance of nurse educators, the goal of BSN students achieving competent academic writing may be attainable.

Reciprocal determinism integrated three main factors related to one’s behavioral influences, personal characteristics, and environmental conditions. The three factors interacted and reciprocated with each other (Bandura 1986). Bahn (2001) and Pajares (2002) cited the reciprocal determinism concept in their expository articles on the social learning theory and described how multiple the factors influence human functioning.

Three main implications for nurse educator practice are supported by the literature (Bandura, 1977, 1986) and are as follows: increase writing self-efficacy, decrease hindrances to achieving competent academic writing, and increase facilitators to achieving competent academic writing.

**Increase Nursing Student Writing Self-Efficacy**

Increasing nursing student writing self-efficacy, which is supported by the literature (Bandura, 1997; Clark & Dodge, 1999; Ergul, 2004; Kirk, 2012; Laschinger, 1996; Pajares, 1996, 1997, 2003; Tresolini & Stritter, 1994) may help increase academic writing competence. Increasing writing self-efficacy may be accomplished by using diverse teaching strategies.

Using a variety of instructional practices, including short-term goal setting, strategic instruction practices, peer and instructor role modeling, timely feedback on
performances, and using rewards based on performance, have the potential to increase writing self-efficacy (Brown, 1999; Kirk, 2012; Schunk, 1995) and help students be aware of their learning progress, which can enhance student motivation and desire to succeed. One’s perception of learning growth increases self-efficacy and inspires students to excel (Ergul, 2004; Rittmayer & Beier, 2008; Schunk, 1995) especially about academic writing. Learners need to understand that they have the skills and stamina to persevere during challenging times (Bandura, 1994). Nurse educators are in the position to facilitate nursing students’ learning and are obligated to help nursing students increase writing self-efficacy (Mandleco et al., 2012).

This study’s data might encourage nurse educators to consider implementing diverse teaching methods aimed at increasing the development and sustainability of nursing students’ writing self-efficacy (Biley & Smith, 1998; Laschinger & Tresolini, 1999), especially for writing self-efficacy. Because self-efficacy is situation-specific (Rosenstock et al., 1988) and applicable to both clinical and classroom settings, many opportunities exist to increase nursing student writing self-efficacy. Helping students increase self-efficacy about a specific skill, including academic writing, may greatly improve students’ confidence and competence levels for carrying out specific tasks. Competent academic writing is essential for academic and professional proficiency.

Self-efficacy can be increased by a variety of ways, including person variables and situation variables. Person variables include goal setting by the student or the nurse educator in which small, attainable goals in a short period of time (Andrew & Vialle, 1998; Ergul, 2004; Schunk, 1991) can help increase self-efficacy. Goal setting by the student was reported frequently during the focus group interviews and was considered a
personal influence supported by the reciprocal determinism model (Bandura, 1977, 1986). Students may be efficient at setting their own goals, or they may need assistance.

When helping nursing students set small attainable goals, nurse educators may assist nursing students by using scaffolded assignments. Interviewed participants frequently reported scaffolded assignments as a facilitator to achieving competent academic writing. Subjects commented that it was less stressful for them when a large assignment was broken down into several small assignments with incremental due dates. The staged assignments gave the students time to focus specifically on the smaller assignment, to understand the writing task, and to excel with that particular task.

Situational variables included observation of peer and teacher role models, integration of early success feedback and ability feedback from nurse educators, and integration of a rewards system linked to student accomplishments (Andrew & Vialle, 1998; Ergul, 2004; Schunk, 1991). Subjects in this study voiced comments about role modeling and writing assistance of nurse educators, which was extremely beneficial during the learning process for basic writing organization and APA formatting. Additionally, the importance of timely feedback for assignment revisions was a facilitator for achieving competent academic writing and reported from the interviewed participants and supported by Lavelle et al. (2013). Interviewed participants did not mention rewards during the interviews, but rewards may be considered by nurse educators to enhance writing self-efficacy.

