

From Vocational College to University:  
How One Group of Nurses Experienced the Transition

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Abstract

**This qualitative descriptive study explored Post LPN to BN students' perceptions of their studies at a Canadian University. Kelly's (1955/1991) Psychology of Personal Constructs was the theoretical framework for this three year longitudinal project in which 10 Post LPN to BN students were interviewed at the beginning, middle and end of their program. Transcripts from the interviews were analyzed and two key themes are presented to illustrate the experiences of one group of adult learners, Licensed Practical Nurses, as they upgraded their vocational credentials at the university. Study results found that creating opportunities for Post LPN to BN students to articulate previous accomplishments bolstered their confidence. Further, instructor encouragement supported them towards self direction and independence.**

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**Introduction**

Vocationally prepared Licensed Practical Nurses (LPN's) who enter the university to upgrade their credentials by earning a Bachelor of Nursing (BN) degree can find the experience overwhelming. And yet, educational research examining the transitions these adult learners undergo is limited. This article describes findings from a qualitative descriptive study that applied Kelly's (1955/1991) Psychology of Personal Constructs as employed to investigate the transitional experiences of 10 Post LPN to BN students who extended their nursing education by attending university. The project spanned three years and involved

thematic analysis of interview data collected at the beginning, middle and end of participants' program of study. By illustrating students' views and using their own words to describe their transition over time, this longitudinal study begins to offer insight into how one group of nontraditional learners, Licensed Practical Nurses, gained confidence, self direction and independence.

**Literature Review**

*Transitioning from Vocational to Higher Education*

The experience of transitioning from vocational college to university is not straightforward. Traditionally, these students chose to attend either a vocational college or a university to prepare for their career. Further options for transitioning between the sectors have existed. In an early study of educational participation in the United States, Arum and Shavit (1993) wrote: “vocational education at the secondary level ... does inhibit students’ chances of continuing on to [the university] and as such, it probably inhibits their chances of reaching the professions and most prestigious occupations” (p. 20).

Today, although more opportunities are available for such students to apply their vocational credentials towards university credit, the process is seldom seamless. In his investigation of the relationship between vocational and higher education sectors in The United States, Canada, the United Kingdom and Australia, Moodie (2008) emphasized that determining equivalence between qualifications is difficult in vocational training sectors, making awarding credit for what learners from different programs have achieved particularly difficult.

Vocational training programs that exist are generally designed to prepare graduates more for the workplace than for university entrance. Hoelscher, Hayward, Ertl & Dunbar-Goddet (2008) questioned whether participation in vocational training could provide a successful progression into higher education. In their research exploring learners’ transition from vocational to higher education Hayward, Dunbar-Goddet, Ertl, & Holscher (2008, May) asserted that “parity of esteem between vocational and academic qualifications remains a myth” (p.1 ).

Vocational programs are more likely to provide considerable individual guidance and encourage instrumentality; making the more anonymous impersonal university

environment difficult to comprehend (Crabtree, Roberts and Tyler, 2007, September 13). Students transitioning from vocational to higher education appeared to be unaware that independent learning was a requirement for success in higher education and lacked many of the skills necessary for effective independent study (Crabtree et al). Also college prepared Social Work students found that the transition to a research-led university was not easy (Cree, Hounsell, Christie, McCune & Tett, 2009). Hayward et al ( 2008) found that vocational students who transitioned from training programs to university experienced difficulties understanding what was expected of them, particularly in the areas of essay writing and mathematics. Confidence, self direction and independence are key elements as adult learners transition from vocational to higher education.

**Confidence.** Students are more likely to take on new and more independent behaviors confidently and efficiently if they feel their previous experience has equipped them with sufficient capabilities. Bandura’s (1997) seminal work with self-efficacy, or the level of confidence individuals have in their ability to execute a course of action or attain specific performance outcomes, established a critical link between articulating previous accomplishments and raising confidence levels. Previous accomplishments, (also referred to as performance accomplishments), refer to similar activities that have been repeatedly and successfully completed in the past. Such repeated and successful completions of similar activities raise learners’ confidence, whereas repeated failures in past activities lower it. In her concept analysis of self confidence in nursing students, White (2009) emphasized the importance of belief in positive achievements among both practicing and student nurses.

