**Qualitative Analysis of Student Perceptions of Bachelor of Science-to-Doctor of Philosophy in Nursing Programs**

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**Abstract:**

**BACKGROUND:**

To address the shortage of Doctor of Philosophy (PhD)-prepared nursing faculty, universities in the United States offer direct-entry Bachelor of Science in Nursing (BSN)-to-PhD nursing programs. Little research has been conducted to explore students’ perceptions of these programs and to formally evaluate the successes and opportunities for growth of this academic track.

**METHOD:**

Focusing on the perceptions and experiential reflection of BSN-to-PhD education, a survey with open-ended questions was distributed among voluntary participants who are current BSN-to-PhD students or recent graduates (within 5 years) from various universities in the United States. Textual data were analyzed using a qualitative descriptive approach with thematic analysis.

**RESULTS:**

This article elaborates on opportunities, challenges, and suggestions related to this educational route, as recognized by 21 participants from seven universities.

**CONCLUSION:**

The study findings may facilitate discussion among nurse educators to revise programs to be congruent with the needs of current students while paving the way for future scholars. [*J Nurs Educ*. 2015;54(10):542–549.]

**Keywords:** Nursing | students | Doctor of Philosophy (PhD) | Bachelor of Nursing (BSN)

**Article:**

The development of future nurse faculty persists as a pressing need for the profession (Scherzer, Stotts, & Fontaine, 2010). In nursing, those interested in advanced education usually work for several years before starting a master’s degree and work several more years after completing a master’s degree before eventually starting doctoral studies later in their career (Cathro, 2011; McBride, 1999). This results in nursing faculty, researchers, and leaders who are older, which reduces career time dedicated to teaching and research prior to retirement. This constitutes the singular most consequential reason for the nursing faculty shortage and, ultimately, the reduced nursing research and education workforce (American Association of Colleges of Nursing [AACN], 2014).

Addressing the shortage of Doctor of Nursing Philosophy (PhD)-prepared nursing faculty is a priority for the profession, as the shortage is predicted to intensify in a few years. Results of a recent survey by the AACN (2014) indicated there were almost 1,500 faculty vacancies or additionally needed positions across the United States, of which approximately 1,265 are doctoral-level positions. The schools participating in the survey indicated that the number one reason for being unable to fill vacancies was a lack of doctorally prepared applicants (AACN, 2014). Although PhD-prepared nurses taking positions outside of the academic arena may be contributing to the limited pool of qualified applicants, the source of the problem likely lies in insufficient numbers of graduating nurse scientists. Furthermore, the average age of doctorally prepared professors, associate professors, and assistant professors was 61, 58, and 52 years, respectively (AACN, 2014). With the average age of nursing faculty retirement at just over 62 years (Berlin & Sechrist, 2002), by extrapolation this means that more than 50% of all current nursing faculty could be retired 10 years from now.

Although nursing faculty shortage is an important reason to necessitate additional doctorally prepared nurses, another key reason that cannot be overlooked is the need to address the ever-changing landscape of nursing and health care. Simply put, the way nursing research has been conducted in the past is not how it will be conducted in the future. Most governmental and large organization calls for proposals now emphasize multidisciplinary teams, interprofessional collaboration, data sharing, and interventions and outcomes. The importance of having input from the rising generation of nurse researchers is likely one reason organizations such as the National Institutes of Health make a special effort to encourage new researchers to apply for funding. These funding agencies value the contribution of a younger generation of nursing scholars.

One solution to preparing younger, doctorally prepared nurses is to take advantage of the many Bachelor of Science in Nursing (BSN)-to-PhD programs available in the United States. These BSN-to-PhD programs follow a more tradition model of PhD study found in other science fields—students are admitted to the program after completion of a bachelor’s education, and receive master’s- and doctoral-level coursework en route to a PhD.

Unlike RN- or nurse practitioner-credentialed programs, a wide variety in curriculum exists across programs, which are less regulated than prelicensure programs. Of the 128 nursing PhD programs in the United States (AACN, 2013a), 81 offer a fast-track option for baccalaureate-prepared nurses to obtain a PhD (AACN, 2013b). Some programs award a master’s degree during the doctoral curriculum, which, depending on the program, can be further specialized as it applies to the doctoral studies and future program of research.