Data resulting from this study might encourage nurse educators to assess nursing students’ writing self-efficacy by using the writing self-efficacy survey. Students with low writing self-efficacy for the basic writing skills may be identified and academically
supported to reach their full potential with achieving academic writing capabilities. Identifying students who have low writing self-efficacy based on the writing self-efficacy survey can be essential so that remediation of students’ writing abilities may occur to enhance academic writing competence.

Bandura (1977, 1986) indicated self-efficacy is acquired from four sources: behavior or skill performance, observations of others performing the skill or behavior, verbal persuasion and positive reinforcement, and emotional arousal. Bandura believed that performance or practice of behavior such as multiple experiences with academic writing assignments had the strongest influence on self-efficacy. If nursing students attained a high level of writing self-efficacy early in BSN education, they may be more self-efficacious in their writing abilities as student nurses and as practicing professional nurses (Newton & Moore, 2010).

**Decrease Hindrances to Achieving Competent Academic Writing**

Environmental factors influenced entry-level BSN students’ abilities to meet positive outcomes with achieving competent academic writing. The reciprocal determinism model (Bandura, 1977, 1986) showed that environmental factors, personal characteristics, and behavioral influences impacted each other during the process of attaining outcome achievement. When environmental hindrances were decreased, the other two factors of the reciprocal determinism model (Bandura, 1977, 1986) were positively impacted to help the individual ensure outcome achievement.

Subjects in this study stated that many environmental hindrances affected their abilities with achieving competent academic writing. Full-time employment was an environmental stressor that could have caused entry-level BSN students to be more
focused on job-related responsibilities instead of nursing academics. Findings from this study might prompt nurse educators to consider environmental influences that affect entry-level BSN students, including employment status. Quantitative results from this study showed that subjects who worked full-time exhibited the lowest writing self-efficacy, which may have indicated challenges to achieving competent academic writing.

Pajares (2003) indicated that high writing self-efficacy led to a higher potential for achieving positive outcomes. The converse may also be true. Low writing self-efficacy may lead to a lower potential for achieving positive outcomes. Therefore, data reported in this study might inform nurse educators about the relationship between the environmental factor of employment status and the impact on attaining writing self-efficacy and academic writing competence for entry-level BSN students.

**Increase Facilitators to Achieving Competent Academic Writing**

Facilitators are factors that entry-level BSN students reported during the interview that helped them achieve competent academic writing. The facilitators may be categorized as environmental influences, personal characteristics, and behavioral factors shown in the reciprocal determinism model (Bandura, 1977, 1986). When facilitators are increased and supported, the other factors of the reciprocal determinism model are also positively influenced so that potential for achieving positive outcomes, such as competent academic writing, may be enhanced.

The following actions might be considered by nurse educators to help increase facilitators to achieving increased writing self-efficacy and competent academic writing for entry-level BSN students:
1. Become politically active regarding high school accountability with student achievement of academic writing competencies.

2. Inform nursing student applicants about the intensive academic rigor of a BSN education program so that students can be prepared to focus intensively on nursing academics. The interviewed participants reported that sometimes they were completely uninformed about the extensive academic rigor required during BSN education.

3. Schedule reasonable expectations for return of graded writing assignments.

4. Communicate with students the expected return date of graded assignments with feedback.

5. Increase the number of APA education resources in BSN programs by incorporating a variety of diverse educational strategies, including online library resources, tutorials, and video Power Points that identify APA concepts (Roberts & Goss, 2009; Whitehead, 2002).

6. Increase the number of writing education resources in BSN programs by incorporating a variety of diverse writing education strategies, such as Writing Across the Curriculum, Writing to Learn, and Writing in the Discipline (Luthy et al., 2009).

7. Encourage or require entry-level BSN students to view online writing education resources.

8. Encourage or require entry-level BSN students to seek assistance with academic writing by scheduling appointments with a writing expert for questions or concerns about writing and APA concepts (Botten, 2012; Lightfoot, 2007).

9. Collaboratively integrate mandatory prerequisite writing education courses into BSN programs and into the curricula of local colleges and universities. The courses may be designed to meet the needs of BSN students, including multiple writing assignments and formal education on APA formatting criteria. Immersion and repeated experiences with academic writing have been shown to help with increasing BSN students’ writing self-efficacy (Bandura, 1977, 1986; Larsen & Reif, 2011).

