FACULTY CARING BEHAVIORS AND ACADEMIC PERFORMANCE OF NURSING STUDENTS IN A PROBLEM-BASED LEARNING ENVIRONMENT AT ST. PAUL UNIVERSITY PHILIPPINES

Ma. Elizabeth C. Baua

Abstract

Nurses by virtue of their profession are expected to demonstrate caring behaviors in whatever sector they are into, including the field of teaching. This study sought to ascertain the perceived caring behaviors of the nursing faculty and measure the relationship of the nursing faculty's caring behavior with nursing students' academic performance within a problem-based learning environment in St. Paul University Philippines. It also attempts to discover shared meanings and patterns of caring that resides between the transpersonal caring relationship of nurse educators and students.

The study made use of the mixed methods of qualitative and quantitative data analysis. Data were extracted mainly from the use of the Faculty Caring Behavior Instrument (FCBI) answered both by the faculty nurses and students. The study extracted seven caring themes that include presence, concern, commitment, competence, conscience, confidence and guidance. Findings revealed that the male nursing faculty manifested stronger caring behaviors than their female counterparts and that there is low correlation between nursing faculty's caring behaviors and students' academic performance.

Keywords Caring Behaviors, Academic Performance, Problem-Based Learning

Introduction

Developing a caring behavior is a cognitive endeavor that opens other avenues of learning relevant pedagogical competencies as part of nurses' unending quest for knowledge to improve instructional delivery in the nursing learning space. There is a need for nurses to share experiences of caring to come to know new possibilities for nursing practice, research and education. Nurse educators are expected to exhibit caring practices in conducting classroom activities and in their interaction with nursing students. In order to recognize the significant implications of a learning experience grounded from a caring framework, the faculty must have a clear grasp on how caring practices transpire within a problem-based learning environment. The pedagogical challenge for the nurse educator is to provide a problem-based learning environment in which the students learn to develop in themselves the initiative to become self-directed learners. PBL tutors can communicate caring practices by using PBL teaching moments as caring occasions. This whole view is the locus of the current research.

Nurse educators are the most influential role models of caring behaviors in the learning environment. They are expected to communicate caring practices by the way they manage classroom activities and interrelate with nursing students. If nurse educators are expected to translate caring behaviors to their students, how do they teach the art and science of nursing without losing caring?

The School of Health Sciences (SHS) of St. Paul University Philippines (SPUP) as a center of excellence for nursing program pioneered the use of problem-based learning (PBL) in teaching/learning nursing. This situation raises a query: "Is caring translated in the faculty-student interaction during PBL tutorials? "What are the students' experiences of caring within a problem-based learning environment?

The present educational system focuses more on content and information rather than on the affective domain of learning. The Philippine's educational organizations are more concerned with the technical and cognitive dimensions of teaching and learning. This raises another question, "how might faculty caring behaviors influence the academic achievement of students?"

The purpose of this study is to illuminate shared meanings and patterns of caring that resides between the transpersonal caring relationship between nurse educators and students within a problem-based learning environment and find out if faculty caring influences academic performance of nursing students.

Statement of the Problem

This study ascertained the perceived faculty caring behaviors of the nursing faculty and its relationship with academic performance of nursing students within a problem-based learning environment in St. Paul University Philippines.

Specifically, it sought answers to the following research questions:

- 1. What is the demographic profile of the nursing faculty of the School of Health Sciences of SPUP in terms of:
 - 1.1 age,
 - 1.2 gender,
 - 1.3 civil status,
 - 1.4 educational attainment
 - 1.5 teaching experience in years?
- 2. What are the faculty caring behaviors as perceived by the
 - 2.1 nursing faculty and
 - 2.2 students?
- 3. To what extent are the faculty caring behaviors manifested as perceived by
 - 3.1 nursing faculty and
 - 3.2 students?
- 4. What are factors that enhance the caring behaviors of the faculty?
- 5. What is the level of academic performance of the nursing students?

- 6. Is there a significant difference in the extent of the nursing faculty's manifestation of caring behaviors when grouped according to their demographic profiles?
- 7. Is there a significant relationship between faculty caring behaviors and academic performance of nursing students?

Methods

Research Design

In the course of the study, the investigator utilized descriptive relational analysis. Moreover, it made use of the mixed methods of qualitative and quantitative research process. The use of qualitative and quantitative data was valuable in order to give a fuller, richer picture of the respondents' experiences of faculty caring behaviors.

