

Study Habits Checklist for Nursing Students Teacher's Guide to Interpreting the Data Student Mina

Recall that Mina was born in Afghanistan and, due to war, had her schooling disrupted when she was 8. She fled with her family to Russia. She immigrated to Canada with her family when she was 16. She was accepted into the Nursing program as a mature student at age 21. We met Mina in her second year of the Nursing program, when she was 22 years old.

When we met with **Mina**, we kept in mind that this was a collaborative process.

Step 1 We looked at her overall score, which was 117/160.

This score puts **Mina** in the middle category. Although she has some good study habits, there are areas that need work.

Step 2 We looked at **Mina's** individual habit scores, where she checked off 0s (Rarely/never) and 3s (Sometimes).

Using the knowledge gained from the Student Profile, we determined that **Mina** had difficulty with *Language* and *Proficiency in Sciences* and was unaware of most *college resources*. Combining this information with our expertise as third-semester teachers, we focused on the areas that were congruent with what we already knew about **Mina** and where we would be able to offer strategies.

This is what we learned from our discussion with Mina.

In class

* *I take notes when the teacher is talking (Sometimes)* – we validated with **Mina** that this was likely due to limited language skills; she found it difficult to listen and take notes at the same time.

Studying

* *I use different strategies for recording information: cue cards, concept mapping (Rarely/never)* – due to **Mina's** educational history, she had limited knowledge of different methods of recording information.

* *I seek help by reviewing the material with a friend, a study buddy, a study group, or a nursing peer tutor (Rarely/never)* – **Mina's** experience of having to fend for herself and her limited language skills make it difficult for her to seek help.

Taking exams

* *When I don't know the answer, I move on to the next question (Sometimes)* – **Mina** answers questions in order and does not move on until she answers the question.

Here are two examples of individual study habits on which **Mina** scored 0 or 3 but which were not applicable to her situation.

Reading and reviewing

* *I make diagrams of relationships in the material (Rarely/never)* – **Mina** stated that making diagrams was not something she wanted to spend time on.

Preparing for exams

* *I make my own case studies (Rarely/never)* – We believe that writing one's own case studies is too time-consuming for a third-semester student in relation to the benefit gained. **Mina's** limited language skills would further slow the process of developing her own case studies.



Step 3 (Optional) **Mina** predicted her test mark fairly accurately (60% vs. 54%). This puts her in Scenario A.

Scenario A: *The student predicted a low score and received a low score.*

In our experience, this is a good thing. It may mean that she has insight into what she does and does not know. If she is willing to make the necessary changes to her study habits, there is the potential for improvement.

Mina is aware that she is not doing well in the course. She acknowledges that her limited language skills are holding her back. She appears to have insight into her performance and seems eager to make changes but finds it difficult to seek help. Overall, Mina has a good base of study skills and, with her willingness to make changes, has the potential to improve.

Conclusion

This additional source of data – the Study Habits Checklist for Nursing Students – will be used in building the individualized Action Plan for **Mina**. Our strategies with **Mina** will focus on improving her English-language skills and helping her to seek assistance with developing a more varied approach to studying and test-taking.