10. Provide clear and concise grading rubrics and instructions for academic writing assignments (Lavelle et al., 2013).
11. Provide APA-formatted sample papers or APA-formatted templates (Lavelle et al., 2013) so students can see the application of APA formatting guidelines.

12. Reserve office hours for unscheduled student meetings or offer to counsel students during a telephone conversation in order to answer students’ questions about academic writing.

13. Schedule definite due dates for writing assignments, preferably not during finals week.


15. Encourage students to secure an alternate Internet access resource in place in case personal Internet access is not available.

16. Strongly encourage entry-level BSN students to save prior homework documents on a flash drive or within their personal or college-based e-mail so that the work will not be lost due to potential technological circumstances. Some interviewed participants stated that they had lost their computer-saved homework due to a variety of technological problems. After the incident, the subjects reported decreased motivation and lowered writing self-efficacy.

17. Strongly encourage students to use the college library and APA resources when working on academic writing assignments (Botten, 2012).

18. Implement a library orientation to inform BSN students about library and technological resources that are available.

19. Establish open communication with BSN students by ensuring prompt e-mail/cell phone communications so that students may discuss personal and academic struggles and ask questions regarding writing and APA formatting.

20. Assess and address BSN students’ writing needs in several classes throughout the entire nursing education program, which will help decrease students’ writing anxieties and potentially increase writing self-efficacy (Mascle, 2013).

21. Increase writing-immersion experiences in several nursing courses (Larsen & Reif, 2011) to increase writing self-efficacy. Examples of writing immersion include a writing lab staffed by doctorally prepared faculty with research experience (Slimmer, 1992) and writing-to-learn strategies that
enable students to incorporate evidence-based research and critical thinking into academic writing assignments (Dick & Willis, 2001).

22. Ensure that a social worker and counselor are readily available for entry-level BSN students either within the nursing program or within the community. The social worker can assist with environmental and social needs, including childcare, community resources, and financial services. Psychological counseling may be also be recommended, which will help students cope with potential negative impacts of environmental, personal, and behavioral influences on academic writing success.

23. Incorporate peer partnering, which supports the role modeling intervention as a method of increasing self-efficacy (Goldenberg et al., 1997; Rittmayer & Beier, 2008). The peer partnering intervention could include female/male partners because data from this study showed that females scored higher than males with writing self-efficacy. Self-efficacy is directly proportional to achievement of writing competencies (Clark & Dodge, 1999; Ergul, 2004; Kirk, 2012; Laschinger, 1996, Pajares, 1996, 1997, 2003; Tresolini & Setter, 1994).

24. Encourage entry-level BSN students read and follow the grading rubrics, use proper APA referencing to avoid plagiarism, use time management skills, and utilize friends and family to proofread writing assignments, (Botten, 2012).

25. Implement inter-rater reliability for grading rubrics so that grading consistencies can be maintained while several nursing educators evaluate multiple academic writing assignments.

26. Incorporate Turnitin (iPlagiarism, LLC, 2013) or a similar type of computerized plagiarism service, as a required element for academic writing assignments so that potential acts of plagiarism can be detected.

Data from this study might motivate nurse educators to consider the priority that academic writing has in nursing education and the impact of academic writing on nursing student and professional proficiencies. Academic writing must be made an active priority and required competency in nursing education programs so that nursing students may have the opportunity to succeed with and be accountable for achieving writing self-efficacy and academic writing competence prior to graduation. The American
Association of Colleges of Nursing *Essentials of Baccalaureate Education for Professional Nursing Practice* (2008) affirmed that effective written communication was necessary to ensure safe nursing practice and disseminate evidence-based research. Nurse educators are obligated to help nursing students improve their writing abilities to enhance academic success (Mandleco et al., 2012). The three main implications of increasing writing self-efficacy, decreasing hindrances to achieving competent academic writing, and increasing facilitators to achieving competent academic writing are approaches that nurse educators may utilize to help entry-level BSN students achieve competent academic writing.

