

Abstract: *Students of diverse ethnic backgrounds, including those who speak English as an additional language (EAL) are increasingly enrolling in pre-licensure nursing programs. Limited information regarding success of EAL nursing students exists and has focused on those in traditional pre-licensure programs. A qualitative inquiry incorporating the phenomenological framework of van Manen was applied to study EAL student experiences in an accelerated second-degree baccalaureate nursing program. Five major themes emerged: (1) bridging cultures, (2) needing more time, (3) myriad of emotions, (4) network of support, and (4) finding my way. Several subthemes emerged to support major themes illustrating the complexity of being an EAL student in a fast-paced and challenging program.*

Key Words: *English as an Additional Language (EAL), English as a Second Language (ESL), Nonnative English speaker, Accelerated second-degree Baccalaureate, Nursing student*

LIVING IN TWO WORLDS: EXPERIENCES OF ENGLISH AS AN ADDITIONAL LANGUAGE NURSING STUDENTS

INTRODUCTION

There are many types of pre-licensure programs that provide education for entry into professional nursing practice. While hospital-based diploma programs still exist, nursing education shifted to the collegiate level in the latter half of the twentieth century, with greater emphasis on baccalaureate education. In particular there has been tremendous growth in accelerated second-degree baccalaureate nursing (ABSN) programs which offer a degree in 11 to 18 months. Graduates of these programs are in demand, both from employers as well as prospective students seeking rapid entry into the nursing profession (AACN, 2015).

The study site was an urban public university located in the mid-Atlantic region and recognized as a Minority Serving Institution and Hispanic Serving Institution. In this institution, a 12-month ABSN option was introduced in 2007, which graduates an average of 70 students per year. Students' first baccalaureate degree may be in any field, with five pre-requisite courses required prior to entry. The students of this program are diverse in terms of ethnicity (35% -40% ethnically diverse) and languages

spoken, similar to regional demographics. As the population becomes more diverse, the question of who cares for them when they enter the healthcare system becomes more important.

LITERATURE REVIEW

The United States Census Bureau (USCB) reported approximately 38% of the U.S. population is of minority or ethnic heritage, with Hispanics and Blacks being the largest minority groups. The USCB projects, more than half of all Americans are projected to belong to a minority group and by 2060 nearly one in five is projected to be foreign born (USCB, 2015). Further, projections indicate Hispanic and Asian American populations will triple within the next 50 years (USCB, 2015). In addition, the USCB reported 13.3% of the population is foreign-born, and nearly 85% of the population spoke a language other than English at home at least part of the time; numbers which have grown with each census collection (USCB, 2015). With changing demographics, the subject of diversity is one drawing greater attention across the nation, especially in the area of education. Students of diverse backgrounds are enrolling in colleges in greater numbers; however, gaps remain in graduation rates and campus diversity (Education Trust, 2015).

There are growing numbers of nursing students of minority backgrounds, as well as those who speak a first language other than English. A term frequently used in the literature is English as a second language

Kimberly Dudas, PhD, RN-BC, CNE, is Dean of the School of the Professions at the University of South Carolina Beaufort in Bluffton, SC. Dr. Dudas may be reached at: kdudas@uscb.edu.

(ESL), which includes international students born, raised and educated in another country, as well as those born, raised and educated in the US. There are also ESL students who immigrated during childhood and received part or all of their education in the US. These particular students are often referred to as “generation 1.5” because they are generally fluent in spoken English, but often experience difficulties with academic writing. Further, depending upon the extent of acculturation, generation 1.5 may or may not speak and read fluently in their native language and embrace native cultural norms to varying degrees (Harklau, 2003; Rumbault, 2012). What is definitive is that for all of these students, first language learned is a language other than English.

There has been an evolution of terms to recognize English may be a second, third, or fourth language for these students (Starr, 2009). Alternatively, they may be referred as an English as an additional language (EAL) student, which incorporates the multi-lingual student for whom English is not the primary language (Salamonson, Attwood, Everett, Weaver & Glew, 2013; Starr, 2009). English may or may not be the predominant language spoken outside of the educational setting, which can affect academic success (Salamonson et al, 2013).

These students remain immersed in their cultural and linguistic heritage to varying degrees, presenting challenges in the predominantly Eurocentric nursing education model that exists in the US. Limited studies exist exploring this population, with much of it focused on demographic data and linguistic fluency. Evidence suggests graduation rates are lower for nursing students of diverse backgrounds despite increasing rates of enrollment (NLN, 2011). Given changing demographics of the U.S. population, it is increasingly likely nursing faculty will encounter students of diverse backgrounds, including EAL students.