**Self direction.** Similarly, students

can be expected to demonstrate increased levels of self direction when they believe their previous accomplishments are recognized. Self directed learners are active participants who are highly motivated, make use of problem-solving skills, have the capacity to engage in independent learning activities, and autonomously manage their own learning (Brookfield, 1985; Knowles, 1975; Tough, 1979). However, as O'Shea's (2003) literature review of self direction in nursing education revealed, not all students are self directed and nurse educators have an important role to play in developing this skill.

**Independence.** In his work exploring student autonomy in learning, Boud (1988) identified that the main characteristic of autonomy or independence in learning was that students take significant responsibility for their learning above and beyond responding to instructions. Certainly, for vocational learners, who are more familiar with instrumental guidance, it is not unexpected that demonstrating independence may be particularly challenging.

#### *Nursing Education*

In Canada, two separate levels of nurse training exist. A Licensed Practical Nurse program can be completed in one or two academic years at a vocational college; and a Baccalaureate degree in nursing, which is required for entry to practice as a Registered Nurse (RN), can be completed in three or four academic years (Canadian Institute for Health Information CIHI, 2006). Kearney-Nunnery (2009) differentiated between nursing roles by explaining that LPN's "collect client data and decide who needs to be informed" while RN's "synthesize client data and make independent decisions" (p.19).

Historically, Canadian university

programs have not offered nurses the opportunity to bridge between vocational and higher education sectors. However, participants in the present study attended a new university program where they were awarded prior academic credit for LPN experience. Although core nursing curriculum courses were developed specifically to build on their existing competencies, Post LPN to BN students were required to select other nursing courses and general electives from the university calendar. Therefore, their program differed from typical undergraduate or second degree programs in that they did not take introductory courses in the discipline of nursing.

A paucity of research exists to explain the transitions that Licensed Practical Nurses experience when they attend the university. The process of learning a more complex role is expected to be stressful (Brown, 2005; Claywell, 2003; Dearnley, 2006; Rapley, Nathan & Davidson, 2006). Post LPN to BN students can associate gains from their university education with a loss of their hands on nursing role (Melrose & Gordon, 2008). Some LPN's approached their university education with a belief that they were "already functioning as RN's and have little to learn beyond RN-specific tasks and that they are essentially just getting the credential to support their current practice" (Porter-Wenzlaff & Froman, 2008 p. 233). Instructors noted the importance of early identification of students at academic risk (Ramsey, Merriman, Blowers, Grooms & Sullivan, 2004). Graduates may find the role more mentally and physically trying than they expected (Kilstof & Rochester, 2004) and they may not actually identify with the RN role until returning to the work setting (Shultz, 1992). Textbooks are available to articulate transitional processes and to support LPN to RN students

(Claywell, 2008; Harrington & Terry, 2009; Kearney-Nunnery, 2009).

The present project, part of an overarching program of research examining Post LPN to BN transitions, explored students' perceptions of their university experiences. While the main purpose of the project was to understand how vocationally trained nurses adapted to higher education, a secondary purpose was to consider instructional strategies that support learners' own processes of adapting and coping.

### Method

This three year longitudinal study collected audiotape-recorded transcribed interview data from 10 LPN to BN students at a Canadian university. From January 2007 through to December 2009, data from semi structured interviews with LPN to BN students was collected at three different times. Kelly's (1955/1991) Repertory Grid Methodology (Fransella, 2005) was used to create the structure for the interviews and has been described elsewhere (Melrose & Gordon, 2008). Full ethical approval was granted by the university. NVIVO software was used to organize the data collection and analysis. Trustworthiness was established through ongoing interaction and member checking with participants to ensure authenticity.