**Recommendations for Further Research**

Additional research is needed to add to the body of knowledge regarding writing self-efficacy in nursing education. A recommendation for future research involving samples of entry-level BSN students is to include the same demographic variables, including the two demographic survey questions about nursing-student status and support-system status. This study’s data indicated that only one subject out of the 91 participants was considered a part-time student, and one out of the 91 participants indicated no support system was available. The sample size could be increased in future studies to include multistate research sites, which may increase the likelihood of finding those entry-level BSN students who are considered part-time students and those who may not have a support system available. The demographic survey was developed based on data from the scholarly literature review regarding potential environmental stressors that entry-level students may encounter while pursuing an academic degree in a nursing education program.
Additional research on instructional practices is recommended to determine relationships between writing educational strategies and BSN students’ writing self-efficacy. Instructional strategies include setting of small goals by the student, incorporating think-aloud sessions within the classroom, student observation of peer models to increase writing competency performance, early feedback from nurse educators given to students, and rewards linked to achievement of writing goals and successes (Schunk, 1991). A recommendation is to assess writing self-efficacy before and after a writing educational intervention in order to determine changes in writing self-efficacy. Examples of writing educational interventions include Writing Across the Curriculum, Writing to Learn, and Writing in the Discipline (Luthy et al., 2009).

Two other recommendations for future research would be to change the sample to include senior level nursing students to determine writing self-efficacy late in the students’ basic nursing education and to compare and contrast writing self-efficacy of entry-level BSN students’ with exit-level BSN students. An advantage of focusing on entry-level BSN students for this study was to assess key issues with writing self-efficacy early in the BSN students’ nursing education in order to potentially ensure academic writing competence prior to graduation.

Future research on writing self-efficacy could include longitudinal studies to assess and evaluate nursing students’ writing self-efficacy at enrollment and at the end of each semester until graduation. Additionally, an assessment and evaluation of writing self-efficacy could occur at the beginning and end of a class or semester to determine which educational strategy showed the most improvement with increasing writing self-efficacy.
Further research is recommended on the incorporation of prerequisite writing courses into nursing education programs. Research data could be collected on writing self-efficacy before and after prerequisite writing education courses. Writing education courses may be able to enhance writing self-efficacy and academic writing competence, which would be considered a beneficial asset for nursing students.

Writing self-efficacy research is beneficial for identifying writing areas that need improvement so that interventions may be implemented in BSN education to increase nursing students’ writing self-efficacy and enhance achievement of competent academic writing. A goal is for entry-level BSN students to meet or exceed writing competencies upon graduation, which will increase the potential for individual professional success and scientific and professional advancement of the nursing profession.

**Conclusion**

The purpose of this mixed-methodology research study was to empirically determine writing self-efficacy and qualitatively explore academic writing experiences of entry-level BSN students to determine facilitators and hindrances associated with achieving competent academic writing. The investigated research problem was the need to identify the facilitators and barriers to competent academic writing by examining writing self-efficacy and academic writing experiences of entry-level BSN students. The comprehensive approach of the dual data collection process was used for this study in order to comprehensively explore the intangible construct of the writing self-efficacy phenomenon.

The central quantitative research question and six of the eight quantitative subquestions were adequately answered. Two of the quantitative research subquestions
concerning writing self-efficacy and student status and writing self-efficacy and support-system status could not be answered based on the sample in this study.

Quantitative data analysis showed that this study’s sample of entry-level BSN students had varying levels of individual mean writing self-efficacy scores that ranged from 7.989 to 8.945 out of 10, which indicated that there were opportunities for improvement until individual mean writing self-efficacy scores reach the 9 to 10 range. The total mean self-efficacy score was 67.209 out of 80, which indicated that there were many opportunities for improvement until total mean writing self-efficacy scores reach the 90 to 100 range.

Significance was found for the null hypothesis related to gender differences. Females scored higher than males in writing self-efficacy. The remaining demographic variables (age, nursing student status, employment status, availability of family and friends as a support system, primary care-provider status, first-speaking language, and time frame of experience with successfully completing a college-level writing course) showed differences in mean writing self-efficacy, but the differences were not statistically significant. Even though the differences were not statistically significant, the data does have implications for nursing education and considerations for future research.