The pace and intensity of ABSN programs is challenging and attributes of students attracted to these programs differ from students entering traditional pre-licensure programs (Seldomridge & DiBartolo, 2007; Wink, 2005; Wu & Connelly, 1992). The literature revealed the profile of a typical ABSN student as white, female, and more likely to hold a previous college degree in a science. Further, the typical student is in her late 20s and completed a first baccalaureate degree less than seven years before enrolling in an ABSN.

There is limited literature related to EAL nursing students and of the research exploring academic performance and NCLEX-RN® success; the focus has largely been on ethnicity of traditional pre-licensure students rather than on first language of the students. Findings demonstrate attrition rates are higher, grades and NCLEX-RN® performance are often lower, but the data is inconsistent and reported in a manner that does not readily differentiate ethnicity from language. There are repeated suggestions that language acquisition is a variable affecting academic performance and NCLEX-RN® pass rates (Johnston, 2001; Mills et al., 1992; O’Neill et al., 2006; Salamonson et al., 2013); however, the literature has left this area largely unexplained.

With increasing diversity of the U.S. population there is greater need for nurses from diverse backgrounds, including those who are EAL. The call to improve diversity among healthcare professionals as a means to address changing demographics and healthcare disparities of

minorities is on-going. The Institute of Medicine (IOM) has called for greater attention to increasing the number of ethnically diverse health care professionals to reduce health care disparities (Smedley et al., 2004). Further, concerns have been raised as to the adequacy of cultural competence in health professions curricula given the current inadequacies in health profession student populations. Better communication and improved health care outcomes for ethnic minorities when there is greater diversity among health care professionals (Smedley et al, 2004; Sullivan Commission, 2004). To address these concerns, emphasis on inclusion of cultural concepts in nursing curricula has strengthened. Nursing program accreditation standards, American Association of Colleges of Nursing publication *Essentials of Baccalaureate Education for Professional Nursing Practice* (AACN, 2008) and national nursing competencies address cultural competence as a component of pre-licensure education (NLN, n.d.; Quality and Safety Education of Nurses [QSEN], 2014).

Despite the calls to increase nursing student diversity, no published studies related to EAL students in ABSN programs could be identified. As such, an exploration of experiences of ABSN graduates for whom English is an additional language was needed to begin to understand this phenomenon.

METHODS

A qualitative inquiry incorporating the phenomenological framework of van Manen (1990) was selected to capture the unique experiences of EAL graduates having completed an ABSN. The intent of this type of approach is to describe and convey these experiences in an everyday manner in which others could understand and agree (Sandelowski, 2000). Van Manen’s (1990) framework of lived existentials was incorporated to capture experiences with the intent of finding some meaning in those experiences. This framework incorporates the four existentials of body, time, space and relationships, which embody the experiences in a way that expresses what they mean to participants. Through this combined approach, experiences of participants could be more fully captured and shared in a manner that makes sense to others.

Data Collection

After IRB approval was obtained, data collection began by obtaining a list of the study site’s previous 12

Table 1. Open-ended interview questions

1. What was it like to be an EAL student in an accelerated second-degree baccalaureate nursing program?
2. Describe an academic or social situation you experienced during your education where your language or culture was involved. Who participated? What were the circumstances?
3. What makes this experience important to share?
4. What meaning does this experience have for you?
5. How did you feel during the experience?
6. What changes occurred because of this experience?
7. How did this experience affect those around you?
8. Is there anything else about the experience you think is important to share?

month's ABSN graduates, who were then contacted by e-mail. A purposive criterion sampling method was selected to identify potential participants. Potential participants were screened for first language spoken and narrowed down to those who self-identified as EAL. These individuals were contacted via email or telephone, and informed consent obtained. Individual interviews were conducted at a mutually agreeable location in semi-structured format with open-ended questions (Table 1) to allow for dialogue and description. Interviews were audio-recorded, then transcribed. Additionally, field notes and participant demographics were collected during the interviews. Data saturation was reached with 12 participants, eight women and four men. Pseudonyms were assigned to protect participant confidentiality.

Data Analysis

Transcripts were read and re-read, going back to audiotapes whenever necessary, before any coding occurred. Transcripts of interviews were then coded by the researcher utilizing an open coding format, incorporating the words of participants whenever possible. After initial coding of the first two interviews, transcripts and coding were sent to a member of the researcher's dissertation committee who affirmed the researcher developed codes were consistent with raw data. The remaining transcripts were coded and codes were grouped together until themes emerged. Each step of coding and emergence of themes was validated by a committee member.