Despite the abundance of these programs, little research has been conducted to formally evaluate the successes and opportunities for the growth of this academic track. Although a few expert opinion papers and editorials by faculty and researchers have addressed BSN-to-PhD programs, few studies explore the perceptions of these programs by the students themselves (Nehls & Rice, 2014). If preparing future nurse researchers who will stay in the field is a priority for the nursing profession, investigating how these programs succeed and could improve is essential. The purpose of the current study was to explore perceptions and experiences of current and former BSN-to-PhD students by surveying a sample of students from these doctoral programs in various geographic locations throughout the United States and identifying the successes and challenges with this educational route.

**Method**

*Design*

Descriptive qualitative research methods using an online survey were used to explore the nurses’ perception and experiences of BSN-to-PhD education and to identify opportunities and challenges with this educational route. Textual analysis was guided by a qualitative descriptive approach. Thematic analysis was based on some a priori assumptions that both successes and challenges would emerge; however, a cycle of both deductive and inductive coding was used to guide the exploration of the participant responses. The research team consisted of currently enrolled BSN-to-PhD nursing students, along with faculty advisors.

*Sample and Recruitment*

Prior to sampling, the research team conducted a literature review to enrich their understanding of the topic. The target study population included current and recently graduated BSN-to-PhD students studying at various programs in diverse geographic regions throughout the United States. Study participants were selected via convenience sampling. Inclusion criteria required that students were currently enrolled or recently (within 5 years) graduated from an accredited BSN-to-PhD program within the United States and were between the ages of 21 and 65 years. Students of all genders, ethnicities, and backgrounds were invited to participate in the study; no student who fit the inclusion criteria was excluded.

Doctoral program directors from geographically diverse universities were contacted via e-mail and asked to forward the invitation to current and recently graduated BSN-to-PhD students to ask them to voluntarily participate in the study. These program directors were provided with an institutional review board (IRB)-approved recruiting e-mail for the students, as well as a copy of the questions that would be asked in the online questionnaire. Using the link provided in the recruiting e-mail, participants were able to access the survey online, provide consent, and then submit their responses.

*Data Collection and Analysis*

Approval by the University of Virginia IRB was obtained prior to conducting the study. Participants responded to open- and closed-ended survey questions via an IRB-approved online survey platform. The questionnaire, developed by the researchers, was distributed to the participants and completed via an e-mail link following the informed consenting process at the beginning of the survey. Data were collected between August and December 2013. No compensation was provided for participation. All information was kept confidential with consideration of ethical concerns. Questions attempted to highlight areas that were believed to be relevant to student life.

Statistical analyses of demographic data were performed using SPSS® 22.0 software. Textual data were analyzed by data immersion and line-by-line analysis and data reduction by multiple researchers (Cohen, Kahn, & Steves, 2000). Data were subjected to line-by-line coding without losing sight of the meaning of the whole encounter (Cohen et al., 2000). Tentative categories were named and grouped together to form tentative themes (Cohen et al., 2000). The researchers initially followed this procedure independently, then compared categories and themes. The identified categories and themes then were reviewed by the research team, and final themes evolved and were agreed on by all members of the analysis team. All members of the research team brought different perspectives, thereby reducing bias and ensuring trustworthiness (Cohen et al., 2000). Furthermore, the data analysis team maintained journal notes to record reflections on an ongoing basis and kept the study design open for members of the research team (Cohen et al., 2000; Keim-Malpass, Albrecht, Steeves, & Danhauer, 2013).

**Results**

A total of 21 participants enrolled in the study, representing seven different BSN-to-PhD programs. Basic participant demographics are shown in **Table 1**. Notably, all participants were female, with four ethnicities represented. Participants were relatively young, with the majority (66.7%) younger than age 40. The estimated average time to program completion using the participant-provided start year and projected graduation was 5.7 years. A total of four (19%) participants from two universities noted that their programs award Master of Science in Nursing (MSN) degrees along the way to completing the PhD program. One (4.8%) of the participants also completed an MSN degree, but this was due to being enrolled in both the MSN and BSN-to-PhD programs simultaneously.