The central qualitative research question and the subquestion were adequately answered and indicated that a multitude of environmental, personal, and behavioral factors hindered and facilitated academic writing experiences of this study’s sample. Approximately half of the reported factors that facilitated and hindered academic writing experiences were environmentally related. Personal influences caused approximately a fourth of the hindrances and facilitators, and behavioral influences caused approximately
a third of the hindrances and facilitators. Environmental influences played major roles with hindering and facilitating success with achieving competent academic writing of this study’s sample of entry-level BSN students.

Awareness of this study’s data might influence nurse educators to consider assessment of entry-level BSN students’ writing self-efficacy for basic writing skills and understand that some BSN students may struggle with achieving competent academic writing. Additionally, data from this study might inform nurse educators about the hindrances and facilitators that affect entry-level BSN students’ abilities to succeed with academic writing and implement strategic interventions to help students manage and cope with environmental, personal, and behavioral issues shown in the reciprocal determinism model (Bandura, 1977, 1986).

Collaboration and integration of diverse teaching strategies are two key approaches that nurse educators might consider to help increase writing self-efficacy of entry-level BSN students. Increasing writing self-efficacy led to the potential for increased prevalence of positive outcomes (Clark & Dodge, 1999; Ergul, 2004; Kirk, 2012; Laschinger, 1996; Pajares, 1996, 1997, 2003; Tresolini & Stritter, 1994). Diverse teaching strategies refers to a variety of teaching methods and activities that nurse educators can incorporate into classroom and clinical settings to help increase nursing students’ writing self-efficacy. When students reported higher writing self-efficacy, their writing abilities had the potential of being improved. Diverse teaching methods to increase writing self-efficacy could occur within the local collegiate community and with the faculty and support staff of the nursing education program.
Strategic ways to help nursing students increase writing self-efficacy include the incorporation of personal and situational variables into educational plans by using the following strategies: personal goal setting by students, goal setting for students by nurse educators, student observation of peer and teacher role models, integration of early success feedback and ability feedback by nurse educators, and integration of a rewards system by nurse educators (Andrew & Vialle, 1998; Ergul, 2004; Schunk, 1991), and the opportunity for BSN students to become fully immersed in academic writing (Larsen & Reif, 2011). Additional classroom teaching methods that positively influence self-efficacy include question and answer sessions, collaborative learning, conceptual problem solving, integration and use of electronic applications, and lab activities (Fencl & Scheel, 2005; Kirk, 2012; Schunk, 1991). By incorporating the personal and situational variables into writing instructional practices and increasing writing immersion experiences, nursing students may have the opportunity to increase writing self-efficacy and academic writing competence.

Data from this study might inform nurse educators about the positive attributes of integrating academic collaboration at the community collegiate level. Faculty members from local community colleges and local universities could focus on the content of writing courses and the integration of writing education and writing immersion courses into nursing education. Additionally, collaboration with allied health care professionals, such as social workers and clinical psychologists, may assist nursing students with positively managing and coping with environmental social issues and personal and behavioral issues.
In summary, the statistical data from this study might encourage nurse educators to assist entry-level BSN students to achieve academic writing competence by addressing the following strategic initiatives: develop diverse teaching strategies that will increase writing self-efficacy, decrease the hindrances to achieving competent academic writing, and increase the facilitators to achieving competent academic writing. Data from this study might inform nurse educators about the environmental, personal, and behavioral influences for the hindrances and facilitators to achievement of competent academic writing for entry-level BSN students. Collaborative writing interventions and implementation of diverse teaching strategies to increase writing self-efficacy may help entry-level BSN students be successful with achieving competent academic writing, not only as nursing students, but also as future registered nursing professionals. The achievement of competent academic writing for entry-level BSN students is imperative for academic student success and for the sustainability of the nursing profession regarding evidence-based nursing practice, scientific inquiry (McMillan & Raines, 2010; Whitehead, 2002), and the dissemination of research findings (Lambie et al., 2008).
REFERENCES

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APPENDIX A: DEMOGRAPHIC SURVEY

Code number _____

Thank you for completing the survey. Please circle the one item that best describes you.