The following two themes emerged from content analysis (Denzin & Lincoln, 1994; Lincoln & Guba, 1985; Loiselle, Profetto-McGrath, Polit & Beck, 2007; Speziale & Carpenter, 2007) of the interview data and were confirmed with participants. Verbatim comments are italicized. First, creating opportunities for Post LPN to BN students to articulate previous accomplishments bolstered their confidence. Second, instructor encouragement supported them towards self direction and independence.

### Results

Theme One: Creating opportunities for Post LPN to BN students to articulate previous accomplishments bolstered their confidence

*Lack of confidence. Post LPN to BN students may enter university with limited confidence. LPN programs prepare graduates to collect patient data, report that data to Registered Nurses and to act only when authorized. As one participant at the beginning of her program explained: "See, with a Licensed Practical Nurse, we're practical. We [are told] what's good, what's bad, how to do it. And you have somebody very harsh standing over you." Another participant commented on how she had always worked "in someone's shadow" and her experience with learning was that "someone told you what to do." When a participant did not complete assignments she felt she was "not supported. No one asked -how's it going, what can we do for you? When I did my LPN, they rode us hard and made us better nurses for riding us hard. And, they supported us and said that we're doing a good job." However, in the university environment, she discovered: "You don't have somebody harping on you. You don't have somebody giving you the guilt trip."*

*Reflecting on the lack of confidence that can be apparent in LPN practice, a participant who graduated from the Post LPN to BN program clarified: "The LPN's are always calling me... they want to verify if it's alright for them to do certain things. I have to tell them, OK, you can do this. You have to keep going back to them because they keep calling for assistance. I wonder if its confidence?" Another graduate commented: "when I was an LPN, I had to*

always go to the nurse that I'm working with to ask her what can I do in this situation?"

*Further, as adults, returning to formal learning was intimidating. As one single mum expressed: "the biggest barrier for me was the actual decision of returning to school, and my own, the lack of I guess, of confidence, that yes, I can do this as a mature woman with 2 grown children. That was I think, my own sense of self and can I do this? I kept saying, no, I can't do this. It's too hard. There's no way." A practitioner who had been in the workforce for fifteen years stated: "I'm not a big reader of books, so for me getting back into reading, you know, text books was a lot harder. I had to get my mindset. I had to really focus on thinking as a student." Another commented "I was afraid of failing. I didn't even tell anybody at first in case I couldn't do it." Writing essays was challenging as illustrated in statements such as: "Handing my first assignment in to any new instructor is terrifying for me;" "Everything we write has to be quoted from somebody;" "Initially I didn't know what APA was;" and "[instructors] all mark differently – I don't know what they want." And, all of the participants described limited confidence in their mathematical abilities. Comments such as "I was terrified of statistics" and "I hate math" were common.*

Participants who spoke English as a second language described feeling a lack of confidence communicating. *"I think challenge is English as second language, because some feelings and attitudes need to have the right words to be used to express them without offending the other person." "The way the school works here is much different from back home. Maybe I didn't ask the right question for what I was expected to have an answer. Maybe because English is my second language, I cannot formulate very precise questions. I'm trying*

*to work on that." "It's hard to fit in a system that is different from what you have been used to."*

**Articulating previous accomplishments.** However, when opportunities to articulate their previous accomplishments were presented, participants expressed considerably more confidence. When describing skills in the clinical area, the following remarks were typical. *"I know what people are like when they're sick and how to deal with them. I have that common sense." "It's a practical profession and you learn right at the bedside, I've done that." "Showing a human face to people- I know what that means. Take into context everything that's affecting that person. Why they're behaving in a certain way."*

Upgrading the knowledge, skills and attitudes Post LPN to BN students achieved in their vocational training to those required in university left participants feeling that, at times, their previous accomplishments were not really valued. One participant explained: *"There's just a sense of patronizing or condensation or oppression because it doesn't feel like the LPN is valued in the program."* Most of the participants related incidents where their *"scope of practice allowed [them] to do [a clinical task], but their instructor had to watch me."* *"It was demeaning to feel that I had to reassert my ability to do something."* *"We shouldn't have to prove again that we are licensed to do [certain clinical skills]."* In her workplace, a senior LPN described an incident when *"a colleague came up to me and said congratulations - you're going to be a nurse. It's great. We really need nurses. And this is an RN talking to me who has worked with me for 8 years. I said- I am a nurse, but thanks."*