Rigor was established through alignment with the framework of Lincoln and Guba (1985) which incorporates five criteria to support trustworthiness of findings. Techniques focused on triangulation of data sources such as audio files and interview transcripts which were compared to field notes. Theme validation occurred through member checking. Exemplars were distributed to all participants for feedback; three voluntarily provided feedback to indicate themes were an accurate representation of their experiences. Two peer evaluators unrelated to the study and familiar with EAL ABSN students were provided exemplars and shared feedback in support of themes identified. An audit trail was created to verify data represented all participants, demonstrating fairness to each one's experience.

FINDINGS

Through reflection, five major themes emerged from the data: (1) bridging cultures, (2) needing more time, (3) myriad of emotions, (4) network of support, and (4) finding my way. During data analysis it became clear that each participant had to overcome adversity to successfully complete the ABSN program, striking a balance between factors that supported program completion and those with potential to derail success. Participants were living in two worlds, bridging American culture and language with their native language and cultural norms.

Theme One: Bridging Cultures

Every day participants encountered differences between native language, values and cultural norms with those of dominant American culture. They had to seek a way to make a connection – or bridge – between the two, creating a lived space to travel. Culture and language were involved in all aspects of the ABSN program, compounded by the

need to learn the unique language of nursing and role of professional nurse. Participants described experiences where cultural norms were unfamiliar or caused confusion, and shared opportunities where American culture was more fully embraced. There was a sense from all participants that if one did not attempt to bridge aspects of American culture and language, future opportunities might be limited. None appeared willing to give up all native language and norms, nor did participants express a compelling need to do so. Although all participants appeared satisfied with their level of integration, they admitted there were times when being in the middle of two cultures and languages caused feelings of being left out or confused because of unfamiliarity with American cultural norms, foods, or colloquialisms.

American proverbs posed a challenge because participants did not understand the meaning behind them. Blanca encountered challenges with a standardized exam and unfamiliarity with an American proverb incorporated. She stated, "There was a question in regards if somebody's livin' in a glass house—there's like a saying that if you live in a glass house, you don't throw [stones]... I didn't understand." She investigated this proverb further after the exam. "I asked some other of my classmates who were non-English speakin'—like as a primary language they didn't know that... We were not familiar with that [and] we didn't get the question... I was lost." She still appeared unsure how to interpret the proverb and had some difficulty recalling it because it seemed so odd to her.

Eun is a 20-something Korean female who immigrated to the US as a child. She lives with her parents who speak Korean at home and have limited English proficiency. She talked about speaking two languages every day stating "I speak English outside of my house so as soon as I step into my house it would revert back to Korean."

Prabal shared an incident where he had been seeking career advice from a family friend of similar cultural background and was being directed away from nursing. "He was like, 'You gotta enjoy what you do. But you probably wanna go be a PA. Because—ya know—PAs are men.'" Although his father never verbalized his concerns about Prabal pursuing nursing, he sensed his father might have had concerns about career choice because of his gender when he suggested at graduation, "You might consider going into the Armed Services. They won't call you a nurse. They'll call you a lieutenant or a captain."

Theme Two: Needing More Time

Participants consistently described the ABSN program as intense or fast-paced. Time constraints are inherent in this type of program for any student, but especially so for participants. Time factored into all aspects of the program and, as a result participants expressed anxiety about teaching-learning strategies that were influenced by their need for more time. Participants felt time passed too quickly and seemingly loosened from their grasp despite attempts to hold on to it – the experience of lived time. Many participants attended school in their native countries where instruction was in English. Of those who were instructed in English, it was universally reported content was the focus; speed of reading, conversing and testing in English were not of concern. Despite having familiarity with English, these participants encountered challenges

associated with time available for learning activities similar to participants who had not had previous instruction in English. A feeling of "falling behind" and wishing for more time was experienced throughout the program, but especially early on as participants were becoming familiar with the rigors of an ABSN.

Samuel, who received instruction in English, echoed other participant concerns about the speed of reading:

"I wouldn't read so fast as people were doing. Sometimes I realized I'm falling behind. The American students told me they did maybe four chapters with this particular amount of time. And I was wondering how they were able to do that. It took me a long time to catch up with the reading."