Qualitative method was utilized to develop a rich understanding of the caring behavior phenomenon as it exists in the real world and as it is constructed by the two groups of respondents within the context of PBL environment.

To provide measured description and validation of the variables being studied, this research utilized quantitative methods. The qualitative meanings by the two groups of respondents were quantified to provide information about the frequency of occurrence of the themes or patterns of caring experiences within the PBL environment.

Respondents of the Study

The target population groups were Levels II, III & IV faculty and nursing students from the School of Health Sciences of St. Paul University Philippines. The investigator utilized purposive sampling technique in the selection of these two groups of respondents.

Eighteen (18) eligible faculty members have participated in the study and were given teaching assignments in professional nursing courses during the summer term of academic year 2009-2010 using PBL as an approach to teaching-learning nursing.

For the student respondents, purposive sampling technique was utilized in which 40 nursing students were included in the qualitative part of the study. These students were enrolled in the summer of academic year 2009-2010. To determine sample size of student respondents for the quantitative part, total enumeration was used per year level. A total of 224 BSN students participated in answering the FCBI to determine faculty caring behaviors.

Instrumentation

Faculty Caring Behavior Instrument

The investigator developed the Faculty Caring Behavior Instrument (FCBI) from the interview descriptions of the nursing faculty and students. The instrument was constructed after preliminary qualitative interviews using unstructured open-ended guide questions. The Faculty Caring Behavior Instrument (FCBI) contained 74 items reflecting perceived caring behaviors by the nursing faculty and students distributed across the 7 caring themes that were identified and categorized from the focus group interviews.

The FCBI utilized a 4-point Likert Scale to measure caring behaviors of the faculty with the following scoring interpretation: 4- caring is observed at all times; 3- caring is observed on most occasions; 2- caring is seldom observed and 1- caring is not observed at all.

Faculty Caring Behavior Instrument for the Nursing Faculty

The FCBI for the nursing faculty was composed of two parts: The first part consisted of the faculty information sheet which determined demographic profile of the nursing faculty.

The second part was the faculty caring behavior instrument that contained 74- items meant to measure faculty caring behaviors in terms of the 7 caring themes: presence (11 items); concern (10 items); guidance (10 items) commitment (10 items); confidence (12 items) competence (11 items) and conscience (10 items).

Faculty Caring Behavior Instrument for nursing students

The FCBI for student respondents included the 74 item questions to evaluate faculty caring behaviors of PBL tutors. The investigator administered the FCBI to 224 BSN students.

Data Gathering Procedure

Data gathering was conducted in two parts:

For part 1, the following procedures were done: The faculty respondents (n=18) were asked to complete the Faculty Information Sheet that contained information about faculty demographic profile.

The faculty (n=18) and student respondents (n=40) were interviewed and asked to recall or describe a situation that they have gone through in their PBL sessions in which caring was demonstrated by their PBL tutors. Unstructured open-ended interview guide questions were used to conduct the focus group interviews. The interviews lasted for 20-30 minutes. The focus group interviews were terminated when the respondents have nothing more to say.

Interview results were transcribed verbatim immediately after the focus group discussion. Data was analyzed using the modified version of the constant comparative method (Glaser & Strauss, 1967; Lincoln & Guba, 1985) which contained four steps: 1) comparing incidents applicable to each category; 2) integrating categories and their properties; 3) delimiting the construction and 4) writing the construction (Glaser & Strauss, 1967). Part 2 consisted of the following processes:

- 1. The faculty caring behavior instrument was developed based on the qualitative descriptions of caring by nursing faculty and student respondents.
- The faculty caring behavior instrument was developed by the investigator after consultation with nurses who were knownexperts on caring and problem based learning.
- The faculty caring behavior instrument was administered to 18 nursing faculty and 224 nursing students under the NCM 100, 103 and 106 PBL courses during the summer term of SY 2009-2010.

