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An identification of factors influencing pre-professional socialization of aspirants to the nursing profession

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LOYOLA UNIVERSITY CHICAGO

AN IDENTIFICATION OF FACTORS INFLUENCING PRE-PROFESSIONAL
SOCIALIZATION OF ASPIRANTS TO THE NURSING PROFESSION

A DISSERTATION SUBMITTED TO
THE FACULTY OF THE DIVISION OF EDUCATION
IN CANDIDACY FOR THE DEGREE OF
DOCTOR OF PHILOSOPHY

DEPARTMENT OF EDUCATIONAL LEADERSHIP AND POLICY STUDIES

BY

MARCIA C. MAURER

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JANUARY 1994

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CHAPTER 1

INTRODUCTION

Background Information - Nursing Shortage

Since the mid 1980's the nursing profession has been caught in an economic predicament of short supply and high demand. Because of a decline in enrollment of students in nursing programs from 1982 through 1991, the need for registered nurses in both short-term and long-term health care facilities has exceeded the available pool.

1989 national employment figures showed 160,000 positions unfilled for registered nurses (American Nurse, 1991). Registered nurse employment projections by health care economists show that the nurse shortage could reach 1.2 million by the year 2000 (Richman, 1987). In the June 1988 executive summary of the Sixth Report to the President and Congress on the Status of Health Personnel in the United States (June 1988) an anticipated decrease in nursing personnel was projected by the year 2000. This forecast is based on the decreased number of graduates in the 1980's and 1990's.

Regionally, the Illinois Department of Employment Security's (IDES) most recent projections indicated that by the year 2000, the state of Illinois alone would need 23% more registered nurses. 1988 Illinois employment figures placed

the number of working registered nurses at 83,927. 106,882 nurses would be needed by the year 2000 to meet the Illinois health care demands (Illinois Department of Employment Security, 1992).

Many factors have contributed to the high-demand, low-supply phenomenon, not the least of which has been declining enrollments in nursing programs at all levels of academic preparation. Since an enrollment peak in 1983 of 250,000 students attending baccalaureate, associate degree, and diploma schools of nursing in the United States, there had been a steady decline to approximately 150,000 nursing students by 1987 (Richman, 1987). Among the reasons articulated to explain the waning interest in the nursing profession, five arguments predominate.

The first of these rationales is the decline in the college-aged population. Traditionally, the nursing profession's recruitment pool has been 18 to 20-year-old men and women. This age group has shown a significantly progressive decline from a peak of 9 million to a projected number of 6.5 million by 1995 (Maraldo & Solomon, 1986; Frances, 1986). This decline represented, for the future, an 18 percent decrease of college-aged students (Maraldo & Solomon, 1986; Frances, 1986). Unfortunately, the nursing profession has been slow to heed this population decline forecast. It is interesting to note that associate degree programs; community-based, two-year programs, traditionally

have attracted more older students than the four year schools. The AD programs typically have graduated more nurses at an average age of 30 years old, than have the four year programs. There recently has been a reversal in this trend, and AD programs currently are admitting more students aged 18 to 20 years old (Roberts, 1989). Thus while the trend for baccalaureate programs and diploma programs has been a decline in the enrollment of late adolescents, associate degree programs' enrollments have shown increased numbers of 18 to 20-year-old students.

A second reason for the waning interest in nursing has been the result of a dramatic change that occurred in the late 1960's and throughout the 1970's in society's conceptions of women's roles and occupational choices. The impetus for this attitudinal redirection was the contemporary feminist movement which, among other things, caused women to reexamine prescribed feminine roles in Western culture. Occupationally, the standard careers, such as nursing, prior to the feminist movement were service-oriented, non-competitive ones in which women were often handmaidens for career-motivated, highly competitive males. Currently, fewer women choose nursing as a career because other careers once considered the domain primarily of men only, have been opened up to women (Maraldo & Solomon, 1986).

Traditionally, women were identified as expressive or social specialists (Bales, 1949), attaching less significance

to material rewards that could be gained from occupational choice and emphasizing instead, service to humankind (Meeker & Weitzel-O'Neill, 1985). Feminist activism in the 1960's and 1970's influenced career choice and opportunities for women. Currently, females view occupational choice more broadly, may view nondomesticity as desirable, and have become more competitive in the workplace. Many females no longer view work as subordinate to their roles as wives and mothers (Van Cleve, 1988).

A manifestation of this redefinition has been an increase of women in the workplace, particularly in non-service careers and professions other than nursing. Women constituted 39 percent of all professional workers in 1972 and 45 percent in 1982 (Maraldo & Solomon, 1986). Kalisch and Kalisch (1987) reported that in 1984 women comprised one-third of the first-year medical students and one-third of all business students. Green (1987a) reported that 10 women entered the medical profession for every eight women who entered nursing.

The lure of careers dominated previously by men resulted in a shrinkage of the pool of applicants to such traditionally female occupations as nursing. Moreover, as women moved from viewing work as a means of supplementing family income to the view of work as career, their motivations for occupational choice changed. In a survey of nurses who changed jobs and left nursing, the primary reasons for doing so were low salary scales and poor benefits packages (Maraldo & Solomon 1986).

These reasons support the third trend implicated as contributing to the nursing shortage, the relatively low wage/compensation scale for nurses.

Registered nurse salary figures for 1984 showed a median annual income of \$19,700 to \$21,600 for staff nurses (Maraldo & Solomon, 1986). Starting salaries averaged \$12 dollars per hour nationally. Some states paid as much as \$15 dollars per hour and others as little as \$10 dollars per hour (Maraldo & Solomon, 1986). The average starting salary for registered nurses in Illinois was \$12.50 per hour. Chicago paid the highest at \$15 dollars per hour (Roberts et al., 1989). Once in the work place, salary increments are often less than the cost of living increases. Promotion to Head Nurse and ten years of experience typically nets the nurse an annual salary of \$30,000 (Secretary's Commission on Nursing Final Report, 1988).

Career choice for today's high-school student is predominantly motivated by the return on investment principle. Specifically, the student and his/her parents look at the potential income earning power of various occupations in order to reap the highest return on their economic investment in higher education (Cohn & Geske, 1986). Decline in federal tuition subsidies for nursing was the fourth trend negatively affecting enrollments in nursing programs. The low salaries of nurses, compared to lawyers for example, is often discouraging to the people considering attending college.

Astin and Panos (1987) reported that college freshmen's main priority was to graduate from college with a degree that would enable them to be well off financially. From a peak of \$102.5 million in 1976, federal support for nursing education declined to \$60.3 million in 1979 and was rescinded in 1983 (Secretary's Commission on Nursing Final Report, 1988). Financial aid from the federal government, especially in the form of nonrepayable aid, accounted for less than one-half of student subsidy. Conversely, self-help aid through student loans and work accounted for over half of all direct support to students (Wagner, 1986).

The negative image of nursing as a career has been cited as the fifth condition affecting entry into the profession. In their book, The Changing Image of the Nurse, Kalisch and Kalisch (1987) identified five dominant images of nursing: angel of mercy, girl Friday, heroine, mother, and sex object. The occupational role of nursing, they added, had the stereotype of having been populated by women who were dependent and ineffectual in attempts to direct their own destiny. Kalisch and Kalisch (1987) believed that young women were disinclined to enter nursing because of the vapid image of nursing portrayed in the media, particularly television and the movies. Instead of the nurse depicted as sensitive, caring, assertive, and capable of saving lives, she is often caricatured as intellectually dense, a sex kitten, and the physician's handmaiden. Such a characterization of the

nursing role does not necessarily hold attraction for bright, ambitious, young women, let alone men.

The overall decline in individuals aspiring to nursing as a career has served to compound the already existing shortage of nurses. The ramifications of inadequate numbers of prepared nurses on the health care industry would be significant threats to quality, perhaps even safe patient care. National trends indicate that in-hospital patient acuity has increased markedly, representing a need for more intensive-care beds staffed by highly educated and skilled nurses.

The reasons recounted that address probabilities for the current nursing shortage obviously do not explicate the rationales as to why some men and women do choose nursing as a career. Understanding the motivations for occupational or career choice may be helpful in nursing's goal of increased recruitment into the profession.

Conceptual Framework

Career choice and development involves a process of socialization to a new role. Brimm (1966) conceptualized professional or occupational role socialization as a component of adult socialization. While he contended that socialization was a developmental, life-long process, he did concede that no individual could be fully socialized during childhood and adolescence for role(s) that would be actualized at some future point in his/her life. Further, Brimm delineated

different tasks for socialization of children and adults. Childhood socialization was directed at the inculcation of values, attitudes, and behaviors by the child as learned from his parents. These prepared the child to eventually assume independent living as an adult. Adult socialization, on the other hand, focused on learning behaviors to be enacted in various roles; be they career, family, or peer relationships (Brimm, 1966). The process of professional role socialization combined elements of childhood and adult socialization. Specifically, professional role and adult socialization entailed learning and cultivating values coherent with a given profession, as well as achievement of a base of knowledge and skill particular to any given profession (Olmsted & Paget, 1969).

Robert Merton (1968) in his study on the socialization of soldiers, conceptualized anticipatory socialization as the process by which an individual takes on the values of the non-membership group to which s/he aspires, finds readier acceptance by that group, and makes an earlier adjustment to it. Bess (1978) defined socialization into the professional role as "the process by which students adopted the values, norms, and social roles which constrained behavior in an organizational setting" (p. 292). According to Bragg (1976) role socialization was continuous and social and involved a number of steps:

1. observation - the identification of role model(s);

2. imitation - the trying on of the role model's behavior;
3. feedback - the evaluation of the trying on behavior;
4. modification - the alteration or refinement of behavior as a result of evaluation; and
5. internalization - the incorporation of the role model's values and behavior patterns into the individual's self-image. (p. 292).

The salient features relative to professional role socialization were that the role was learned through social interaction with both individuals and groups, and through role modeling. The most common means of exploring one's fit with one's occupational choice was through interaction with significant others (Meleis, 1975).

Corcoran and Clark (1984) applied the term anticipatory socialization to the process involved in deciding on career choice. Corcoran and Clark (1984) conceived of professional role socialization as a three-tiered model. Stage I, anticipatory socialization, included the processes by which individuals choose a profession and are recruited into the profession. Stage II is the process of roles acquisition. It is dominated primarily by occupational training, formal education, and promotion of commitment to the role. Stage III focuses exclusively on role continuance, job involvement and commitment. Stages II and III are not the focus of this study and therefore, will not be further elaborated.

Corcoran and Clark (1984) contend that occupations possess certain "recruitment resources, attractors, and facilitators" (p. 135). Rather than defining these terms, Corcoran and Clark described specific functions as delineators or career attractors and facilitators. Attractors are the subjective experiences an individual has that persuade him/her to choose a particular career. These include, but are not limited to, 1) the esteem in which the occupation is held; 2) the perceived social value of the occupation; and 3) the dominant sex-type found in the role. Since Corcoran's and Clark's study focused on anticipatory socialization of academicians, attractors included features such as teaching, research, work with students, and so forth.