Qualitative data analysis highlighted aspects of the programs that were successful and areas for improvement from the participants’ perspective. Participant experiences fell into the major themes of opportunities, challenges, and recommendations for programs and students. Within opportunities, the subthemes of personal development, contribution to the profession, and time to completion were identified. Academic challenges, social isolation, and financial support were challenging areas that participants referenced. The theme of recommendations for programs and students had subthemes of general preparation for students, better academic support and program structure, and orientation and mentorship. Recommendations from study participants for preparing to be in a BSN-to-PhD program are shown in **Table 2**.





**Opportunities**

*Personal Development.* Study participants frequently described additional opportunities made available to them as reasons for initially pursuing a BSN-to-PhD program. Among these were personal development in the form of growth and achievement. One participant stated that she chose to enter a BSN-to-PhD program “to obtain the highest degree possible.” Another participant stated that getting a PhD “meant my career was full of options.” Another participant described being able to obtain a terminal degree earlier on in her career as important, and, as such, thought it best to put plans in place to obtain this terminal degree simultaneously. One participant regarded the decision to pursue a BSN-to-PhD as a “natural progression” in her career. For most, the desire to pursue the program rose from an aspiration to teach and conduct research. A minority of the participants had goals to continue clinical practice or enter industry or administration. One participant expressed, “I wanted to be perceived as a credible representative (i.e., a nurse scientist) to offer guidance on issues impacting our aging society.”

*Contribution to the Profession.* The participants had a strong sense of the need to help advance the nursing profession while achieving personal goals. Many identified their individual career development ambitions to be aligned with goals of moving the profession of nursing forward. Most participants planned to contribute to the nursing discipline by pursuing research and teaching upon graduation. Many expressed the desire to “build upon the profession with new evidence” or to “become a research scientist and contribute to scientific development in my area for other nurses and nurse researchers” or that “research could help improve care of the aging population.” Although each participant had plans to contribute to the nursing profession, some planned to contribute to the nursing profession by staying in their respective clinical area. Yet, still other participants described desires to advance the profession in other ways—for example, “I made the final decision [to pursue the BSN-to-PhD] to allow me opportunities to impact health policy specific to the long-term care industry. It was important for me to build upon the profession with new evidence.”

*Time to Completion.* The fast-paced and time-saving nature of the BSN-to-PhD program was a major attraction for study participants. Described by one participant as the “most expeditious route,” the time-saving attributes of pursuing a BSN-to-PhD program cannot be overstated. The influence of a comprehensive, yet compact, program was often linked to personal, as well as career, advancement goals. One participant stated, “I understood the importance of getting an early start on my research career and what that would mean for my future…. I also saw the value in finishing my education prior to starting a family.” Similarly, another participant expressed, “I liked expediting the process of getting the degree [and] being able to focus on my scholarship goals.” Participants in MSN-awarding programs were just as adamant about the benefit of a fast-paced, all-inclusive route as those in programs that did not award a master’s degree. One participant said, “I was 32 [years old] when I applied and thought that regardless of what I did with a master’s degree, by the time I was 55 [years old] I would need the PhD anyway, so it was better to just bite the bullet and do the whole thing!”

**Challenges**

*Academic Challenges.* The most serious of the perceived challenges expressed by participants was related to academics. A few issues related to the internal curriculum were identified. One participant stated, “I thought the BSN-to-PhD program would save me 20 hours, but it didn’t because more classes were added on by faculty after the program of study was completed.” Twenty hours translates into 1.5 to 2 semesters of coursework. Of note, perception of the length of the academic programs varied widely, as there was no standardized length for BSN-to-PhD curricula across a particular school. Several participants mentioned that their coursework felt too long, as mentioned in this participant’s statement: “[The] first year of [the] program [was] spent taking two DNP [Doctor of Nursing Practice] classes that provided no useful foundation for PhD studies…. Courses that really don’t add anything to the program [should be eliminated].” In the United States, the DNP is a practice-based doctorate and focused more on the application of evidenced-based nursing research. The PhD program prepares future nursing scholars to create original nursing research. In addition, a lack of some courses, such as formal instruction for grant writing, or poorly managed courses were mentioned. Moreover, because the curriculum is long, one participant took the statistics course at the beginning of the program, but it was hard to recall this critical knowledge at the dissertation stage.