- 4. The investigator developed the achievement tests for NCM 100, 103 and 106. The achievement test is a 70-item multiple choice questions taken from the concepts learned in NCM 100, 103 and 104 during the summer semester of SY 2009-2010.
- 5. To establish instrument reliability, the faculty caring behavior instrument was pilot tested to 50 registered nurses who had utilized PBL during their study of nursing. Test/re- tests of the instrument were conducted to the same group of nurses in order to compare results. The return of the instrument was 100%.
- To establish content validity, the instrument has been critiqued by nurse educators, senior nurses, masters and doctorate students who had PBL experiences during their study of nursing.
- 7. To assess face validity, the FCBI was then reviewed for clarity by the nursing faculty who participated during the qualitative phase and at least 30 nursing students who were part of the interview process. The respondents did not express any difficulty in understanding any word or item found in the tool, which clearly demonstrated face validity.
- The completed FCBI were subjected to SPSS software to tally the respondents' answers.

Data Analysis for Qualitative Data

Informal focus group discussions had been conducted with the nursing students during the qualitative interview phase. An unstructured interview guide had been used containing open-ended questions to elicit information about the phenomenon of caring among the respondents.

Data gathered from the interviews was analyzed and grouped according to categories or themes using the modified version of the constant comparative method (Lincoln & Guba, 1985; Glaser & Strauss, 1967).

Data Analysis for Quantitative Data

Using descriptive statistics, the following statistical treatment were employed:

- To determine demographic profile, factors that enhance faculty caring behaviors, frequency count and percentage distribution was used.
- 2. To determine significant relationship between faculty caring behaviors and academic performance; *Pearson r* correlation coefficient was used.
- 3. To determine significant differences in the extent of faculty caring behaviors when grouped according to demographic profile, the t-test or one-way analysis of variance was used.
- 4. The Statistical Package for Social Sciences (SPSS) was utilized to test the hypotheses.
- 5. To interpret mean range data of the faculty caring behavior instrument, the following was used:

| Mean Range | Interpretation | Qualitative |
|-------------|---------------------------------|-----------------|
| | | Description |
| 3.25 – 4.00 | Caring is observed at all times | High Caring |
| 3.24 – 2.50 | Caring is observed in most | Moderate caring |
| | occasions | |
| 2.49 - 1.75 | Caring is seldom observed | Low caring |
| 1.74-1.00 | Caring is not observed at all | Poor caring |

Results and Discussions

Based on findings, the investigator has arrived at the following findings:

1. Demographic Profile of Nursing Faculty

Age:

Majority of nursing faculty n=11 (61.11%) belonged to the age range of 20-29 and n=2 or 11.11% belonged to the age range of 50-59.

Gender:

There are more female faculty members n=12 or 66.67% than male faculty members or n=6 (33.33%).

Civil status:

There are more single faculty members or n=12 (66.67%) than married ones or n=6 (33.33%).

Educational Attainment:

Twelve or n=12 (66.67%) faculty members have finished their master's degree in nursing and six or n=6 (33.33%) faculty have a Bachelor's degree in Nursing.

Length of teaching experience (in years)

There are three or n=3 (16.67%) faculty members who have achieved 16-20 years teaching experience and twelve of n=12 (66.67%) have 1-5 years teaching experience.

2. Perceived Faculty Caring Behaviors by the Nursing Faculty and Students

Caring themes and subthemes were identified and categorized according to the interpretation of the investigator. The faculty caring behaviors expressed by the respondents were analyzed and grouped according to categories or themes. Seven caring themes were identified: *Presence, concern, commitment, competence, conscience, confidence and quidance*.

3. Faculty Caring Behaviors according to the Nursing Faculty and Students

Nursing Faculty

"Showing empathy or compassion" and "giving advice were dominant faculty caring behaviors perceived to be significant by the nursing faculty. These caring behaviors were categorized under the caring themes "concern" and "guidance" respectively.

"Attentive listening" (concern) and "facilitation skills" (competence) received the lowest rank.

Nursing Students

The students perceived "being available" (presence) as highest faculty caring behavior followed by "counseling/advising" (guidance) and "showing compassion" (concern).

"Being responsible, "instilling faith/hope/trust" and being patient/persevering, "being with" and "non-judgmental" received the lowest rank.

4. Extent of Manifestation of Faculty Caring Behaviors as Perceived by the Nursing Faculty and Students

The highest weighted mean caring scores by the faculty were noted in the caring themes "confidence and conscience "(M=3.81). Lowest weighted mean caring score was reflected under the caring theme of "presence" (M=3.62).

For the nursing students, the highest weighted mean caring scores were reflected in the caring themes "confidence and concern" (M=3.63). The lowest average mean caring score was noted under the caring theme "guidance" (M=3.53)

5. Factors that Enhance the Caring Behaviors of the Nursing Faculty

The nursing faculty perceived that there are several factors that may enhance their demonstration of caring behaviors. Role modeling of administrators was viewed as the dominant factor perceived by the faculty as an important factor for them to demonstrate caring behaviors. The nursing faculty believed that caring behaviors shown by administrators can be emulated.