Facilitators are external mediators of occupational choice including but not limited to, 1) experience with an individual in the desired occupation; 2) media portrayal of the role; and 3) vicarious experience with the role. Career facilitators included functioning as a teacher's aide, or in childhood, "playing" school.

Finally, anticipatory or preprofessional role socialization is influenced by the individual's social setting, cultural values, and environmental contingencies. These antecedents to anticipatory socialization are supported by other career development researchers (Vondracek, Lerner, & Schulenberg, 1983; Gottfredson, 1981; Astin & Panos, 1969; Krumboltz, 1979; Mitchell & Krumboltz, 1990; Corcoran & Clark,

1984).

Corcoran and Clark's model explaining career choice and career continuance, encompasses the elements of socialization to a new role as delineated by Brimm, (1966); Bess, (1978); Olmsted & Paget, (1969); Meleis, (1975); Hamerick, (1982); and Kinney (1985). Consequently, their Stage I of prevocational choice, anticipatory socialization will be the conceptual basis for this study.

Purpose of the Study

The purpose of this study is to identify factors believed to influence individual choice of nursing as a career. Further, these factors will be categorized according to Corcoran's and Clark's conceptualization of facilitators or attractors as the anticipatory antecedents to the profession of nursing. Based on the identification of career facilitators or attractors, a determination will be made as to which of these antecedents were the more predominant mediators of nursing as occupational choice.

Guiding Questions

Current declining enrollments in nursing programs raises a number of questions relative to the attractiveness of the profession as a whole. The most prevailing questions for those individuals who have chosen to pursue the study of nursing are, Why have they chosen this career? Is their occupational choice mediated more frequently by facilitators

to the profession (external factors) or attractors to the profession (internal factors) as described by Corcoran and Clark (1984)?

There are four documented nursing studies spanning the time period of 1964 through 1974 that were designed to ascertain the motivations of college students' decision to choose to study nursing as their occupational choice. Davis and Olesen (1964) used a 19-item, structured questionnaire for the purpose of ascertaining the image of nursing held by nursing students in a collegiate program. Pavalko (1969), and Dunkelberger and Aadland (1984), attempted to identify what factors were related to recruitment to nursing. These studies focused on social demographics such as socioeconomic status, or intelligence quotient of nursing versus non-nursing students. Correlations were then made between choice of nursing as career and these social factors. Brown, Swift and Oberman (1974), replicated the Davis and Olesen study but on a smaller scale than the original. These investigators used the same instruments used by Davis and Olesen, but changed the sampling criteria established by Davis and Olesen in their study. Instead of following one group of nursing students from matriculation into the program to graduation as did Davis and Olesen, Brown et al., administered the questionnaire to sophomore and junior nursing students.

These four nursing studies are all based on quantitative measures. None of the studies offers the respondent the

opportunity to describe the reasons for choosing nursing as a career from their own perspective. Other studies that looked at nursing as career choice tended to correlate specific factors such as gender, personal values, or parental influence on the decision to become a nurse.

The studies reviewed by this investigator were primarily correlational, longitudinal, or descriptive using quantitative measures. A weakness of these designs is that they do not allow the respondents to describe in their own words the reasons that nursing was chosen as a career.

Collin and Young (1986) stated that the "theories about careers lie at the intersection of several social science disciplines (economics, sociology, psychology, and their various branches, both pure and applied)." (p. 838). They suggested that rather than one general theory of career, the study of career is evolving. Epistemologically, Collin and Young (1986) contend that career research has had a predominantly positivist thrust. In their analysis of career literature they formulated five conclusions:

1. Most of the career literature lacks definition and clarification of basic concepts.
2. Career research has certain limitations (e.g., samples are predominantly male, and/or middle class).
3. Research thrust has been centered on individual factors and not enough on contextual elements such

as economic trends or environment.

4. Career literature is concerned primarily with the objective career, or progression of an individual through an organization or occupation, rather than the subjective career which is a more individualized perspective.
5. Career theories have been philosophically conceived within the social sciences. (pp. 839-841).

Collin and Young (1986) perceived the foregoing as limitations on the development of career theory. To ameliorate this, they proposed a qualitative approach to the study of career choice which would hinge on the ecological/systems, biographical, and hermeneutical (p. 843). Qualitative study of career choice, according to Collin and Young (1986) would lead to new conceptual views embedded in a contextual world view. (p. 849).

In view of the types of studies done in nursing to ascertain occupational choice coupled with Collin and Young's foregoing argument, a qualitative design for this study seemed appropriate. Allowing the respondents in this study to bring their own perspective to the question under consideration would enable the investigator to develop a more plausible description of what motivated the subjects included in the study to choose nursing as their career.

Method

Population and Sample

To determine why individuals would choose nursing as a career, the researcher conducted interviews with baccalaureate students who had declared a nursing major but had not yet taken any nursing arts courses. Details concerning selection of the students to be interviewed, and conduct of the interviews will be reported in Chapter Three.

Definition of Terms

For the purposes of this study the terms below were defined as follows:

Anticipatory Socialization: The adoption of values, ideals, and the conceived role of a career or occupation (nursing) through one's own conception of the role and observation of its members in the occupation.

Career Attractors: The individual's intrinsic values and beliefs held about a career or occupation.

Career Facilitators: The external motivators that persuaded individuals to choose specific careers.

Significance of Study

The study of nursing as career or occupational choice raises questions germane to the process of role socialization, particularly anticipatory socialization. Of specific interest is the applicability to nursing of Corcoran and Clark's conceptualization of career choice, which was originally

tested with academicians. The identification of mediators that direct occupational choice would be useful in profiling the type of individuals most likely to choose nursing as a career. This information can be used to target for recruitment those populations most likely to choose nursing as a career.

Summary

This study was a descriptive qualitative study intended to identify vocational attractors and facilitators to the nursing profession. A guided, focused interview method was used to obtain information regarding the reasons why the individuals in the study sample chose nursing as their career. Baccalaureate students enrolled in a pre-nursing curriculum were the population selected for the study. The study group was derived from Chicago-land schools and surrounding counties. All of the subjects were female.

Corcoran and Clark's (1984) conceptual framework, anticipatory socialization, was used to describe nursing as an occupational choice. Data were organized around themes that were broadly categorized as attractors or facilitators to the nursing profession.

Career or occupational choice is influenced by attractors or facilitators of career decision making. Anticipatory socialization or prevocational decision making has both a developmental and life experience component. Developmental factors that need to be considered when analyzing an

individual's career choice include one's socialization process during childhood; gender influence; and the cultural context in which the individual is socialized. Life-experiences that contribute to occupational choice include work experiences that are in some way related to the chosen career; vicarious experience with the occupation encompassing the varieties of media to which an individual is potentially exposed; and observations of individuals who have already attained the aspired role.

The next chapter will review cogent studies reported from the social and behavioral sciences that address career decision making. Due to the enormous number of studies reported that investigate careers, the review will be selective addressing those studies that pay particular attention to the first phase of occupational choice, anticipatory socialization. Nursing studies that examine the reasons why individuals chose nursing as their career will also be identified and critiqued.

Finally, it should be pointed out that since this study was conducted, it has been reported that the nursing shortage has eased to some degree. The Chicago Tribune (C. Kleiman, March 7, 1993) found that nationally 8.7 percent of the nursing positions were unfilled in 1991 compared to 11 percent in 1990. The state of Illinois during this time had a 7.5 percent vacancy rate for nursing positions. Employment figures in 1992 for Chicago showed 1,200 job openings for

nurses that were unfilled. In this article on the nursing shortage the reader was warned that these figures were not to infer that there was no longer a nursing shortage. While hospital positions may be filled, it is estimated that by the year 2000, 60% of the patient care will be delivered outside of the hospital. This is where the nursing shortage will continue and be most acutely felt. Finally, it is projected that vacancy rates in specialized units such as medical intensive care will continue to be approximately 12 percent. These facts show that the nursing shortage is still a real issue and that recruitment strategies will still need to be explored.

CHAPTER 2

REVIEW OF RELATED LITERATURE

Overview

This descriptive, qualitative study was designed to ascertain the attractors (subjective experiences) and facilitators (external mediators) that motivated college students to select nursing as their occupational choice. Corcoran and Clark (1984) contend that career attractors and facilitators are the first level processes involved in deciding on a career. This phase, termed *anticipatory socialization*, involves the individual's conversion process in which s/he moves from thinking of self with no career to thinking of self with a career, such as nursing or teaching or accounting. The questions that are addressed in this study focus on 1) why individuals choose nursing as their occupational choice, and 2) whether a career decision is motivated more by attractors or facilitators to the profession or occupation.

This chapter will review the concept of anticipatory socialization or occupational choice motivation. Studies that describe the process of career decision making or tested

components of the process will be discussed. Particular attention will be paid to the anticipatory socialization process of individuals choosing nursing as their career, the population selected in this study.

There are a dearth of studies that have examined the motivating factors explaining why college students chose nursing as their occupational choice. The first study of this type was conducted by Davis and Olesen (1964, 1966). Pavalko (1969) followed with a longitudinal study which described the social characteristics of women recruited into nursing. Later, Dunkelberger and Aadland (1984) replicated the Davis and Olesen study. Since 1984 no studies have been published that looked at the overall reasons why college students chose nursing as their future occupation. Studies that have been conducted since 1984 measured specific components of anticipatory socialization to the nursing profession such as career attractors or facilitators. The foci for these studies ranged anywhere from image of nursing, sex role preference and occupational choice to influence of faculty on students' perceptions of nursing and values regarding the profession. In order to provide a frame of reference for the nursing studies that focused on anticipatory socialization, the process of career choice from a sociological, psychological and developmental perspective will be briefly addressed followed by specific studies that focus on preprofessional socialization to nursing.

Anticipatory Socialization,
Preprofessional Socialization

Psychosocial Developmental Considerations

Caplow (1954) conceived of occupational choice as a process that could be divided into three phases: the period of fantasy choice (childhood to puberty); the period of tentative choice (early adolescence); and the period of realistic choice (late adolescence).

(p. 227). The fantasy period was characterized by unrealistically made choices that were motivated by activities deemed as pleasurable. The tentative period was dominated by serious searching for an occupation. However, the choices made during this early adolescence period were based on subjective feelings not grounded entirely in reality. The final stage, the realistic period, was distinguished by exploration, crystallization, and specification. During this stage occupational choice was made although not yet actualized. Crystallization of occupational choice in the realistic period occurred as the individual sought relationships with individuals already working in the desired role (Caplow, 1954).

Anticipatory socialization affords prospective members of an occupation the opportunity to distill role behavior in a given career through observation of members currently active in the career. Merton (1968) postulated that anticipatory socialization was evident through an individual's experience with the desired role or fantasizing about the desired role.