Blanca shared she would encounter everyday English words she was unfamiliar with during classroom testing, stating, "I will try to find the meaning by the sentence . . . I wouldn't feel comfortable [asking the instructor] because maybe I would think how come she doesn't know that word."

Participants often lamented the amount of writing, describing it as the most time consuming and challenging part of the program. Writing was described as a process in which the final product barely resembled initial writing. Writing may have started in one's native language or a mix of languages, then edited many times. A sense of being suspended in time emerged, where the written assignment required a great deal of time in thought before any actual writing began. Writing was again suspended in time as it was proofread and edited, often multiple times, before producing a final paper.

Edith spoke of needing "double the time" to complete written assignments. "I spent so much time reading, reading. I have to sleep over the paper. The first time I finished an assignment . . . I felt I was going to be dead." She indicated she would read a paper several times, catching errors only after multiple readings. "The first time it's good, the second time is good, but the third time how come something is different?"

Theme Three: Myriad of Emotions

Participants described a myriad of emotions experienced as a student in the ABSN program. Several suggested the stress of an intense program were universally experienced by all students but there were unique differences related to culture and language. Lived body is evident from the feelings of frustration, hurt, being overwhelmed, guilt, and fear that were commonly reported.

Svetlana taught English in her native country and thought she had an excellent command of the English language. She shared her struggles. "School, for me, was the first place where everyone just spoke English." She considered quitting in the first semester because she felt overwhelmed. "I cried like every week."

Omoredede shared he was most concerned about looking "stupid" in front of classmates admitting he did not often ask questions in class because of this fear. He recalled an event during class where he was bold enough to ask a question. He was unclear in his thinking and asked faculty to clarify:

"I actually took everybody back, two, three steps which is not always the best thing to do in the classroom. The psychology of the entire thing is that you're feeling as if you're strange; you are different... no one want(s) that to happen to you."

Bem spoke of anxieties related to his accent:

"I try to speak slowly. People understand me more. But at times you forget when you are trying to express a point. You begin to speak your accent and your speech. At that point, people do not understand what you are saying."

Theme Four: Network of Support

Participants readily confessed they had a network of support to help them get through the ABSN program. They admit they knowingly made a choice to complete a fast-paced program and recognized there would be sacrifices along the way. There were times when it became harder than anticipated and some even contemplated dropping out. They attribute their ability to complete the program to multiple sources of support. Without this support, many believe they would have failed or been dismissed from the program regardless of their mastery of English or level of intelligence, because day to day experiences of an ABSN program were extremely demanding. This is personified by Edith who stated, "I think if I don't have the support, it's impossible." Lived relationships with family and friends, classmates, faculty, and one's faith created support systems which were extensive.

Rani shared a camaraderie with her classmates, especially among certain students. They encouraged each other and worked to keep each other from falling behind, which Rani described in this manner:

"We pulled each other through which was amazing to me because when I saw students in class... my fellow students and some of them were moms just like me, they would pull you through. It was not like, okay, she's not pulling through. Let's just leave her behind."

Gita shared an example of faculty support by adjusting due dates, sharing an example of a religious holiday that did not permit her to attend school on a day of a scheduled exam. "[The faculty] was very helpful to come another day to take my test." She also shared that faculty were willing to provide ungraded feedback on assignments to help students improve the quality of their work.

Theme Five: Finding My Way

Participants readily shared their struggles with completing the program. Their ultimate success occurred because participants actively explored what was and was not working. They recognized in order to be successful, they often had to change long-ingrained study techniques, sometimes change their way of thinking, and focus on time management to best utilize available time. A sense of perseverance emanated from participants as they shared finding their way to success. Edith summed this up when she said, "Even though I have a lot of obstacles in front of me, I don't give up on myself."

Sun shared how important recording classes was for her. She felt she was "chasing the studying" and started

to record classes because she could not keep up with note-taking during class. She listened to audio recordings on her long commute stating, "I never listened to my music. That was my music my whole semester." She found listening to recordings over and over was helpful because, "When you listen the first time you don't notice that. But the second time you found something missing [the first time]. Ah ha, she mentioned about this one so the third time is difference compared to the second time."

Rani shared her shifting perceptions towards health and illness. In her native country, people who are ill are often kept hidden from public view. She stated, "I would see people walking with oxygen tanks, and I'm like oh my God, if you need an oxygen tank you should be home. But then I'm like, they have a life too." She learned that isolating oneself because of illness is not helping the person and changing the environment can change one's mood. She also felt her perception of chronic illness change over time from one of sadness to acceptance. "I would see people with chronic illnesses and I would see them in and out of the hospital but they're still happy . . . and they're joking. It was like okay, positive." She had never before considered people with chronic illness might still be happy and enjoy life, despite chronic health problems.