Lowest factor mentioned by the faculty is "proper motivation." The faculty becomes motivated to strive more and help the students not only in their academic pursuits but also in their individual needs.

6. Academic Performance of Nursing Students

Overall, it is worthy to note that nursing students performed very satisfactorily in the achievement tests with a transmuted grade range of 85-89% or a descriptive interpretation of "very good" academic performance in their NCM –PBL subjects during the summer term of AY 2009-2010.

7. Relationship Between Faculty Caring Behaviors and Their Demographic Profile

There is no significant difference in the extent of faculty manifesting caring behaviors when grouped according to age.

Findings revealed that the male faculty (M=89) members manifested stronger caring behaviors than their female (M=3.66) counterparts as revealed in their mean scores.

There is no significant difference in the extent of faculty manifesting caring behaviors when grouped according to civil status.

The test for significant difference in the extent of faculty manifesting caring behaviors according to the faculty's educational attainment revealed no statistical significance.

The is no significant difference in the extent of faculty manifesting caring behaviors when grouped according to years of teaching experience.

8. In the extent of relationship between faculty caring behaviors and academic performance of nursing students, data showed that there is low correlation between faculty caring behaviors and academic performance; hence one cannot conclude that the low relationship is descriptive of the independent samples. However, several studies have confirmed that significant relationship do exist between faculty caring behaviors and academic performance of students. Studies supported the notion that caring is highly valued and considered integral to nursing. Caring behaviors role modeled by faculty in a learning environment enhance student understanding and ability to learn nursing and caring.

Conclusions

Based on the findings derived from the study, the following conclusions are hereby presented:

- Demographic profiles of the faculty like age, civil status, educational attainment and teaching experience in years have no significant correlation with the manifestation of caring behaviors; however, gender was established to have significant correlation with faculty caring behaviors. This finding proves that men in nursing can be as compassionate and nurturing as their female counterparts.
- 2. Seven caring themes and subthemes were identified as faculty caring behaviors within a problem-based learning environment. Caring themes included "presence, concern, guidance, commitment, competence, confidence and conscience." The results of this study further validated that the power of caring are expressed in caring relationships emanating from the faculty-student transpersonal caring relationship.
- Transpersonal caring relationships between the nursing faculty and students which occurs during PBL sessions yielded "high levels of caring" which means that caring is observed at all times in the faculty-student interactions during PBL tutorials.
- 4. The results of the achievement tests of the students showed that at least half of the total number of students obtained "very good" performance in the achievement tests given in their NCM subjects during the summer term of AY 2009-2010.
- 5. Several factors can enhance the demonstration of caring behaviors by the faculty but role modeling of caring behaviors by administration can further enhance the faculty to establish emotional connections with their students..
- Academic performance of students and faculty caring behaviors showed low correlation between the two variables; however, several studies had already established that faculty caring behaviors significantly correlate academic achievements of students.

Vol. I

Recommendations

From the findings of the study, the investigator would like to recommend:

- That the concept of caring which is uniquely known and expressed in nursing be explored and further studied to provide an organizing framework for studying caring in nursing education, practice and research.
- 2. That nurse educators further validate the measuring tool used in this study.
- That school deans, program coordinators, and team leaders
 provide learning opportunities for the faculty and students to
 create "care groups or care circles" in order to mentor novice
 faculty and students in sustaining and enhancing caring practices
 within the university.
- 4. That the results of the study offer new perspectives to future researchers to continue exploring innovative ways to teach/learn nursing through pedagogical approach like problem-based learning grounded in the caring science.
- That nurse educators' awareness on the relevance of developing and enhancing their caring abilities can facilitate learning among their students.
- That the nursing faculty is encouraged to invest emotional connections with their students to motivate them to learn and become self sufficient individuals.
- 7. That the university continues to conduct in-service training programs, seminars and conferences on caring to enhance the caring capabilities of the faculty, staff, students and administrators.
- 8. Those involved in curriculum planning must integrate the concept of caring as the core of every educational program in order to develop caring competent individuals.