Birnbaum and Somers (1991) contended that anticipatory socialization, which they term prevocational experience, empowered an individual to form an image of the occupation to which s/he aspires.

It is interesting to note that Caplow's (1954) rendering of the process of anticipatory socialization is influenced by the individual's development and childhood socialization. Sex role socialization during childhood may have an influence on career choice as well, as found in Brooks and Betz's, (1990); Astin and Panos', (1969); and Harmon's, (1971) studies which will be discussed shortly.

Current literature that focuses on the psychology of development refutes the idea that development proceeds along prescribed stages. This is especially true after childhood. Adolescent development in particular is marked by wide variations of what may be considered typical behavior and development. This is due to a range of diversification as each individual develops and is further influenced by the social and cultural context within which s/he interacts (Vondracek, Lerner, Schulenberg, 1983).

Borow (1966), in his review of childhood development of occupational choice, characterizes the process as long and marked by a number of variables such as parental influence, social status, peer interactions, work experience, and school studies. He notes that school subjects and employment experience in a setting or occupation related to the

vocational aspiration are two important influences in adolescent decision making to pursue a particular occupation.

Ginzberg, Ginzburg, Axelrod, and Herma (1951) studied occupational choice based on the premise that it was a developmental process. He employed a cross-sectional sampling technique and a semi-structured interview method to study the process of vocational choice. Ginzberg et al.'s, sample consisted of 64 upper-middle class subjects equally distributed across grade level including sixth graders to advanced graduate study students. The data were analyzed thematically by identifying age-related stages of thinking in relation to occupational choice.

Ginzberg et al., concluded as a result of their study, that the process of occupational choice could be divided into three psychological periods. The first period was termed the *fantasy* period which extended up to age eleven. Occupational choice was characterized primarily by subjective feelings about the vocation. The child retains some sense of omnipotence about occupations believing that s/he can enter any occupation simply by saying so.

The second period delineated by Ginzberg et. al., was termed the *tentative period*. The approximate age range for this period was eleven years through 17 years of age. The child now understands that occupational aspirations can only be met if certain educational qualifications are achieved first. The child has now moved from considering an occupation

solely on his/her own personal interests, to considering occupations based on what his/her capabilities and values are. Ginzberg et al., characterize age 17 as a transitional period in which the adolescent's occupational choice is influenced by the realities of the outside world.

The final period of vocational choice is termed the *realistic period*. This stage, entered into almost at the end of the 17th year, is a period of synthesis. The adolescent merges his/her personal traits with external factors, such as the economic potential of a vocation, to make the final decision about occupational choice. Ginzberg et al., subdivide the *realistic period* into three chronological substages: *exploration* wherein experiences are sought that will help the adolescent "tryout" for the occupation. An individual aspiring to a career in the health field, for example, may volunteer in a hospital or even seek employment as a nurse's aide or orderly; *crystallization* the individual makes a commitment to a vocation; *specification* in which the individual undertakes the necessary preparatory steps to assume the occupation (going to school, etc).

Ginzberg et al's., sample consisted primarily of males. While the number of females in the sample was small, Ginzberg et al., state that this developmental process was parallel in both sexes. However, the *realistic period* for girls was compounded by other variables, such as contingencies of marriage and the potential economic status of the future

husband. Because the female cannot predict how marital factors will affect her life, she cannot make a clear vocational choice. This latter revelation in Ginzberg et al's., study was not explored in the literature for verification or refutation. However, given that Ginzberg et al., reported their findings in 1951, one suspects that societal changes may have influenced a change in females' ability to process vocational choice. While women may not be opting for remaining unmarried, the potential for marriage may not have as strong an influence on whether or not a particular vocation will be pursued as it did in the late 1940's through 1950. It should be noted that Caplow (1954) was apparently significantly influenced by Ginzberg et al's., work as Caplow uses many of the same descriptors as Ginzberg et al., uses when describing the stages of arrival at a vocational decision.

Despite the lack of empirical evidence to lend support, it would appear logical that anticipatory socialization to a career would be influenced by an individual's self-concept and by the image the individual holds of a particular career or occupation. Gottfredson (1981) took a broad view of the term self-concept. Her conceptualization embraced a past, present, and future orientation of the term. Thus, for Gottfredson self-concept encompassed one's sense of self as reflected by past life-experience, by society, by one's own attribute self-assessment, and finally by imagining what one would like to

be.

Occupational image, as conceptualized by Gottfredson (1981) in her circumscription model explaining the process of career choice, was also multidimensional including but not limited to what prestige was attached to the career, whether it was male or female dominated, and what rewards were attached to the position. In essence, the image an individual formulated about an occupation became the generalization made about the career. An individual's self-concept and occupational image were significant constructs that could influence anticipatory socialization to a career.

Gottfredson theorized that occupational image progressed along a developmental continuum with self-concept evolution. The young child had a relatively positive image of all occupations of which s/he was cognizant. As cognitive development progressed, occupations were viewed more discriminately and those careers believed to be gender inappropriate were deleted from the repertoire of possible careers. As the school-aged child's social world expanded, occupations were eliminated that held low prestige or did not coincide with the child's own self-concept. Adolescents' occupational image emerged from their childhood perceptions, their own assessments of personal capabilities, their interests and values, and the sense of what could be achieved with the least amount of personal effort.

A number of investigators (Astin & Panos, 1969; Harmon,

1971; Gottfredson, 1981) examined the concept of compromise in career decision making. The majority of older adolescents and young adults eventually made compromises relative to occupational choice. For example, males might be interested in nursing as a career. However, because of the view of the profession as predominantly female, males may fear that if they pursued nursing others would question their sexual orientation.

In a study on sextype and job preference, Astin and Panos (1969) found that males chose careers that were viewed as more masculine, whereas women preferred more feminine occupations. Harmon (1971) studied college women and corroborated Astin and Panos' (1969) findings. The female subjects in Harmon's study planned to enter occupations that were viewed as typically feminine. Finally, Gottfredson (1981) contended that "gender self-concept would be the most strongly protected aspect of self, followed by the maintenance of one's social standing or worth...." (p. 572). Thus, even if an individual had a preference for a particular career, if the choice would cast doubt about gender, Gottfredson believes that the individual would compromise and choose a different occupation.

Individuals may compromise by choosing another related career over the preferred occupation. People will frequently pursue a career because of its immediate availability and because it will take the least amount of personal effort (Gottfredson, 1981). However, the choice made must be deemed

satisfactory by the individual or it will not be pursued.

The questions as to whether or not career compromise adversely affected psychological well-being also had been investigated by Gottfredson and Becker (1981); Zytowski (1974); and Dolliver, Irvin and Bigley (1972). Over all, the findings in these studies indicated that the majority of individuals were satisfied with their eventual occupational choices even though they were not in a field to which they had originally aspired.

Anticipatory Socialization,
Preprofessional Socialization

Applicability to Social Learning Theory

Krumboltz (1979, 1990), influenced by the work of Bandura (General Social Learning Theory of Behavior), developed a theory of career decision-making based on social learning theory. Krumboltz's theory is designed to aid in understanding and explaining career socialization, beginning with why an individual chose a particular occupation to why s/he changed occupations at various points in his/her life.

Krumboltz proposed that the career-decision making process was influenced by antecedent factors such as one's genetic endowment and special abilities; environmental conditions and events; learning experiences; and task approach skills (1979, p. 120; & 1990, p. 148). An individual's past learning experiences, one factor that influenced career choice according to Krumboltz, was particularly salient relative to

this study.

In Bandura's social learning theory as interpreted by Krumboltz (1979) three types of learning experiences are posited. The first of these learning experiences is termed instrumental learning. Negative or positive reinforcement of cognitively mediated behavior is the basis for instrumental learning. Thus, positive reinforcement would motivate an individual to repeat those behaviors evoking such affirmation. Applied to career decision-making, for example, an individual who earned an A grade and considerable praise during an emergency first-aid course might be favorably inclined to pursue nursing as a career.

Associative learning is the second type of learning experience delineated. Individuals learn as a result of associating an event or stimulus with an emotionally laden incident. A woman may decide to study nursing because she was impressed with the kindness shown by a nurse to the woman's five-year-old son admitted to the emergency room with a deep gash in his forehead.

Vicarious experience is the third way persons learn. Vicarious learning occurs through observation of others, and through information media sources such as radio, television, and books. Thus, a television show which depicted nurses caring for hospitalized patients may prod an individual to choose nursing for a career.

Krumboltz (1979, 1990) integrates vicarious learning into

the associative learning category. However, that conceptualization is unfortunate. Instrumental learning and associative learning occurred through direct experience (Krumboltz, 1990). Vicarious learning is more appropriately categorized as indirect learning as it does not entail the active participation of the learner in a situation. However, considering that career or occupational image can be constructed from observation of a role (Bragg, 1976) or through presentation of an occupation via different media formats (Beaman & Reichelt, 1989), vicarious learning would seem to be a significant mode. It should stand alone rather than being assimilated into another category of learning as Krumboltz has chosen to do.

Hackett and Betz (1981) published a paper specifically applying Bandura's Social Learning Theory to the career development of women. They propose that studies examining the process of occupational choice particularly in women are needed. They contend that women continue to choose occupations that are more "female" dominated than "male" dominated. Using Bandura's theory, Hackett and Betz postulate that the reasons for this role socialization may be as follows:

Performance Accomplishments: Women are more involved in domestic and nurturant activities and less involved in sports, mechanical activities or other traditionally male domains.

Vicarious Learning: Women have a lack of exposure to female role models representing the full range of career options. Female models largely represent traditional roles and occupations.

Emotional Arousal: Higher levels of anxiety are reported by feminine sex-typed individuals.

Verbal Persuasion: Women consistently lack encouragement toward and/or are discouraged from nontraditional pursuits and activities, e.g., math and science. (p. 333).

Hackett and Betz suggest that Bandura's model would be a useful paradigm for studying women's occupational choice.

Horrocks and Jackson (1972) in their book, Self and Role, applied Piaget's conceptualization of cognitive development to adolescent role-taking (career choice). Cognitive development of the adolescent, termed formal operations, was distinguished by the individual's ability to formulate hypotheses about him/herself simultaneously as an individual and as one who can engage in meaningful interpersonal relationships. During this stage of development, the adolescent attributed to him/herself qualities which could be implemented through various roles. Thus, when the stage of formal operations was achieved, the adolescent could mentally construct occupational scenarios in which s/he could elaborate what types of careers would be satisfactory and for which s/he had suitable attributes. This was an important component of anticipatory socialization as

well.

Card (1978) studied the processes of career commitment which included how the choice was made to pursue a particular occupation in young adults pursuing a military career. A stratified nationwide sample of 1000 high school seniors, 1600 college students and 600 ROTC graduate army officers was used. Data were collected from a 200-item questionnaire developed by the investigator. While the purpose of the study was to examine commitment to a military career, the implications Card formulated at the end of her report are both interesting and salient to this study. Card outlines these implications in the form of principles.