DISCUSSION

Given the nature of 21st century healthcare, no one seems to question how difficult nursing school is. Certainly, nurses are knowledgeable of the complexities of practice, and even the general public is aware that nursing is not simple. It is assumed that becoming a nurse is difficult and full of hard work, but there is a perception that challenges are similar for all nursing students regardless of background. What is not so readily acknowledged are the unique challenges for EAL students.

Findings from this study demonstrated the unique challenges for EAL students enrolled in an ABSN. What shines through is their perseverance to overcome those challenges. Language and culture influenced experiences of participants and bridging culture and language was a major theme. Participants had to learn to navigate differences in language and culture, and in the process learned about themselves and how they could positively impact the nursing profession. There were good and bad days, academically, socially, and personally and it was clearly evident a multi-layered support system was integral to participants' success. The pervasiveness of lived time created challenges for participants and was the one with the greatest potential to derail successful completion of the program. The need for more time created challenges to complete tests, readings, and assignments by due dates. Had participants missed deadlines, grades would have been adversely affected. Throughout their experiences, participants overcame barriers and shifted perceptions of themselves and others. These experiences had the potential to derail participant success, yet they succeeded. Their stories demonstrate it is far more than intelligence that is needed for an EAL student to complete an accelerated second-degree baccalaureate nursing program.

IMPLICATIONS

English as an additional language has largely been an invisible variable in nursing education. Nursing education

programs should be encouraged to include EAL status as a variable to collect in their databases. This data could provide nursing education programs information about the need for support programs targeted toward EAL nursing students as these programs could positively influence student success. Further, findings support the need for faculty who are culturally sensitive. Because nurse educators are the least diverse subset of the nursing workforce, there is concern that faculty may be very Euro-centric in their approach, alienating EAL students (Hassounah, 2008). Training programs for faculty that provide cultural sensitivity training, especially training specific to cultures that are predominant in the student population would strengthen nursing education programs and have the potential to improve retention rates. Additionally, faculty training should emphasize time as it relates to reading, writing, and testing. Training programs would build a group of bridging faculty as described by Yoder (2001) and provide trained faculty to provide writing assistance. In this study, peer support was part of the larger network of support. Nursing education programs with larger numbers of EAL students could offer support groups specific to this population. It would be helpful to have a role model as a facilitator, perhaps a faculty member or graduate of the program who is a non-native English speaker. A peer support group could provide academic as well as emotional support to promote retention of EAL students.

Participants in this study provided examples where their ability to speak another language positively influenced the care of patients. Agencies serving diverse communities should explore their recruitment and retention efforts of non-native English speaking nurses to promote the health of patients and the communities they serve. Agencies that recruit non-native English speaking nurses should consider if and how language and culture influences new employee orientation. Whenever possible, preceptors should be non-native English speakers as well. These preceptors could serve as great role models for the new non-native English speaking nurse and potentially improve new nurse retention.

LIMITATIONS

The availability of data inclusive of EAL status challenges researchers to identify and study this population. There is no state or national database for use in participant recruitment from which to draw for further study. These findings represent participants from one nursing program located in a diverse urban setting and may be unique because the participants and faculty live and work in this diverse region of the country and cannot be generalized. Findings offer a first step to understanding the experiences of EAL nursing students in an ABSN and can offer suggestions to guide future research.

CONCLUSION

This study is the first known to explore non-native English language speakers in an ABSN program, demonstrating the need for further consideration. Exploring factors that influence attrition among EAL nursing students could inform nursing education and lead to the development of strategies to promote retention and diversify the nursing workforce. It has been suggested healthcare professionals who speak another language can reduce health care

disparities (AHRQ, 2007; Smedley et al., 2004). Studies exploring the role and impact of multi-lingual nurses on health care disparities could demonstrate the need for more diverse nurses in vulnerable communities and provide a platform to advocate for more funding of programs that aim to reduce those disparities.