- 9. That this study be replicated to add significantly to understand the substantive concept of caring in nursing and to put in valuable insights to the teaching /learning nursing using the technology of PBL grounded on the power of caring. This study can be replicated with different faculty, courses, academic programs and educational levels of students since caring behaviors may differ based on the context that they are modeled.
- 10. That a teaching/learning module on the concept of caring science be included in the nursing curriculum for the students and faculty to improve or strengthen their caring behaviors.
- 11. That the results of this study be utilized by CHED, ADPCN, BON, as they make necessary revisions in the BSN curriculum. Caring must be threaded throughout the BSN curriculum and should be manifested within the context of every nursing course.

References

Articles in Periodicals

- Atos, M.A; Atos, W. & Divinagracia, C. (2008). Modeling caring behaviors: Influencing the future. *ADPCN Journal of Nursing*
- Baldursdottir, G. & Jonsdottir, H. (2002). The importance of nurse caring behaviors as perceived by patients receiving care at an emergency department. *Heart & Lung*. 31, 67-75.
- Beck, C.T. (1991). How students perceive faculty caring: A phenomenological study. *Nurse Educator* 16 (8), 18-22.
- Benson, S. & Dundis, S. (2003). Understanding and motivating health care employees: Integrating Maslow's Hierarchy of Needs, training, and Technology. *Journal of Nursing Management*. 11, 315-320.
- Blum, C.; Hickman, C.; Parcells, DA; Locsin, R. (2010). Teaching Caring Nursing to RN-BSN students Using Simulation Technology.

 International Journal of Human Caring, 14, (2) 40-49.
- Boykin, A & Shoenhofer, S. (1989). Caring In Nursing: Analysis of an extant theory. *Nursing Science Quarterly*. Copyright Williams & Wilkins, p, 149-155
- Cara, C. (2000). A pragmatic view of Jean Watson's theory of caring.
- Cordeau, M. (2010). The lived experience of clinical simulation of novice nursing students. *International Journal of Human Caring*, 14, (2) 8-13.

- Chien-L.K; Turton, M; Hsieh, J; Tseng, H; Chin, L.S; (2007). Measuring peer caring behaviors of nursing students: scale development. *International Journal of Nursing Studies*, 44, 1, 105-114.
- Eggenberger, T.; Keller, K.; Locsin, R.(2010). Valuing caring behaviors within simulated emergent nursing situations. *International Journal of Human Caring*. 14, (2), 22-28.
- Forsyth, D. (1989). Can behavior be taught? *Nursing Outlook*. 37(4), 164-167.
- Gonzales, R; Pietsch, T; Kozub,K.; Cole,P; Nifra,R; Headley,K; Durhams, T; Tomesko, J.; Wondolowski,G; (2010). Caring: Looking beyond simulations. *International Journal of Human Caring*. 14, (2), 15-21.
- Halldorsdottir, S. (1991). The essential structure of a caring and uncaring encounter with a nurse: The patients' perspective. *In Nursing Research for Professional Practice*, 308-333.
- Khademian, Z. & Vizeshfar, F. (2007). Nursing students' perceptions of the importance of caring behaviors. *Journal of Advanced Nursing*. 61 (4), 456-462.
- Locsin, R. & Purnell, M. (2007). Rapture and suffering with technology in Nursing. *International Journal for Human Caring*. 11, (1), 38-42
- Murphy, F; Jones, S, Edwards, M; James, J. (2008). The impact of nurse education on the caring behaviors of nursing students. *Nursing Education Today*. 29, 254-26
- Paterson, B. & Crawford, M; (1994). Caring in nursing education: An analysis. *Journal of Advanced Nursing*, 19, 163-174.
- Savage, J. & Favret, J. (2005). Nursing students' perceptions of ethical behavior in undergraduate nursing faculty. *Nursing Education in Practice*, 6, 47-54.
- Sikma, S. (2006). Staff perceptions of caring: The importance of a supportive environment. *Journal of Gerontological Nursing*, 6, 22-29.
- Smith, L. & Sarasota, L. (2000). A model for defining the construct of caring. *Journal of Professional Education*.
- Simmons, P. & Cavanaugh, S. ("n.d."). Relationships among Childhood Prenatal Care, Professional School Climate, and Nursing Student Caring Ability. *Journal of Professional Nursing*, 12(6), 373-381.
- Simmons, P. & Cavanaugh, S. ("n.d."). Relationships among student and graduate caring ability and professional school climate. *Journal of ProfessionalNursing*, 16(2), 76-83.
- Sombillo, R. (2006) Perceptions of nurses and patients caring. *Philippine Journal of Nursing.* (no date available)

- Wilkes, L.M. & Wallis, M.C., (1998). A model of professional nurse caring: Nursing students' experience. *Journal of Advanced Nursing*, 27, 582-589.
- Wittig, D. (2004). Knowledge, attitude and skills of nursing students regarding culturally congruent care of Native Americans. *Journal of Transcultural Nursing*. 15, 1, 54-61.
- Wolf, Z. (1986). The concept and nurse identified caring behaviors. *Topics in Clinical Nursing*.