Principle 1. A whole gamut of demographic, sociopsychological, informational, and experiential factors influences career decisions and intentions;

Principle 2. Different career influences become salient at different career stages;

Principle 3. Early exposure to a career path increases subsequent participation in and commitment to the career path;

Principle 4. The more intrinsic or free one's initial motivation in exploring the career path, the greater the likelihood of subsequent commitment to the path. (p. 71).

These principles, while needing verification and testing, are still relevant as they correspond with implications derived

from other researchers such as Gottfredson (1981), Brooks and Betz (1990), Corcoran and Clark (1984), Ginzberg et al., (1951), Krumboltz (1979), and Davis and Olesen (1964).

Anticipatory Socialization, Preprofessional Socialization

Sex Role and Parental Influence

A study by Brooks and Betz (1990) tested Vroom's Expectancy Theory to predict occupational choices in college students. 78 men and 110 women (N=188) attending a major university were enrolled in the study which was designed to predict the probability of choosing a particular career. One of the more significant results yielded by the data was the strong correlation between occupational choice and gender. Despite the wide range of career opportunities for both sexes, females tended to prefer female-dominated occupations and men, male-dominated. It is interesting and noteworthy that the study was published in 1990. Brooks' and Betz's finding contradicts the popular notion that a higher percentage of women are choosing primarily male-dominated occupations. On the other hand a critique of the study points out two areas of concern. The sample was derived from an introductory psychology class. This may have had an influence on the respondents' answers. Secondly, the investigators do not mention administering any androgyny tests which might have been helpful in determining the influence of sextype and occupational choice.

Davies and Kandel (1981) studied the affect of parental and peer influences on adolescents' educational plans. These investigators used a convenience relational sample of triads of matched adolescent-parent-best friend (N=762). The sample was taken from five public schools in the East. There was some inherent bias in the sample in that the children studied were male, had parents with education beyond high school, and the subjects had high educational aspirations. Data were collected using a self-administered questionnaire developed by the investigators based on Duncan's et al., model of peer influence, and the Wisconsin model of formation of educational aspirations. Factor analysis and path analysis were the statistical methods used for data analysis.

Davies and Kandel's data showed that parents had a stronger influence on the children's vocational aspirations than did peers. In addition, they found that socioeconomic status had no influence on vocational aspirations in the sample studied. Information from the path analysis yielded an interesting finding as well. Specifically, the adolescents' perceptions regarding what the parental aspirations for the adolescents were influenced to a large degree adolescent vocational choice.

Finally, Osipow (1979) in an analysis of Holland's and Roe's, and Klos' classifications of occupations noted that both Holland's and Roe's and Klos' classifications differed. However, all three theorists contended that for any career

individuals chose, distinctive attractors and reinforcers were operant within the individual's psychological environment during the process of development of occupational choice. This adds further credence to the concept of anticipatory socialization as delineated by Corcoran and Clark (1984), Merton (1968), Caplow (1954), and Birnbaum and Somers (1991).

Anticipatory Socialization, Preprofessional Socialization

Summary of Studies from the Behavioral and Social Sciences

The preceding discussion reviewed some of the relevant psychological, developmental, and sociological interpretations of the concept anticipatory socialization. An analysis of the literature presented revealed two repetitive themes relative to anticipatory socialization. These themes were that observation and interaction with individuals (role models) already functioning in a desired occupation were important components of occupational socialization and anticipatory socialization to a career. In addition, the works of Ginzberg et al., (1951), Caplow (1954), Gottfredson (1981) and Krumboltz (1979, 1990) point out the importance of understanding the social and personality development of individuals when studying their career choice decision making processes. Finally, a number of authors (Astin & Panos, 1969; Harmon, 1971; Gottfredson, 1981; and Brooks & Betz, 1990) directed our attention to the importance of occupational choice and gender in the decision made to choose a particular

career over another. Despite the fact that careers today are less likely to be designated as primarily male-oriented or female-oriented, there is still a tendency for girls to choose occupations which seem more "female" and boys to choose occupations that are more "male." Apparently, childhood socialization continues to foster gender role development influencing even occupational choice.

Anticipatory Socialization Preprofessional Socialization

Corcoran and Clark - Conceptual Framework

The conceptual framework for this study was derived from Corcoran and Clark's (1984) study on socialization and career attitudes. These authors were interested in developing a method to describe the interaction between an academic institution and faculty vitality (productive faculty in scholarship, teaching, and personally intellectually stimulated); career socialization (career entry, career induction, and role continuance); and faculty generations (faculty cohorts at key career stages). Corcoran and Clark adopted a qualitative methodology employing an institutional case study approach guided by in-depth interviews of faculty. Using Trow's 1975 Carnegie Commission on Higher Education study of faculty activities (p. 137); Lortie's work on collegiality and performance; Sarason's one-life, one-career imperative; and Kanter's study on opportunity and power structure, Corcoran and Clark developed an interview guide

composed of 50 open-ended questions (p. 137). This was a two-phase study conducted in 1980-81 and 1981-82. The study sample were 63 tenured faculty from three different institutions of higher education.

While the Corcoran and Clark study was multidimensional and concerned primarily with the faculty role, their conceptualization of career socialization, and anticipatory socialization in particular, bears unique significance for this study. Using the works of Erikson, 1950; Becker, 1964; and Brimm, 1966 (as cited in Corcoran and Clark, 1984, p. 133) they conceived of adult socialization to an occupation as a "connected three-tiered model within an organizational context" (p. 133).

Corcoran and Clark termed the period prior to career entry, anticipatory socialization. They contend that this period is marked by the process of deciding on a career based on the resources, attractors, and facilitators that an occupation possesses. Career attractors and career facilitators are two of the processes by which an individual chooses a career and eventually inculcates the values of the group already in the occupation.

Corcoran and Clark asked the study respondents several questions geared toward identification of the process of anticipatory socialization or career choice. However, despite their conceptualization that occupational choice is influenced by career attractors and career facilitators, Corcoran and

Clark's analysis of their findings only addresses attractors to the academic career of the study respondents. Career facilitators is not mentioned or explored.

The fact that Corcoran and Clark only identify career attractors in their study while ignoring career facilitators might be a reflection of the types of questions they asked the study respondents. Their lack of verification as to whether or not career facilitators hold some import in influencing career choice avails this investigator with an opportunity to explore this concept along with career attractors in the decision making process used by aspirants to the nursing profession.

Corcoran and Clark's envisioning of anticipatory socialization possesses a clarity and inclusiveness that is not as prevalent in other conceptualizations of this idea. For this reason, their conceptualization of anticipatory socialization is the one that will be addressed in this study.

The following section will focus on studies that examine nursing as career choice that serve to illuminate the study conducted and reported in this dissertation.

Anticipatory Socialization, Preprofessional Socialization

Nursing as Career Choice: Anticipatory Socialization

Davis and Olesen (1964) (Olesen and Davis, 1966) were two of the earliest researchers to examine students' images of nursing. The goal of their study was to ascertain the

students' images of nursing preprofessionally as compared to their professional role socialization at graduation. These investigators conducted a longitudinal, descriptive study following 65 students in a baccalaureate nursing program, and 17 faculty members who taught the subjects in the study. A structured questionnaire, Image of Nursing, which was developed by Davis and Olesen for the study, consisted of a 19-item checklist. This checklist was comprised of characteristics routinely associated with the nursing profession such as the "occupation is highly respected." The checklist had two foci. First, the subject was asked to check the characteristics that represented their own conception of nursing and second, those characteristics that were personally valued by the subject as important for a nurse to possess. The questionnaire was administered to the sample subjects upon entering their nursing program and each June for three consecutive years up through graduation. A parallel questionnaire was developed for faculty to measure the emphases faculty placed on the listed characteristics as they socialized the students to nursing over the four years the class was enrolled. The faculty were asked to rate the same characteristics of nursing on a Likert Scale that the students were asked to rate.

At entry into nursing, preprofessional role socialization (PPRS), 50 percent or greater of the respondents perceived nurses as women who were dedicated to service and humanity,

hard workers, drawn to human drama and excitement, seeking job security, meticulous, technically skilled, emotionally controlled, imaginative and creative, ordered and routinized, able to identify clear cut lines of authority, caring and concerned about others, and highly respected in the community (Olesen & Davis, 1966, p. 153).

At graduation the students' conceptions of nursing had changed most dramatically in their depiction of nursing in terms of advanced professional images (e.g., highly technical, intellectually rigorous, and requiring problem solving ability). Significantly, the students showed the greatest change in attitude in their view of nursing as a bureaucracy. The least amount of change occurred in the students' lay perceptions of nursing (image). Altruism, orderliness, dedication, high excitement, job security, and nursing as a religious calling were attitudes that prevailed in the students at entry, throughout, and at graduation from their nursing education (Oelsen and Davis, 1966, p. 153).

Given the time period when the participants were enrolled in the study (1962-1965), their answers probably did not reflect the impact of the contemporary feminist movement on women's career choice. Significant limitations in this study included collection of research data from participants in one particular nursing program, baccalaureate program students only, and one study site. In addition, how the researchers decided which characteristics of nursing to include in the

questionnaire was never delineated, thus no statements relative to content validity were advanced. Finally, no discussion by the researchers in the reported study gave evidence that the subjects were given the opportunity to identify characteristics of the profession that were not included in the checklist. Pavalko (1969), based on a study of high school seniors in 1957 in the Midwest, identified 411 girls who indicated that they wanted to become nurses. Pavalko attempted to recontact these women in 1964 to determine how many had indeed become nurses. Three-hundred and seventy-seven women out of the original 411 were followed-up. Fifty-one point five percent (N=194) of the women had become nurses while 183 (48.5%) had not. An additional 17 women who had not indicated an interest in becoming a nurse when originally surveyed as high school seniors, also become nurses. Thus, a total of 211 women from the original high school sample had become nurses.

The implied purpose of Pavalko's study was to identify what factors were related to recruitment to nursing. The factors he studied were: socioeconomic status of the women; the size of the community from which they came; the measured intelligence of the women; when they decided to choose nursing as occupational choice (during high school or afterward); and the type of nursing program chosen (diploma or baccalaureate). The findings of this correlational study were that the women who became nurses were recruited from families with reported

higher than average socioeconomic statuses, the size of the community from which they came had no significant relation to nursing as occupational choice, and the average measured intelligence overall of the women recruited into nursing was high. Four hundred and eleven women had indicated in Pavalko's original study (1969) that they intended to become nurses. Two-hundred and eleven women actually became nurses, 194 of these having made the decision while in high school. This latter finding in Pavalko's (1969) study needs to be reinvestigated. Current trends indicate that the average age of recruits to nursing is changing so that the mean age is 22.3 years. Since the women in Pavalko's study entered their course of nursing studies immediately upon completion of high school, their mean age would be approximately 18 years old. The characteristics as cited in Davis and Olesen's (1964) study may not be the same reasons that attract women whose average age is 22 years. Additionally, Pavalko's factors investigated and correlated with nursing as occupational choice may well be different in today's social environment. For instance, the economic stressors of the mid-1960's may have precluded females, except those from families with above average incomes, from pursuing a college education.