Participants were very open to instructors *"having their own ways of checking us."* They acknowledged that

determining equivalence among LPN qualifications is difficult. LPN programs can range in length from one to two years; and LPN admission requirements can range from work experience as a Nursing Assistance through to grade 12. But, while students accepted the inherently different evaluation requirements of their new nursing role, they felt they were not heard when they tried to say they had already mastered a task. There were few opportunities to articulate the previous accomplishments that had inspired and maintained their confidence.

**Opportunities to bolster confidence.** When participants were asked what advice they would offer instructors in their program or managers orientating them to their new role, responses repeatedly related to a need to be heard in relation to what they *'can already do.'* There was a need for *"reaffirmation of what we bring, all through the program, in [all] the courses"* and when re-entering the workplace in a new role. Throughout the three year study, Post LPN students and graduates consistently enjoyed describing instances when they had been successful. One participant's familiarity with a set of behaviors equipped her to deal with a challenging mental health client. Several participants were very proud to share how they had helped fellow students and RN staff in the clinical area as a result of their previous nursing experience. A senior LPN described herself as *"not just a kid coming out of high school [but someone who] had hardships and made it through so many things that nobody even knows about."* Another newly graduated participant expressed pride in helping other new RN hires as she was familiar with working in a hospital setting. Participants agreed that discussing previous accomplishments bolstered their confidence and that they wanted more opportunities to do so.

Theme Two: Instructor

encouragement supported them towards self direction and independence

Throughout the research interviews, participants frequently emphasized their need for instructor encouragement. Used to health care environments where mistakes can have serious consequences, these nurses had high self expectations. In one participant's words: *"I'm a perfectionist. It's bad if I get a 93% - Why not a 95%?"* Comments such as *"needing the encouragement [from instructors],"* *"needing the understanding of the teachers,"* and *"wishing there was acknowledgement when we get over a barrier"* were typical. One participant emphasized: *"we need that encouragement and guidance and just that drive. You're OK, I'll stand beside you. I'll walk beside you. You can do it!"*

Encouragement did not mean *"just saying everything's OK."* For this group of nurses, knowing specifically what they needed to do to improve and excel was important. Writing papers, participants wanted concrete tangible suggestions to strengthen their submissions and not *"just tearing the paper apart."* Feedback such as *"This is good but work on ..."* was valued. When asked to elaborate on the kind of encouragement that helped them become more confident in their writing, the following statements were common. *"One instructor told me to use more nursing journals – not magazines or even not medical journals."* *"You've got good structure in your writing – but it's choppy. Use transition words to help the flow and smooth it out."* One participant who had graduated from the program described an incident where she read an assignment a colleague completed for another university. Describing the assignment, she questioned: *"Are you going to present this? [At our university] you go out of your way to do everything before you can get good marks."* She seemed proud to add *"they want to*

*create a standard which is good because I found out that they are very, very strict in their marking. You don't just get an A."*

In practicum courses, students recounted numerous instances where the encouragement they received from instructors and preceptors supported them towards self direction and independence. Pride was apparent in voice tone and inflection when they described instructor comments such as "[name] told me my communication skills were strong already" and [name] said the way I handled [incident] showed a great strength that I had." They felt welcome and more willing to risk new behaviors after hearing preceptors' statements such as: "They [Post LPN to BN students] already knew how to do blood pressures, assessments, admissions and charting," "these students already know their stuff" and "they have the experience and the background to [complete nursing care]." On the other hand, one graduate became tearful when relating an incident where a preceptor told she was not succeeding but did not give direction for improvement. Although the incident occurred nearly two years ago, she still felt "raw." Another graduate related how she "kept everything – all the comments on my papers and my clinical evaluations – I don't know if they know how much we take evaluation to heart."