REFERENCES

- Agency for Healthcare Research and Quality. (2007). *National healthcare disparities report*. Retrieved from <http://archive.ahrq.gov/qual/nhdr07/Key.htm>
- American Association of Colleges of Nursing. (2008). The essentials of baccalaureate nursing education for professional nursing practice. Retrieved from www.aacn.nche.edu/education-resources/baccessential08.pdf
- American Association of Colleges of Nursing. (2015). *Accelerated Entry-Level Baccalaureate and Master's Degrees in Nursing*. Retrieved from <http://www.aacn.nche.edu/media-relations/fact-sheets/accelerated-programs>
- Education Trust. (2015). *Rising Tide: Do College Grad Rate Gains Benefit All Students?* Retrieved from <https://edtrust.org/resource/rising-tide>
- Harklau, L. (2003). Generation 1.5 students and college writing. *ERIC Digest*, EDO-FL-03-05. Retrieved from http://webdev.cal.org/development/resources/digest/digest_pdfs/0305harklau.pdf
- Hassounah, D. (2008). Reframing the diversity question: Challenging Eurocentric power hierarchies in nursing education. *Journal of Nursing Education*, 47(7), 291-292.
- Johnston, J. G. (2001). Influence of English language on ability to pass the NCLEX-RN. In C. F. Waltz & L. S. Jenkins (Eds.), *Measurement of nursing outcomes* (2nd ed., pp. 204-206). New York, NY: Springer.
- Lincoln, Y., & Guba, E. (1985). *Naturalistic inquiry*. Thousand Oaks, CA: Sage.
- Mills, A. C., Becker, A. M., Sampel, M. E., & Pohlman, V. C. (1992). Success-failure in the national council licensure examination for registered nurses by nurse candidates from an accelerated baccalaureate nursing program. *Journal of Professional Nursing* 8(6), 351-357.
- National League for Nursing. (2011). *Nursing Education Research*. Retrieved from http://www.nln.org/researchgrants/slides/topic_nursing_stud_demographics.htm
- National League for Nursing. (n.d.). *Education Competencies Model*. Retrieved from http://www.nln.org/docs/default-source/professional-development-programs/comp_model_final.pdf?sfvrsn=4
- O'Neill, T. R., Marks, C., & Liu, W. (2006). Assessing the impact of English as a second language status on licensure examinations. *CLEAR Exam Review*, Winter, 14-18.
- Quality and Safety Education of Nurses. (2014). *Pre-licensure KSAs*. Retrieved from <http://qsen.org/competencies/pre-licensure-ksas>
- Rumbaut, R.G. (2012). "Generation 1.5, Educational Experiences of." In James A. Banks, ed. *Encyclopedia of Diversity in Education*. Thousand Oaks, CA: SAGE Publications.
- Salamonson, Y., Attwood, N., Everett, B., Weaver, R. & Glew, P. (2013). Psychometric testing of the English Language Acculturation Scale in first-year nursing students. *Journal of Advanced Nursing*, 10, 2039-2045.
- Sandelowski, M. (2000). Whatever happened to qualitative description? *Research in Nursing & Health*, 23, 334-340.
- Seldomridge, L. A., & DiBartolo, M. C. (2007). The changing face of accelerated second bachelor's degree students. *Nurse Educator*, 32(6), 240-245.
- Smedley, B. D., Butler, A. S., & Bristow, L. R. (Eds.). (2004). *In the nation's compelling interest: Ensuring diversity in the health-care workforce*. Washington, DC: National Academies Press.
- Starr, K. (2009). Nursing education challenges: Students with English as an additional language. *Journal of Nursing Education*, 48(9), 478-487.
- Sullivan Commission on Diversity in the Healthcare Workforce. (2004). *Missing persons: Minorities in the health professions*. Retrieved from <http://www.aacn.nche.edu/media-relations/SullivanReport.pdf>
- United States Census Bureau. (2015). *People and households*. Retrieved from: <http://www.census.gov/people>
- van Manen, M. (1990). *Researching lived experience: Human science for an action sensitive pedagogy*. New York, NY: The State University of New York Press.
- Wink, D. M. (2005). Accelerated nursing programs for non-nursing college graduates. *Annual Review of Nursing Education*, 3, 271-295.
- Wu, C. Y., & Connelly, C. E. (1992). Profile of nonnurse college graduates enrolled in accelerated baccalaureate nursing programs. *Journal of Professional Nursing*, 8(1), 35-40.
- Yoder, M. K. (2001). The bridging approach: Effective strategies for teaching ethnically diverse nursing students. *Journal of Transcultural Nursing*, 12, 319-325.

Copyright of Journal of Cultural Diversity is the property of Tucker Publications, Inc. and its content may not be copied or emailed to multiple sites or posted to a listserv without the copyright holder's express written permission. However, users may print, download, or email articles for individual use.