Pavalko's study is interesting but does little to describe the reasons why women choose nursing as their career. Instead, the study focuses exclusively on social factors that correlate with nursing as career choice. Indeed, it is

doubtful how timely this study is in today's social climate.

Dunkelberger and Aadland (1984) did a study similar to Pavalko's (1969). These investigators replicated Pavalko's design collecting data over a period of seven years for the high school class of 1972. While Pavalko's sample was taken from one state, Dunkelberger and Aadland sampled 50 states and the District of Columbia. Schools within these states were randomly sampled and the 12th grade students in these schools were then randomized.

The first data set yielded 601 students who indicated that they planned to become nurses. Follow-up contacts showed that 394 did not; 207 did become nurses; and 167 became nurses who did not originally plan to enter nursing. Dunkelberger and Aadland used Pavalko's social criteria of social economic status, community size, aptitude and time of occupational choice. They also added race as a variable.

Dunkelberger and Aadland's findings paralleled Pavalko's (1969). The one new finding was that more white females became nurses than did black females. However, like Pavalko's this study did little to illuminate the reasons why individuals chose nursing as their occupation.

Brown, Swift, and Oberman (1974) replicated the Davis and Olesen (1964) study using the same instrument developed by Davis and Olesen. However, the longitudinal design was abandoned by Brown et al., as being too infeasible for them based on available time and resources. Thus, in their study,

the nursing image questionnaire was administered to two separate groups of nursing students, a group of sophomores and a group of juniors, rather than using the same student class at different points in their nursing education. The study was also conducted in a different state than where Davis and Olesen conducted their study. However, the nursing population were students enrolled in state supported colleges/universities in both studies.

Because the nursing population in the institution used for the investigation was large, Brown and her co-investigators drew a sample from the two classes under study. Thus out of a potential pool of 201 students, 74 were included in the sample. Fifty-three of these were sophomores and 21 were juniors. The faculty questionnaire used in the Davis and Olesen (1964) study was distributed to 21 instructors. Twelve responded.

The findings in Brown's et al., study were similar to that in the Davis and Olesen study. That is the students' perceptions about nursing at the beginning of their studies and their perceptions at the end of the program were nearly identical to those in Davis and Olesen's study. Significantly, the sample studied in Brown's et al., study chose nursing out of care and concern for people which is the primary reason given by the respondents in the Davis and Olesen study, and supports the lay perception of nursing as identified in Davis and Olesen. The faculties in both studies

were also similar in their emphases of what were the most ideal characteristics of nurses.

While the Brown et al., study did support the findings in Davis and Olesen's study, the alteration of the design of the study may have had some limiting effects on the study. However, these investigators did pose significant suggestions for future research. These investigators recommendations that the Davis and Olesen image questionnaire needs reworking. Secondly, they criticize the fact that the items in the questionnaire that are seen as characteristics of nursing have not been validated empirically. Thirdly, the image clusters delineated in the Davis and Olesen study (lay, traditional, bureaucratic and advanced professional) should be determined by a factor analysis technique to determine if they are indeed the "right" clusters. Lastly, Brown et al., suggest that a different measure of faculty consensus regarding the characteristics that are most important in nurses be developed. Overall, Brown et al., suggest that the Davis and Olesen (1964) study does not provide a full understanding of the phenomenon of socialization to nursing.

Davis and Olesen (1964); Olesen & Davis (1966), and Brown et al., (1974) focused their studies on the socialization process of nurses into the nursing profession beginning with recruitment into the profession. Despite the fact that both studies did pay some attention to the preprofessional socialization of the students to the profession, their

findings are limited by the fact that the subjects in the study had to make a forced choice relative to characteristics of nurses. Pavalko, (1969) and Dunkelberger and Aadland, (1984) while looking at recruitment factors to the profession, considered only social factors which ultimately provided demographic descriptions of the women who chose nursing as occupational choice in the setting under investigation in the early 1960's. In essence the studies cited examined nursing image or demographic characteristics of the nurses in the profession. The following series of studies presented considers particular aspects of influencers of occupational choice, such as gender, or personal values, or suggestibility by others.

Nursing Studies

Influencers of Occupational Choice in Nurses

Studies that focus on nursing as a career tend to be explored along two principal routes. First, studies that examine the socialization process of individuals into the nursing profession. Second, studies that primarily investigate nursing as a career or occupational choice from the focus of nursing image and image and sex role preference. The dominate design for these studies are experimental, quasi-experimental, or survey studies. This author could not locate any qualitative studies in the reported literature. Thus, the following studies reported employed quantitative methods.

A study of baccalaureate nursing student values was

conducted by O'Neill (1973) in which she tested 465 students in three baccalaureate programs in the Midwest. A cross-sectional design was used to survey students in the sophomore, junior, and senior years of the programs. The instruments used in the study were also given to college females enrolled in curriculums other than nursing in the same academic institutions as the nursing students.

O'Neill's purpose in conducting the study was to compare the "values of nursing students with other student groups at successive class levels." (p 437). The subjects in the study were asked to complete two instruments, the Allport-Vernon-Lindzey scale for measuring dominant values and the Gordon Survey of Interpersonal Values which measured values that pertained to interpersonal relationships. It should be noted that the Allport et al., scale was based on personalities of men in the work place as delineated by Eduard Spranger (O'Neill, 1973). O'Neill does not address the validity of using a scale normed on males to study female personalities relative to occupational choice. Thus while her findings, which will be reiterated shortly, were interesting they should be viewed with some skepticism.

The Allport-Vernon-Lindzey scale asks the respondent to rate a list of six values which they believe are dominant in their lives or of great importance to them. The six values are: theoretical (the individual values order and systematizing knowledge); economic (the individual values what

is useful and practical); aesthetic (the individual values beauty from the standpoint of grace, harmony and fitness); social (the individual values altruism and philanthropy); political (the individual values power and influence); and religious (the individual values unity of the man relative to the universe) (O'Neill, 1973).

The Gordon Survey of Interpersonal Values measures the importance of six values in a given personality. These six values are: support, conformity, recognition, independence, benevolence, and leadership. The subjects in the study were asked to rate these values on a scale of most important to least important to them. The data collected from the two scales were analyzed by one way analysis of variance which compared the non-nursing major respondents to the nursing major respondents (O'Neill, 1973).

The results of O'Neill's study showed a significant difference in the nursing majors responses as compared to the non-nursing majors responses on the Allport et al., scale for all six values. However, the most significant differences were that the nursing students attached greater importance to altruistic and philanthropic (Social Value) ideals and theoretical values than did the general female college population sampled. Comparison of the data obtained for the two groups from the Gordon Interpersonal Values survey demonstrated that the nursing students attached greater importance to being generous and helping people than did the

necessarily rated altruistic values higher. O'Neill does not discuss the reliability and validity of the tools she used in the study. This may have some limiting effect on her results. Finally, O'Neill by failing to ascertain the sophomore students (undeclared majors) motivations for choosing the careers for which they were pursuing academic degrees, the concept of anticipatory socialization to an occupation is not explored.

Birnbaum and Somers (1991) administered four questionnaires that measured job satisfaction, job involvement, job expectations and rewards, and job role ambiguity to 97 staff nurses with less than 18 months career experience. Relative to prevocational experience (anticipatory socialization) nurses who had occupational experience such as a candy-striper, nurse's aide, or other health-related jobs prior to becoming a nurse had higher levels of job satisfaction and involvement than those nurses who had no prevocational experience. Also noteworthy, was the finding that prevocational experience correlated positively with role conception of nursing, work attitudes, and expectations for rewards. Birnbaum and Somers concluded that prevocational experience (anticipatory socialization) facilitated role adaptation once an individual had embarked in a given career. Further, job expectations were more realistic and attitudes towards work more positive (Birnbaum & Somers, 1991 p. 520).

While this study supported many of the characteristics of

the concept, anticipatory socialization, Birnbaum and Somers failed to either control or discuss the impact of role socialization of the nurses as they progressed through their nursing education and also the role socialization that occurred in the 18 months prior to the conduct of the study. It was possible that the variables tested in the study had already been influenced by the process of socialization to the profession that occurred in the academic setting. The type of on-the-job mentorship and orientation to the job also were not mentioned by the investigators. These may have had either a positive or a negative affect on the nurses attitudes which may have been more reflective of the responses to the questionnaires administered rather than their prevocational experience. Lastly, the investigators did not ascertain why the nurses in the study had chosen nursing as their career, nor did they delineate the basic education of the nurses in the study (baccalaureate or associate degrees).

A correlational study was conducted by Till (1980) to investigate whether or not a relationship existed between female students' image of nursing and sex-role identity. Till's population were female nursing students at a private, southwestern university. Only students enrolled in the generic baccalaureate nursing program were included. The sample consisted of a total of 92 female nursing students who volunteered to participate in the study. The subjects were surveyed at two points in the program, entry and exit or

graduation. Thus, two samples were constructed from the total of 92. Fifty-six students in sample A were tested at entry into the program and 36 students in sample B were tested during the semester they were scheduled to graduate.

Till (1980) used two tools, the Bem Sex Role Inventory (BSRI) and the Frank Image of Nursing Questionnaire (FINQ). The BSRI includes three scales, the Masculinity Scale, the Femininity Scale, and the Social Desirability Scale. Each scale contains 20 personality items. The BSRI, a 60 item Likert Scale was used to measure the respondents sex role identity. The items on the scale were found to have significance for masculine and feminine items in American society at $p < .05$ and reliability for items at .90-.86 for male items, .90 to .80 for female items, and .89 to .70 for social desirability items (Till, 1980).

The FINQ was a 70 item questionnaire that consisted of a yes or no check list. These items were developed to assess the respondents' images of nursing. The FINQ was judged reliable as a result of interrater reliability, $r = .87$ on the Pearson correlation for test-retest, and Kuder-Richardson of $r = .97$ for single testing (Till, 1980).

The conclusions of Till's study were that females enrolled in the nursing program were typically feminine and androgynous as measured on the BSRI, and their nursing education had a positive effect on endorsement of feminine characteristics. However, the image of nursing held by both

the entry level student and the student completing the program tended to be incongruent with that advanced by the profession. Till's findings corroborated Davis and Olesen's (1964) findings that despite socialization to the profession as a result of completing a nursing program, the lay image of nurses held by the students when they entered nursing was not obviated. The nurse as altruistic is also congruent with the feminine sex identity role. This was confirmed in Till's study (1980).

VanCleve (1988), using the Dreyer Sex-Preference (Dreyer, 1971) and the Davis-Olesen Image of Nursing questionnaire (Davis and Olesen, 1964) studied 43 female freshmen nursing students to determine if women whose career choice was nursing, held a more traditional view of the women's role. The traditional female role was characterized as being service oriented, low in assertiveness, and predominantly caring. While the study sample was small and selected from a religiously affiliated university only, the interesting finding was that women rated as predominantly liberal and non-traditional still chose nursing as their occupational preference. This study, while needing replication and a larger, broader sample, suggested that the liberalization of career choice by women may not be as significant a factor in declining enrollments in nursing schools as previously thought.