## **Discussion**

These two previously identified themes, developed from interviews with nurses who transitioned from vocational college to university, illustrate how important it is for this group of adult learners to articulate their previous accomplishments and to receive instructor encouragement. Post LPN to BN students were trained to seek direction before acting and can be expected to lack confidence and

familiarity with the self direction required at university. While they were well prepared for health care workplaces, they anticipated instrumental guidance and felt overwhelmed when required to learn independently. Casting their transitioning experiences against Bandura's (1997) view that critical links exist between successful previous accomplishments and increased confidence levels, this study leads us to consider ways to create more opportunities where learners can share what they know.

Many of the nurses' experiences are similar to those of other learners transitioning from vocational to higher education. Like Hayward et al's (2008), findings, Post LPN to BN students found essay writing and math particularly difficult. Like the business students Crabtree et al (2009) discussed, Post LPN to BN students also initially lacked the skills needed for independent study. And, like the social work students Cree et al (2009) described, Post LPN to BN students too found adjusting to a research led university challenging.

However, some of the transitions that this group of nurses experienced are unique. Their existing knowledge of client conditions, their comfort with health care environments and their previous achievements in the area of clinical skills were strong. They brought a significant body of nursing and health care knowledge to their classes and practicums. So, requiring these professionals to reassert their proficiencies did little to increase their confidence. Nor did it inspire self direction or independent thinking. On the other hand, affirmations of their practical understandings and expertise bolstered their confidence and inspired them to go beyond simply responding to instructor direction.

In particular, participants in this study emphasized how important it was to them to read or hear words of encouragement from instructors, preceptors,

mangers and the staff they worked with. Perhaps more than other adult learners, Post LPN to BN students yearned for acknowledgement that their efforts to succeed and excel were recognized. And, they wanted frequent connections with the individuals who evaluated them so they could correct and improve their performance. Therefore, in both classroom and practical learning environments, scheduled opportunities for students to converse individually with instructors are needed.

Kicken, Brand-Gruwel, Merricaboer and Slot's (2009) research with vocational learners emphasized the value of supervisory meetings in developing self direction. Simply arranging regular points of contact where learners could e-mail, telephone or meet their evaluators to discuss their strengths and areas to grow will boost confidence. Knowing how deeply these nurses integrate feedback, how they can feel "raw" remembering a non constructive evaluation even years later and how they may "keep all the comments on my papers and clinical evaluations," educators have a responsibility to ensure that time for listening and encouragement is available. Perhaps most important of all, educators cannot ignore any opportunities to formally recognize instances when students project confidence and initiate activities beyond just what they have been required to do.

Occasions for articulating accomplishments and feeling encouraged are not limited to interactions with those who formally evaluate students. Assignments can be structured to identify previous knowledge and distinguish new learning. For example, creating case studies of former patients and extending the presentation with a comprehensive literature review. Partnerships with fellow students can be developed to include peer evaluation. Staff teaching sessions can be initiated where

learners provide workshops or informational materials during practicum placements. Program wide logs, journals or portfolios to record achievements will illustrate growing independence and decrease reliance on instructor directed activities. Thus, although initially more interaction with instructors and evaluators may be necessary, this can decrease once students internalize university level expectations.

### **Conclusion**

This article presented findings from a longitudinal study that explored the experiences of Post LPN to BN students who transitioned from vocational to higher education. The research investigated how this group of nontraditional learners gained confidence, self direction and independence. In contrast to other studies that explored the experiences of vocationally prepared individuals attending university, this project extends our knowledge of what it was like for nurses trained to practice in a dependent role adapt to university and become more autonomous. The research found that creating opportunities for Post LPN to BN students to articulate previous accomplishments bolstered their confidence and that instructor encouragement supported them towards self direction and independence. Implications for teaching include ensuring that students have regularly scheduled points of contact with their instructors, preceptors and evaluators; creating assignments that include and build on previous learning, developing peer evaluation partnerships and initiating student led staff teaching sessions. Recognizing previous accomplishments, finding ways to showcase them and offering encouragement rather than instrumental direction can have a profound impact on these learners' continued success.



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