The academic challenge of issues related to internal curricula was compounded because of the perceived lack of proper guidance. Specifically, the relationship with faculty, including limited communication between students in preparation for the program, was identified as a key factor. One participant mentioned that “communication between students and faculty is poor, and the school does not foster regular meetings. It is, at present, a go-it-alone type program.” Another participant with similar feelings believed this poor communication was related to the lack of faculty preparation for guiding BSN-to-PhD students. A lack of structural guidance from the school, such as orientation and regular meetings, was revealed as perceived barriers by many participants, whereas others noted that “the faculty is engaging, supportive, and kind.” Another stated that “there is a very nurturing atmosphere.” These positive feelings of connection with faculty were a minority of the opinions expressed by participants. Finally, one participant noted in particular that awarding an MSN degree during the BSN-to-PhD program would be beneficial because students “can complete all coursework and end up with nothing (no master’s award is allowed) if [you] do not pass [the] Comprehensive Exam.”

*Social Isolation.* Social isolation was a common theme viewed as another challenge that BSN-to-PhD students reported. Several participants noted that they desired and believed a cohesive cohort was important to the structure of the program. The unique characteristics of the BSN-to-PhD program, which has few students in each yearly cohort, perhaps caused detachment from peers for some participants. One participant stated:

*I am one of 3 students, and we are all in different cohorts. More experienced students and those with master’s degrees [are] very judgmental of the [BSN-to-PhD] program and students. [This is] very isolating from a social perspective.*

Social isolation was also perceived to influence participant academic performance to some degree as well. Another contributor to social isolation was a lack of regular meetings or student events and poorly managed meetings. According to one participant, “Not anything [was done] specifically for the BSN-to-PhD students, but we made an effort to stick together. It is a really long program. It would be helpful for us to have some regular meetings along the way.” One participant mentioned that there was an attempt to put together a mentorship meeting with the director of the PhD program and new BSN-to-PhD students. However, it was not found to be helpful and “everyone eventually stopped going. And the faculty member stopped scheduling [it].” A participant succinctly stated “orientations [are] not helpful; no continued sense of camaraderie throughout the semester.” The participant further stated that “students [are] very isolated.”

*Financial Support.* Limited financial support was the third main perceived challenge of the BSN-to-PhD students. Almost every participant identified financial support as a crucial characteristic for finishing the program successfully and timely. The financial support systems in place at represented schools varied from no financial support to a comprehensive, reliable system. Most participants reported that financial aid was available to some degree, but overall was not conducive for completing the program as desired. One participant reported:

*Financially, I received only graduate student instructorships and loans. Due to the high cost of the program, I had to take several GSI [Graduate Student Instructor] positions and any other work I could get...this severely crippled my progress in my program.*

Another participant reported similar circumstances, stating:

*We are informed of potential scholarship and grant opportunities and there are student aide positions available (if you are willing to work for almost nothing and [get] your tuition paid).*

Poorly managed financial support systems, including limited scholarships, was mentioned as one of the main challenges that many participants experienced. One participant explained the disbursement of financial support as being poorly managed, often arriving late due to inadequate disbursement processes.

**Recommendations for Programs and Students**

*General Preparation for Students.* Study participants frequently mentioned the importance of students needing to learn and be prepared for the detailed BSN-to-PhD program requirements in advance. One participant stated, “I felt more prepared than some of my other peers because I had clear expectations going in. I am not sure my cohort fully understood what they were getting into.” Addressing the challenges noted in these programs, many participants recommended that prospective students prepare for the academic, social, and financial demands of entering such a comprehensive and lengthy program. One participant commented, “Know that is it an ultra-marathon and not a quick program. Be sure it is what you really want.” Similarly, another participant recommended to “have a fairly solid idea about your research idea before starting the program, that way any coursework can be on that topic and gets that much closer to dissertation completion and graduation!” For programs that award an MSN during the process, participants recommended completing the master’s courses first, then moving on to doctoral-level work. This was seen as a good way to prepare for PhD courses and to better focus one’s research questions.

*Better Program Structure.* Participants stressed the need for improved program structure. Regarding coursework, students believed that nonessential courses should be removed. One participant suggested adding a course or addressing additional topics in multiple courses throughout the program: “I would like to see more courses that provide empowerment and leadership...this is so important to ensure those with PhDs work at their fullest potential after graduation.” In addition, not receiving a MSN along the way was regarded as frustrating for many of the participants; awarding a master’s degree was recommended by several participants. One participant also addressed the idea of taking courses in another doctoral program; however, she felt that this did not add to the PhD foundation. Finally, students noted that they wanted the program to be kept as short and fluid as possible, otherwise “it is so long that it is hard to keep momentum or excitement regarding the work.” This was also confirmed when students noted that the timing, or order, of courses in the program was not always perceived as optimal.