1. What is your age group?
   a. 18–25
   b. 26–30
   c. 31–35
   d. 36–40
   e. 41–45
   f. 46–50
   g. Over 50

2. What is your gender?
   a. Male
   b. Female

3. What is your nursing student status?
   a. Part-time
   b. Full-time

4. Besides your role as a nursing student, are you also employed?
   a. Yes, part-time
   b. Yes, full-time
   c. No, I am not employed

5. Besides your role as a nursing student, are you the primary care provider for someone in your household?
   a. Yes
   b. No

6. Do you have a support system of friends and family that you can rely on during stressful times in your life?
   a. Yes
   b. No

7. When did you successfully complete a college-level writing course?
   a. Less than a year ago
   b. More than a year ago
8. My first-speaking language is:
   a. English
   b. Spanish
   c. Other ______________

Thank you, again, for completing the survey. The results will be reported as group data so that individual confidentiality and anonymity can be maintained.
APPENDIX B: WRITING SELF-EFFICACY SURVEY


Code number: ______

Read each of the eight statements below. Think about your level of confidence to successfully complete each of the eight writing skills. Document your confidence level on a scale of 0–10. See sample scale below.

A 0 indicates that you have a very poor level of confidence and that there is great uncertainty that you cannot successfully complete the writing task.

A 5 indicates that you have an average level of confidence and that there is moderate chance or moderate certainty that you can successfully complete the writing task.

A 10 indicates that you have a very high level of confidence and that you know with complete certainty that you can successfully complete the writing task.

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I believe that I can:

1. Correctly spell all words in a one-page passage. ______
2. Correctly punctuate a one-page passage. ______
3. Correctly use parts of speech (nouns verbs, adjectives, and adverbs). ______
4. Write a simple sentence with proper punctuation and grammar. ______
5. Correctly use plurals, verb tenses, prefixes, and suffixes. ______
6. Write compound and complex sentences with proper punctuation and grammatical structure. ______
7. Organize sentences into a paragraph to clearly express a theme. ______
8. Write a paper with good overall organization, such as ideas in order and effective use of transitions. ______
APPENDIX C: GUIDING INTERVIEW PROTOCOL

1. Think about your learning experiences in nursing education and the formal academic papers (not reflective writing assignments) that you have been required to write for a course grade. Tell me about your general self-confidence with writing and your ability to meet grading criteria guidelines established for the formal academic papers.

2. Do you remember submitting a formal academic paper that where you did well? If so, what do you believe is the main reason for doing well on the paper?
   a. What resources (academic resources/technological resources/friends/family) did you use to complete the paper?
   b. Why do you think the resources helped you do well on the paper?

3. Do you remember submitting a formal academic paper where you did not do well?
   a. What do you believe is the main reason for not doing well on the paper? What interfered?
   b. What resources (academic resources/technological resources/friends/family) did you use to complete the paper?
   c. If you used resources, why do you believe that you still did not do well on the paper?

4. Do you remember submitting a formal academic paper on time by the due date? If so, what do you believe is the main reason for submitting the paper on time?
   a. What resources (academic resources/technological resources/friends/family) did you use to complete the paper?
   b. Why do you think the resources helped you submit the paper on time?

5. Do you remember submitting a formal academic paper past the due date?
   a. What do you believe is the main reason for submitting the paper past the due date? What interfered?
   b. What resources (academic resources/technological resources/friends/family) did you use to complete the paper?
   c. If you used resources, why do you believe you still did not submit the paper on time?
6. Think about a significant experience that helped you complete a formal academic paper and the resources you used (academic resources/technological resources/friend/family). Why was that significant experience important to you as a nursing student?

7. I am interested in what you perceive to be the most significant experience that prevented you from successfully completing a formal academic paper. What do you believe is the main reason for not doing well on the paper? What interfered?

   a. What resources (academic resources/technological resources/ friends/family) did you use to complete the paper?

   b. Why was that significant experience important to you as a nursing student?