A study published by Grossman et al., (1989) surveyed 300

high-school juniors during the fall of 1986 and the spring of 1987 using a 14-question Likert Scale. These items were constructed to include the various nursing role functions, including direct patient care, community health, political action, health policy formulation nationally and globally, research, teaching, and entrepreneurship. Additionally, the respondents were asked if they were considering nursing as a career. Lastly, a question was directed at determining whether or not the sample subjects had the experience of having a nurse as a role model.

In Grossman et al.'s study results, the high-school juniors sampled were aware of nursing's patient care role, but unaware of the other nursing roles addressed. Secondly, a significant relationship existed between consideration of nursing as a career and experience with a nurse as a role model. One hundred and fifteen students (37.6%) acknowledged having had a nurse as a role model, while 181 (59.2%) had not. Chi-Square analysis showed that students influenced by a role model considered nursing more frequently than those who did not have a role model (Grossman, 1989 p. 21).

This study supported Corcoran and Clark's (1984) study on professional role socialization, in which the authors contended that anticipatory (preprofessional) role socialization to a career was positively influenced by experience with a role model. However, the nursing roles delineated in the Grossman study were the researchers'

conceptions. Respondents were not free to identify what attributes attracted them to nursing as a career or what other experiences aside from role modeling, facilitated their choice. Secondly, the study did not define specific terms such as role model.

In an unpublished study by Beaman and Reichelt (1989), the investigators attempted to determine whether or not the image of nursing as perceived by high school students (N=315) with a mean age of 15.8 years was influential in students' consideration of nursing as a career. The subjects in the study were given a questionnaire developed by the investigators that provided information regarding their experience with the health care system; their understanding of routes to nursing licensure (Associate Degree, Diploma, Baccalaureate Degree); their familiarity with the various specialties and functional roles within the nursing profession; and their reasons for choosing nursing as a career. Fifty-three percent of the teenagers in the study obtained their perceptions about nurses from fictional television programs, 42 percent from news reports, and 31 percent from the school nurse.

Of significance for this proposed study were the areas for further research and the implications of the Beaman and Reichelt (1989) study. Specifically, the investigators determined that the areas of role models, influence of significant others (e.g., parents, friends) and experience

with nurses (e.g., school nurse) needed further research. They also projected that the data would be helpful in yielding information for the design and implementation of strategies for recruitment into the nursing profession.

Barkley and Kohler (1992) studied male, high school students' responses to nursing as a profession. Using three public high schools in an urban setting, the investigators chose a cross-sectional sample from a population of males in grades 9 through 12. One hundred and twenty-six males completed a 45-item Likert Scale questionnaire entitled the Kohler and Edwards Career Questionnaire. Prior to Barkley and Kohler's study, this questionnaire had not been used exclusively with males. The authors of the study did not comment on the validity and reliability of the tool. The results of Barkley and Kohler's study indicated that the male, high school students in their sample had a positive image of nurses. They were not rejecting of characteristics of the nursing role as being caring and nurturing. However, despite the positive feelings these subjects had about nursing, 110 of the respondents stated they would not pursue nursing as a career. The authors attributed this to the subjects' views that nurses' salaries were inadequate. The study subjects held decidedly erroneous views relative to nurses' salaries. They contended that nurses earned an hourly wage that ranged from 5 to 15 dollars.

The authors advanced the argument that despite the

positive image these male, high school students had about nursing, attention should continue to be paid to the media representation of the profession. They recommended, for example, that television shows that depicted nurses might portray both female and male nurses caring for patients.

While this study had interesting findings, it should be noted that the answers were forced choice. The respondents, according to the study report, were not given an opportunity to respond to any open-ended questions that asked them to characterize what it is that is the work of nursing.

This section of the literature review delineated studies that examined factors which may influence peoples' decisions to choose nursing as an occupation. These factors ranged from demographic, social criteria to sex role identity. The following section will focus on one of the most frequent findings in the studies previously cited, the notion that nursing as career choice is motivated by altruistic values (e.g., Olesen & Davis, 1964).

Altruism

The French sociologist, August Comte, was credited with originating the term, altruism (Rushton and Sorrentino, 1981). Many societies consider altruism a value to which all should aspire. Some sociologists postulate that altruism is both valuable and indispensable for the welfare of society. Indeed, societal heroes are considered altruistic, and that their motivations to do good are based on altruistic reasons

(Rushton and Sorrentino, 1981).

Ridley and Dawkins (1981, p. 19-39) define altruism as "self-sacrificing performed for the benefit of others." Krebs (1970) defines altruism as self-sacrificial other oriented behavior. Whispe (1972) similarly defines altruism as a regard for the interest of others without concern for one's self-interest.

Krebs (1970, p. 258) contends that altruism is important because it is the goal of early childhood socialization (unselfishness); the behavior of altruistic individuals evokes a positive response from others and is thus a desirable personality trait; and finally, altruistic behavior is contrary to the commonly held notion that human beings are egoistic, and because of this, deserves study. Altruism is operant at three levels of conceptualization; altruism and human behavior, altruism and human personality, and altruism and human nature.

As a concept altruism is characterized by a situation in which one is a benefactor, the giver, and the other is the recipient, the receiver of the altruistic deed. Other characteristics include self-sacrificing, empathy, and dependency. In this chapter many studies have been reviewed that examined altruistic behavior. One common denominator in the majority of these studies was that recipient dependency, especially externally caused dependency evoked a greater altruistic response from the benefactor. Altruism, as the

reason for choosing nursing, can be best explained by drawing upon research that viewed altruism as a personality trait.

In a summary of studies on altruism, Krebs found that altruistic female college students were socially oriented, nurturing individuals who had low needs for dominance or achievement (1970, p. 284). Another characteristic of altruism is that the recipient is regarded as legitimately needing help. A study by Horowitz (1968) demonstrated a positive correlation between altruistic or helping behavior and recipients if their reason for needing help was beyond their control, or externally caused.

Studies that sought to correlate altruism and sex type did not demonstrate consistency in findings. That is both men and women were in certain circumstances equally altruistic (Krebs, 1970). Schopler (1967) in a study with 56 male and female subjects found that the males evidenced less helping behavior towards male recipients who were viewed as highly dependent, whereas females showed more helping behavior towards highly dependent recipients. This finding, while noted only in this one study raises some interesting questions relative to men and nursing as career choice. Research by Berkowitz and Daniels (1963) indicated that benefactors were more altruistic when the recipients were highly dependent upon them. Berkowitz and Daniels attribute this behavior to the "norm of social responsibility," which prescribes that people should assist those in need because it is the correct thing to

do.

Krebs and Russell (1981) in a review of empirical research on role-taking postulated that role-taking may produce a cognitive state that is related to altruism. Role-taking, which these authors seem to equate with empathy or "putting oneself in the others' shoes," they contend induces a state of cognitive disequilibrium. This aspect of cognitive steady state presses for resolution of which helping is one way to resolve the cognitive discomfort. The benefactor engages in abstract role-taking by asking, "How is that other person feeling," and "What would I want someone to do if I were in his or her place?" (p. 161). Thus role-taking while not of itself altruistic may give rise to altruistic behavior.

Staub (cited in Krebs) is the only major researcher who believes that there is such a thing as an altruistic personality. Krebs, Hartshorne, May, Mussen and Eisenberg-Berg dismiss the notion of an altruistic personality (as cited in Rushton) because in their views empirical studies show that while almost all people will help others in some situations, they will not help in other situations.

Individuals with high levels of moral judgment were also highly altruistic. Altruistic individuals can be conceived as achieving a high level of moral reasoning. Their system of moral beliefs tend to be universal. That is they uphold a high standard of justice, social responsibility, modes of moral reasoning, judgment, and knowledge (p. 264).

Frequently, altruism and empathy are equated. Indeed, Aronfreed, (1968) contends that any time a person's behavior is controlled by empathic processes, his behavior should be labeled "altruistic" (p. 128).

Altruistic individuals are seen as possessing a high level of empathy for the feelings and sufferings of others. They are more able to "put themselves in the other person's shoes" and thus view the world from the other person's. Altruists value altruistic behaviors which include providing comfort, giving to the needy, and rescuing others, Altruists are typically viewed by colleagues as honest, resolute, and possessing great composure.

Rushton and Sorrentino (1981) characterize the altruistic person as having an integrated personality, strong feelings of personal efficacy and well being, and possessing integrity (p 264).

Hatfield et al., apply equity theory to the notion of helping relationships. Essentially equity theory is used to predict human behavior in a wide variety of social interactions (p. 115). Equity theorists have classified helping relationships into three categories:

1. exploitation or excessively profitable
2. reciprocal relationships
3. truly altruistic relationships. (pp. 119-20).

The respondents in this study exemplify more closely the conception of altruism as delineated by Cohen (1978).

According to Cohen altruism is composed of three elements: giving or the desire to do so; empathy; and no motives of reward from the object of the altruistic behavior (p 81).

This chapter reviewed the concept of anticipatory socialization to a career from the following perspectives: Psychosocial-developmental considerations, sex role and parental influence on career choice, behavior and career choice, and social factors and career choice. Nursing studies were selected and reviewed that considered motivations of aspirants to the nursing profession. Since this study is predicated on exploring the applicability of Corcoran and Clark's, (1984) conceptualization of anticipatory socialization to the nursing career, their study was also reviewed. Lastly, altruism as a reason for choosing nursing as a career was a recurring finding in the majority of the studies reviewed. Thus, a brief overview of this concept was also done.

The research method employed in the conduct of this study is described in the following chapter. Rationales for the methodological choice are also elucidated. Finally, how the data were managed and analyzed are also presented.

CHAPTER 3

RESEARCH METHODS

Overview

A qualitative, descriptive study design was used to explore the phenomenon of anticipatory socialization to the nursing profession. The research strategy consisted of in-depth, non-structured interviews of college students who had declared nursing as their major, but who were not currently enrolled in any nursing arts courses. Each interview was centered on the initial question, "Why do you want to be a nurse?" Additional questions were asked as the interview progressed and the interviewee made statements that prompted additional inquiry by the investigator. The descriptive data obtained from the interviews were synthesized into concepts and these concepts were assigned to the two major themes used for data organization in this study, career attractors and career facilitators. Consent to conduct the research was obtained from the IRB of the school the investigator attended.