*Orientation and Mentorship.* Participants favored programs with a formal orientation program, as well as strong mentor relationships. Suggestions were made for “structured orientation/mentorship,” such as “immersion days at the start of each semester” and “yearly performance evaluation and regular meetings with [an] academic faculty advisor.” Although most programs offered some type of orientation, most participants did not think these were adequate and preferred ongoing events throughout the academic year. Another student recommended “mixers for new students and faculty, assigned to [a] cohort for academic and personal support, [and] open communication with a faculty advisor.” Not only was mentorship with faculty important, but participants yearned for mentorship from experienced students farther along in the program. Participants sought “enhanced peer-to-peer support,” “meet and greet of other nursing PhD students,” and to be “paired with a partner student in the program for moral support.” These peer-to-peer mentorships were important social and academic resources, as one participant noted, “I have grown to respect and value my classmates for helping me to get through it and for encouraging me not to quit.” Another student expressed, “I enjoy being intermingled with those in various stages in the program. This is a good learning experience.”

**Discussion**

The current study provides critical understanding of BSN-to-PhD students and education by exploring the perceptions and experiences of current and former students of BSN-to-PhD programs throughout the United States. The results reinforce that BSN-to-PhD students’ motivation to choose their education route is for both personal growth and development, as well as contribution to developing the nursing profession via the pursuit of diverse roles in academia or integrated practice roles. This is consistent with findings from the PhD program directors’ observations that the students are overachievers with a high level of motivation (Ellenbecker & Kazmi, 2014). In addition, BSN-to-PhD education is uniquely chosen for practical reasons, such as the relatively short time to complete the program, as well as the more flexible schedules that the program allows, compared with the traditional master’s and PhD program. This flexibility allows for students to save time and to better balance their practice and academia, as well as their personal life. In the United States, a master’s degree in nursing generally takes 1 to 2.5 years of full-time study, and a PhD typically requires 3 to 6 years beyond the master’s-level education. Results of the current study estimating time to degree of 5.7 years for the BSN-to-PhD program is comparable, if not slightly faster, than completing a master’s degree and a PhD separately. When factoring that most students will work at the master’s level before returning to complete a PhD, the time of doctoral-level contribution to the discipline is at least several years more when the BSN-to-PhD route is taken. Many students complete both their master’s and PhD, with only small changes to both curricula to create the joint degree; however, the seamless transition, networking, and discussion of research during the master’s coursework can accelerate the PhD completion. These benefits could be useful for recruiting more students in PhD programs, as commitment for a long period of time in academia presents major challenges for PhD students.

Insights of participants of this relatively new educational program may be helpful in overcoming some of the challenges associated with BSN-to-PhD programs. More tailored academic preparation for the BSN-to-PhD program is needed due to the unique features of the program, such as heavy academic load due to the relatively short time frame. In addition, stable financial support is emphasized, which is consistent with the previous studies (Ellenbecker & Kazmi, 2014; Nehls & Rice, 2014). This is potentially because BSN-to-PhD students are sensitive to finding feasible ways to sustain their studies. In addition, social support needs to be addressed, not only because BSN-to-PhD students are in such unique situations, but also because social support is a major contributing factor for students to be successful in completing their studies (Ellenbecker & Kazmi, 2014). Beck’s (2001) meta-synthesis indicates that creating a caring environment between faculty and students enhances the mentoring relationship and the work done by both groups. Beck stated that the beneficial effects begin with positive, within-faculty camaraderie that translates into better faculty–student relationships and then into enhanced student–student caring for each other.

**Limitations**

In spite of the many values of this study, some limitations exist. Because of a small number of participants, it might not be appropriate to generalize the findings. In addition, responses for online surveys often garner the support of those who are pleased, as well as those who are frustrated. Alternatively, researchers may need to further explore these experiences with face-to-face interviews. This method may allow for a larger number of representative participants.