Books

- Bandura, A. (1991). Social cognitive theory of self-regulation. Organizational Behavior and Human Decision Processes. 50, 248-287.
- Bowlby, J. (1980). Loss, sadness & depression. NY: Basic Books.
- Boykin, A. & Schoenhofer, S. (2001). *Nursing as caring: A model for transforming practice*. NY: National League for Nursing Press.
- Brody, N. & Ehrlichman, H. (1998). *Personality Psychology: The science of individuality*. Prentice-Hall, Inc.
- Knowles, M. S. & Knowles, H. F. (1995). *How to develop better leaders*. NY: Association Press.
- Knowles, M.S. & Knowles H. F. (1995). *Introduction to group dynamics*. Chicago: Association Press.
- Leininger, M. & McFarland, M. (2002). *Transcultural nursing: Concepts, theories, research and practice* (3rd ed.). McGraw Hill Companies, Inc.
- Locsin, R. (2005). Technological competency as caring in nursing, *The honor society of nursing*. Sigma Theta Tau International.
- Mayeroff, M. (1971). On caring. NY: Harper.
- Noddings, N. (1984). *Caring: A feminine approach to ethics and moral education*. LA: University of California Press.
- Polit, D. & Beck, C.T. ("n.d."). *Nursing Research: Generating and assessing evidence for nursing practice* (8th ed.). Lippincott, Williams & Wilkins.
- Roach, S. (1984). Caring: The human mode of being, implications for nursing.
- Rogers, C.(1969). Freedom to Learn.Columbus Ohio; Charles Merrill Publishing Co.,
- Taylor, K. (1995). *The ethics of caring* (2nd ed.). Hanford Mead.
- Watson, J. (1988) *Nursing: Human science and human care. a theory of nursing.* NY: National League for Nursing.
- Watson, J. (2002). Assessing and measuring caring in nursing and health science. Springer Publishing Company.

Watson, J. (2008). Nursing: The philosophy and science of caring (Revised ed.). Colorado, USA: University of Press Colorado.

Dissertation

- Laurente, C. M. (1997). Caring Behaviors of Nursing in the Emergency Room: A Dissertation: *Philippine Journal of Nursing*.
- Junio, R. Sr. T. (2002). Problem-based learning as a curriculum strategy in reengineering! the nursing program of St. Paul University for the 21st century. Unpublished manuscript
- Tee, E. (2007). Caring behavior in Nursing Education: A quantitative and phenomeological approach. Philippine Journal of Nursing Education, 17, 10-12
- Miller, R. (2008). The influence of teachers' caring behaviors on high school students' grades and behavior. *International Journal of Education*

Electronic Sources

- Cara, C. (2008). A pragmatic view of Jean Watson's caring theory. www.humancaring.org. Retrieved: 10/29/2008.
- Doll, W.E.J. (2005). Complexity in the classroom.Educational leadership 47.1:65-70 www.infed.org/thinkers/et/htm. Retrieved 3/28/2010
- Rego, A; Godinho, L; McQueen, A. (2007). Emotional Intelligence and Caring Behaviors in Nursing. www.informaworld.com.Retrieved 3/10/11
- Knowles, M. S. & Knowles, H. F. (1995) How to develop better leaders. NY: AssociationPress.http://www.infed.org/thinkers/et-knowl.htm. Retrieved 3/28/2010

Unpublished Manuscripts

- Baua, E. (2008). A reflective journaling from a caring perspective: Practicum experiences of a DNS student in Thailand
- Ferrer, F., Zheng, X., Cielo, S. & Tong, G. (2008). Caring impressions of pharmacy students on their faculty
- Miller, A. (2007). Students that persist: Caring relationships that make a difference in higher education.
- Watermann, A. (2007). A case study of caring in nursing education