Sampling Technique

The population from which the study group was obtained, were baccalaureate students enrolled in the 1991-1992 academic

year who had declared nursing their major but who were not as yet enrolled in any nursing arts courses. This study group was a convenience sample obtained from National League of Nursing (NLN) accredited nursing programs in both public and private schools in the Chicago-land area which included Cook, DeKalb, and Will Counties. Chicago and the surrounding counties offered a rich source for study subjects. A large number of private, and public universities and colleges as well as proprietary schools offering a baccalaureate nursing program are found in the selected areas. Because of the general characteristics of the general population of this geographic area the nursing student population was nationally representative as to diversity of subjects relative to racial/ethnic groups, gender, and age. Since the research strategy consisted of in-depth, non-structured, face-to-face interviews of college students, the geographical availability of students and accessibility to them was also a consideration relative to the researcher's own time constraints and transportation capabilities.

The Dean of the school of nursing who employed the investigator, wrote a letter of introduction to the deans and directors of the NLN schools targeted for the study. The purpose of this letter was to aid the investigator in gaining entree to the schools being asked to participate in the study. The letter requested the assistance of those individuals in facilitating the investigator's data collection by providing

the researcher with the names and addresses of the students who had declared nursing their major and were not yet enrolled in nursing arts courses. These students would be Freshmen and Sophomore students in the majority of the schools solicited.

Almost all of the schools that agreed to participate in the study were reluctant for reasons of privacy to provide the investigator with an address list of their students. Thus, letters to the students and return postcards were sent to those schools. A designated person from each school then forwarded the investigator's packet to the appropriate students.

The investigator's packet included a letter and a return postcard for each declared nursing major student enrolled in the participating schools' nursing programs. The letter explained the purpose of the study and sought the students' cooperation to participate. A pre-stamped postcard, addressed to the investigator, was also enclosed with the introductory letter to the students. This postcard contained information that was included in the introductory letter, e.g., the interview would be taped, each interview would be one hour or less. Reiteration of this information on the postcard enabled the researcher to use the postcard as the consent to participate in the study. The postcard also requested information such as the telephone number at which the students could be reached to schedule an interview, and the best days and times to contact the students. The students returned the

postcard with their signatures, only if they intended to participate in the study.

All but two of the schools contacted were reluctant to reveal the exact enrollment figures of the freshmen/sophomore students who had declared nursing their major. Thus, it was impossible to ascertain the exact total number of students contacted for any given school. To reiterate, the schools solicited took care of mailing the investigator's packet to the appropriate students. Since, in almost every case the school suggested that the investigator forward 50 packets and since the investigator did not know the exact enrollment of two of the schools, the actual number of students contacted is an approximation.

The total number of schools contacted for the study were 28. Eleven were four-year university or college programs. Eight of the university/college schools contacted were private and or religiously affiliated schools and three were state supported schools. Seventeen schools contacted were two-year associate of arts programs.

Seven of the 28 schools contacted agreed to participate in the study. Only one of the schools was an associate of arts degree program. This school was dropped from the study for two reasons. First, the list of names sent to the investigator included the entire school of nursing enrollment and it was impossible to determine which students were in the earliest phases of the nursing curriculum. Second, since this

was the only AD program agreeing to participate it was believed that the number of individuals who would participate in the study would be insufficient to offer any comparative analyses between the four-year programs and the two-year. Thus, the final number of participant schools was six, all baccalaureate programs. Two of these were state supported schools and four were religiously affiliated, private colleges/universities.

The potential pool of students from the six participating schools who met the study criteria numbered 375. One school in the study, a state liberal arts college with a nursing program claimed to have approximately 200 students enrolled as first year students in the prenursing curriculum. Enrollment in each of the other schools generally ranged from 45 to 100 with the average for each school being 59 students in prenursing. To reiterate these enrollment figures are approximations based on the number of packets the schools requested.

Thirty (8%) students from the potential pool of 375 agreed to participate in the study. The investigator wanted to avoid all potential effects of role socialization which might have confounded the results. Thus, the planned timeline for the interviews was analogous to the sophomore year, September through May, as the status of these students would change after that from declared majors to actually taking nursing arts courses.

The final study group consisted of 22 female students. The reasons for attrition were as follows: five students agreed to participate, but then never showed up for the interview; one student either incorrectly recorded her phone number or it was disconnected as the call could never be completed; two students were ineligible for the study as they were taking nursing arts/clinical courses. This information was obtained when the investigator called the students who returned postcards. Each subject was asked if s/he was currently enrolled in any nursing arts courses. Those that were, were dropped from the study as they did not meet the criteria. Only one male returned a consent to serve card. However, he could never be reached for an interview.

Data Collection

Pilot Study

Prior to conducting the actual study, the investigator sampled 16 baccalaureate nursing students on their very first day of clinical practice in a private, church affiliated university. For ten of the students this was their very first exposure to a hospital setting and sick patients. The other six students had worked in health care as nurses aides, unit secretaries, or candy stripers. Each of the students was asked "Why do you want to be a nurse?" This was done to ascertain if this, the first question to be used in the study, would yield an answer that could be thematically encoded. All of the participants in the pilot group gave responses that

were easily synthesized into concepts and then assigned to the primary themes used in this study, career attractors and career facilitators. Further, respondents' answers to the query, "Why do you want to be a nurse?" aided the investigator in constructing follow-up questions generated from themes regarding occupational choice found in the literature. The opportunity to sample a group of beginning students in nursing prior to conducting the actual study was facilitative in sensitizing the investigator to the process of encoding the data.

Study Interviewing Process

All interviews were unstructured although each interview was initiated with the same question, "Why do you want to be a nurse?" Answers generated by the respondents to the question, "Why do you want to be a nurse?" provided the basis for further questions. Because the topic, nursing as occupational choice, was very circumscribed, subsequent questions did not diverge into different areas of nursing, but remained fairly focused.

All, and especially quiet or reticent interviewees, were queried using the themes that emerged from the literature as to why individuals chose nursing as their career. These themes were specifically identified by Kalisch and Kalisch (1987), Bragg (1976), Corcoran and Clark (1984), and Olesen and Davis (1966) as well as ideas from the authors reviewed in Chapter Two. Combining the various themes identified gave

rise to ten that were used to elucidate additional questions based on the respondents' answers to the primary question asked at the beginning of each interview. These ten themes were:

Career Attractors

1. recall of earliest attraction to the nursing profession;
2. conceptualization of nursing role;
3. personal reasons for aspiring to nursing;

Career Facilitators

4. life events that were positively persuasive for nursing as career choice;
5. role of significant others in fostering the desire to become a nurse;
6. work, volunteer experience in health care;
7. personal experience with health care;
8. media influence;
9. career counseling;
10. institutional responsiveness to subjects' application to school(s);

Marshall and Rossman (1989) describe this research strategy, the unstructured interview, as having as its purpose explaining and/or describing the cause of the phenomenon under study. An acceptable research strategy and the one employed in this study, is multisite case study using an in-depth, unstructured interviewing technique. In-depth interviewing is

described by Marshall and Rossman as covering a gamut of techniques. A key element in this form of data collection is to allow the respondent the latitude to bring his/her own perspective to the phenomenon under consideration. At the same time the researcher avoids bringing his/her own view of the same phenomenon. The interview can be formal, following a prescribed set of questions or more informal involving brief questioning and a more casual, conversational tone. The informal type of technique is what was employed in this study.

The type of interviews used were, according to Patton (1990), guided or focused. The guided interview format begins with the interviewer outlining the topic to be covered during the session and using key elements from knowledge gained about the topic under investigation to frame questions throughout the interview.

Eight interviews were done in person. The day before the scheduled interview the investigator called the subject to verify the date, time, and meeting place of the interview. On-site interviews usually took place in the student center or student union on the interviewee's campus. Since the purpose of the study was to ascertain the reasons for the career-choice made, the investigator interviewed the participants one time only.

The remaining fourteen interviews were done over the telephone. The setting was changed because it became increasingly difficult as the semester advanced for the

students to set aside campus time to be interviewed. It became impossible to schedule a face-to-face interview that was compatible with the students' schedules and the interviewer's. Telephone interviews offered more flexibility and allowed for data collection to take place late at night if the student was available and agreed to be interviewed. The venue change did not adversely affect the interview process except that the investigator did not have the opportunity to note facial expressions or posture changes. Having done eight interviews face-to-face sensitized the investigator for voice tone nuances that arose during interviews. However, since the setting was not highly significant in this study relative to contextual variables as it might be in another study, the lack of opportunity to do face-to-face interviews was not seen as an impediment.

Each interview, whether face-to-face or over the telephone, began with a request for demographic information: interviewees' ages, sex, previous college study, appropriateness for the study, relatives who were nurses, and experiences in the health care field whether voluntary or paid, were ascertained.

Each interview was an unstructured, interviewee-guided process. Every interview began with the same question, "Why do you want to be a nurse?" During the course of the interview, all respondents were asked what influenced their decision (e.g., books, movies, television) and what attracted

them to nursing. These questions were based on the themes previously cited relative to career choice that emerged from the literature review. Since the interviews were guided by the respondents there were no standard questions. However, some questions guided by the themes were routinely asked. Thus, if an interviewee stated that she had relatives who were nurses, a question was generated that sought to find out how and to what degree the relative influenced the decision to become a nurse ("You said your aunt was a nurse. Did you talk to her about being a nurse? Was she influential in your decision making?").

Marshall and Rossman (1989) characterized the unstructured, in-depth interview as taking on the tone of a conversation. These types of interviews range from "casual conversations or brief questioning to more formal, lengthy interactions" (p. 82).

Interviews in this study ranged from 23 to 57 minutes with the average interview lasting 22 minutes. All interviews were tape recorded and then transcribed by the investigator.

The interviews were numerically coded to preserve interviewee confidentiality.

Since the interviews conducted for this study never exceeded one hour, the type of interview done while in-depth, had more the character of a casual conversation with brief questioning. The advantage to this approach of data collection was that the interviewer was able to create an

informal, relaxed environment in which genuine interest in the subject was conveyed. This style encouraged the interviewee to disclose motivations for career choice knowing that the information was valued and acceptable to the interviewer.

Information obtained in the interviews, other than the demographic information, was encoded as either attractors or facilitators to the nursing profession. Attractors and facilitators are the processes Corcoran and Clark (1984) identified as influencing occupational choice or anticipatory socialization to a career.

Data collection through in-depth interviews was congruent with the need to identify the motivating factors that impelled the students in the study to select nursing as a career choice. The non-structured interview also allowed the investigator to discuss in detail significant events in the interviewees' lives which may have influenced career choice (Becker, Geer, Hughes and Strauss, 1961; Olesen and Whittaker, 1967).

In-depth interviews with multiple informants at each site coupled with the use of multiple sites also allowed for triangulation of findings across sources and thus tested issues of reliability and validity. The generalizability of a study can be greatly enhanced by using multiple case studies, multiple informants, and multiple sites (Marshall and Rossman 1989). By tying the study to the concept of anticipatory socialization and to theories regarding career

decision making, the transferability as well as the generalizability of the study is also strengthened.