Research bias can occur in the planning, data collection, analysis, or publication phases (Pannucci & Wilkins, 2010), and some limitations are beyond the control of the researchers (Milne & Oberle, 2005). The predispositions, perceptions, and biases of the researchers may affect data interpretation (Patton, 2002). This limitation may be evident in the current study, given that all of the researchers are either current students or graduates from the same BSN-to-PhD program. Although the researchers have diverse backgrounds—all members of the research team have different BSN educations, with four of its members being educated outside the United States (K.O.M., J.R.v.G., E.P., M.C.)—the homogeneous experience of the researchers in the same BSN-to-PhD program may bias perceptions of other programs. Given the fact that individuals have a tendency to compare or relate to experiences that are similar and familiar to them, this could have biased the themes chosen from the content analyses.

**Recommendations**

On the basis of findings from this study, including participant feedback as indicated in **Table**[**2**](http://www.healio.com/nursing/journals/jne/2015-10-54-10/%7B68819a8d-45c8-4fd1-9c5f-7283be3f2321%7D/qualitative-analysis-of-student-perceptions-of-bachelor-of-science-to-doctor-of-philosophy-in-nursing-programs#x01484834-20150916-01-table2), several areas for supporting BSN-to-PhD students are recommended, given that they are a special group who require additional support, mentorship, and resources. Annual PhD orientations could occur prior to the start of each new academic year. If the event was collaboratively planned by both students and faculty, this may enhance its effectiveness and reception by the students. Orientation could be organized to help both new and returning students to learn about university and school resources, program structure, other information relevant to respective phases of the program, and a time to meet and network with faculty and other students. An organized and active student organization can support students through special programming and events each semester, as well as to pair seasoned students with newcomers. In addition, these students could engage in a peer-mentoring group involving all BSN-to-PhD students in the program. Students could meet at monthly intervals, with more experienced students mentoring newly matriculated students.

Many BSN-to-PhD students expressed the desire to be awarded an MSN degree during their studies. Selection of and achieving an appropriate MSN degree provides both an uplifting milestone and a way to enhance the future program of research. In addition, students should identify a program of study with the help of the academic advisor during the first year so that the coursework expectations are transparent, course assignments can be tailored toward the area of interest, and the anticipated graduation goal has a fixed date. Students should feel free to change academic advisors to one who can meet both research interests and mentorship needs.

Because financial aid appears to be a major area of concern, this area should be also highly transparent and structured. As part of the academic planning process, financial aid should enter the conversation and be mapped out just like the coursework plan for graduation. Opportunities to work as a teaching or research assistant may be one avenue to help defray costs of attending the program. BSN-to-PhD students would benefit from taking grant-writing courses and should submit a proposal prior to graduation. This could be an additional source of funding for many students while simultaneously preparing them for grant writing in the future. Fostering interdisciplinary collaboration between and within other schools around the university will strengthen research and may offer a wider variety of grants and other aid. Although it may require extra effort of matriculating BSN-to-PhD students each year, schools should provide a strong commitment to support, encourage, and mentor these students.

**Conclusion**

The current study is one of the first of its kind in exploring BSN-to-PhD programs, focusing on the perceptions of current or recently graduated students from such a program. These data highlight aspects of the programs that are and are not successful from the students’ perspective and can help current nurse educators revise the programs to be more attractive and successful for current and future students. In addition, the current study may contribute to helping national nurse educators develop standard educational criteria for BSN-to-PhD education with evidence-based principles, as well as to develop an innovative conceptual model for successful PhD education.

Additional work is needed to further examine BSN-to-PhD education programs from different perspectives. For example, administrators’ and nurse educators’ perceptions need to be explored to provide perception of gaps between student and faculty perceptions and to seek novel approaches to improve BSN-to-PhD programs. This may best be done by examining the characteristics of existing programs and the experiences of enrollees by a heterogeneous group of researchers from various institutions, including a mix of students, faculty, and administrators. This may reveal current program successes and pitfalls, with a goal of improving the experiences of current and future enrollees, thus attracting qualified nurse applicants to such programs earlier in the career trajectory. In addition, there may be merit in following the careers of BSN-to-PhD students over the long term, as well as their academic achievements, while comparing them with those of traditional PhD students to help obtain a more in-depth understanding of and potential support for such programs.

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