Data Analysis

Anticipatory socialization was the concept that provided the focus for the study. This concept was defined in this study as the adoption of values, ideals, and the conceived role of the nurse as determined through one's own conception of the nursing role and observation of members in the occupation. The thematic findings generated by the interviews were categorized under two primary themes, the same one's used by Corcoran and Clark in their study. These primary themes were career attractors and career facilitators. Attractors were the individuals' intrinsic values and beliefs held about a career or occupation. Facilitators were conceptualized as the external motivators that persuaded individuals to choose specific careers.

While Corcoran and Clark conceive of career choice as a process facilitated by career attractors and career facilitators, their own study did not identify career facilitators as motivating educators to choose a higher education as an occupation. Krumboltz (1979, 1990) applies Bandura's social learning theory to career decision making. His conceptualization of the process of occupational choice relies heavily on external factors that are persuasive in career decision making.

To obviate Corcoran and Clark's lack of applying career facilitators during the anticipatory stage of career choice in their study, Krumboltz's conceptualization of this process was used to analyze the data that corresponded to themes that were reflective of the external motivations for occupational choice, *career facilitators*. Thus the data were organized under Corcoran and Clark's conceptualization of the process of anticipatory socialization, denoted as the primary themes, *career attractors* and *career facilitators*. Secondary themes were then extrapolated from the literature review as noted above and subsumed under these two primary themes. The career attractors were addressed using Corcoran and Clark's framework, while career facilitators were addressed using Krumboltz's conceptualization.

The secondary themes identified under the primary theme, career attractors were *altruistic attraction*, *self-fulfillment attraction*, and *image attraction*. The secondary themes elucidated under the primary theme, career facilitators were *role observation*, *role imitation*, and *vicarious experience* with the role.

The secondary themes were derived from the review of the literature. Corcoran and Clark (1984), Davis and Olesen (1964), Krumboltz (1979, 1990), Birnbaum (1991), Bragg (1976), and Brimm (1966) identified intrinsic values such as altruism, perceived perception of a role, the need to feel fulfilled in a role, and extrinsic factors such as experience with a role,

and the image conveyed through media about a role as motivators in the process of making a career decision. These secondary themes recurred repeatedly in the review of the literature and were therefore believed to hold some universal consonance with reasons why individuals chose certain occupations. If indeed there was a certain universality to intrinsic and extrinsic reasons for choosing a career, these secondary themes should be obvious in the statements made by the interviewees regarding why they chose nursing.

Data were managed by assigning the secondary themes and then the primary themes to relevant statements from each of the interviews. The themes were important as a focusing device for the study. Each theme was placed on an index card. As the interviews were analyzed, information that matched the themes were numerically encoded and then placed on the appropriate theme card. For example, if a respondent stated that she had been an aide in a nursing home, this response was encoded under the theme, *career imitation*.

This analysis of data is consistent with that outlined by Miles and Huberman (1984) and reflects the qualitative nature of the research. The process according to Miles and Huberman involves data reduction, data display, and drawing of conclusions. The data reduction in this study is in the form of ascribing themes or thematic statements to the conversations elicited in the interviews. The data display involves the use of a descriptive path analysis in which the

thematic statements are categorized according to whether the theme represents a career facilitator or a career attractor. Based on this process actual or potential relationships among the data can be identified, verified, and explored.

Summary

Twenty-two face-to-face and telephone interviews were conducted to ascertain what attracted or facilitated the decision to choose nursing as a career. The subjects in the study were baccalaureate pre-nursing students who had agreed to be interviewed. None of the subjects in the study were taking any nursing arts courses during the 1991-92 academic year, the time that the study was conducted. The interview was open-ended beginning with the question, "Why do you want to be a nurse?" Interviewees were guided through the process by asking questions that focused on themes regarding career choice as generated by the literature review for the study and elucidated previously as secondary and primary themes. Thus, the interviewer might have been asked a question such as, "Did you read any books as a child or adolescent in which the major character portrayed a nurse such as Cherry Ames?" or, "When you were hospitalized as a child, does a nurse who took care of you then still stand out in your mind today and why?" Subjects responses were encoded on index cards and finally assigned to one of Corcoran and Clark's two major processes of career recruitment, attractors or facilitators.

The next chapter will focus on the results of the

interviews. Salient dialogue will be included to illustrate the interviewees' career choice processes. Emergent themes will be identified. All data will be tied to Corcoran's and Clark's concept, anticipatory socialization.

CHAPTER 4

RESULTS

Overview

Anticipatory socialization is the guiding concept for this study. The process of deciding on a career, or anticipatory socialization to a career is based on two processes (Corcoran & Clark, 1984), career attractors and career facilitators. These attractors and facilitators are both internal and external processes influencing occupational choice. Corcoran and Clark identify the process by which career decisions are made, namely individuals have internal motivations (career attractors) and/or external motivations (career facilitators). The authors do not elaborate on the antecedent experiences that might underly facilitators to a career. In view of this shortcoming, the data to be presented will be analyzed using Krumboltz's theory of career decision as applied to career facilitators while concurrently assigning data descriptors (themes) to either one of Corcoran's and Clark's career attractors or career facilitators. Krumboltz (1979, 1990) applied Bandura's social learning theory to career decision-making. Krumboltz paid particular attention to the process of anticipatory socialization in the application of Bandura's model to occupational choice.

Demographic Information

Ethnic breakdown for the 22 student respondents was one Filipino, one Black-American, one Hispanic-American, and 19 Caucasian-Americans. The ages of the respondents ranged from 18 to 44 with a mean age of 23.7 years.

Eight respondents had taken some college courses prior to enrolling in the nursing program. Two of these eight respondents indicated that they had earned a previous college degree. One had earned an associate of arts degree in early childhood. The other had earned a baccalaureate degree in political science and a masters degree in education majoring in special reading.

Emergent Interview Themes

Career Attractors

Career attractors are internal values and beliefs held by an individual and are thus the internal motivations that persuade an individual to choose a particular occupation. The primary response of fifteen interviewees to the question of why they wanted to be a nurse was to "help people" (N=13); "because nurses are everyday heroes" (N=1); "because I need to feel useful" (N=1). A number of respondents (N=15) who wanted to "help people" embellished their responses by specifying that they especially wanted to work with children (N=5) or with cancer patients (N=2). The remaining eight respondents replied that they wanted to be a nurse because:

It would take less time than it takes to

become a doctor.

People thought I would be good at it.

I didn't like the major I was in at college
(three responses).

I just wanted to be a nurse (two responses).

I never though about it...until I saw what
they did.

The responses of the 15 interviewees who wanted to be a nurse "to help people" were categorized under the primary theme career attractors to the nursing role. This theme was further differentiated into three secondary themes characterized as *altruistic attraction*, *self-fulfillment attraction*, and *image attraction*.

Alturistic attraction to nursing is characterized as having the need to help other people. In nursing literature it is often labelled empathic sympathy, the ability to feel for the other person while not becoming so emotionally involved as to inhibit therapeutic interaction.

The secondary theme, *altruistic attraction* was a particularly strong thread throughout the interviews as the following responses to the question "Why do you want to be a nurse?" illustrate:

The reason I want to become a nurse is because to help children understand big problems with heart because when I was 18 I was scared to death and ever since then I wanted to go into the medical field and specialize in cardiology but in children to help them and not be scared and stuff because I know what they went through because I went through it. ...So that's the main reason why I want to be a nurse (age 25 years).

I really like people and I like to help them (age 28 years).

I can't remember when I didn't want to be a nurse. I always wanted to be a nurse ever since I was a little girl. I always wanted to do something that would help people (age 28 years).

...I got to see what nurses do. I kept thinking about how helpful and caring the nurses were. Being a nurse... would be working with people. I wasn't enjoying my job at A___ anyway so I took early retirement and applied to [nursing] school (age 35 years).

I think it is important to help people. There seems to be a shortage of *caring* people. It think it is important to be with an ill person and encourage that person to get better. Caring people are helpful. The world just seems full of people who don't care about others. Nurses seem like people who care about others (age 21 years).

My mother was diagnosed with cancer one and one half years ago. She was crabby and sick and the nurses were so great with her. That's what made the difference for her, the nurses. One day in my senior year of high school, after this experience, that was it (age 19 years).

The foregoing respondents universally correlated nursing with caring or helping. This notion of caring for others characterizes the concept of altruism as being other-oriented. Thus, these responses were categorized under the theme altruistic attraction to the nursing profession.

Self-fulfillment attraction was another secondary theme identified under the primary theme career attractors. *Self-fulfillment* is portrayed as the need to feel good about what one does, or to feel that one is making a contribution.

Responses to the question "Why do you want to be a nurse" showed a strong link with altruistic reasons and the need for

a sense of *self-fulfillment*. For example, if the interviewee's primary reason was to help people, her secondary reasons were based on her own needs for self-actualization. Some responses that addressed this need for *self-fulfillment* were:

I wanted something to do that would let me make a contribution especially with children (age 26 years).

I think it is important to help people. There seems to be a shortage of *caring* people (age 21 years). (Emphasis interviewee's own).

I really like people and I like to help them (age 18 years).

I think the reason I want to be a nurse is because of the feeling I get when I can't do something in a situation. I feel so empty. But when I can do something I feel so intense about that that it is like a high, it's more what you do for them than to them. That's what is important to me and why I think I want to be a nurse (age 26 years).

Finally, *image attraction* was the third secondary theme identified under the primary theme, career attractor. Image of a career has traditionally been an important component that persuaded individuals to choose an occupation, such as nursing (Olesen and Davis, 1967; Krumboltz, 1979, 1990; & Gottfredson, 1981). *Image attraction* is based on the internal "picture" an individual holds of the career being pursued. Thus if the individual sees nursing for example as the opportunity to help people and make a contribution to society then this becomes the pervasive image of the profession.

The image of the profession as conceptualized by the respondents in this study was also an important motivation as

to why the subjects chose nursing and what the investigator has termed, "the Florence Nightingale" aspiration. This latter term is coined to describe the image of the nurse as hero, the person who, despite all odds and to the sublimation of her own needs, places the patient first. The secondary theme, *image*, was ascribed to descriptions by the subjects in this study of nurses "caring for people," "helping people," and "taking care of people in the hospital." One respondent made a notable comment in describing her image of nursing. This individual, a 35 year-old single, black mother of two children, worked as a nurses' aide while attending school. She characterized nurses as "heroes in my mind. They are wonderful. They're the ones always there for the patient. I admire them very much."

A 22 year old freshman, prenursing student who worked as a ward clerk in an emergency room made the following comment.

I never thought about being a nurse before. But then I started working as a clerk in an emergency room. I was so impressed at how the nurses could handle anything from patients who were dying to alcoholics who were violent. They were always so kind and compassionate. It was then that I started thinking about being a nurse too (age 22 years).

Self-fulfillment, *image*, and *altruism* are descriptors or secondary themes of the primary thematic category, career attractors to the nursing profession. However, there is considerable overlap in assigning responses to specific secondary themes. This is probably explained by the fact that respondents' descriptions of nursing are typical descriptions

of altruistic people generally. Thus, of significance is that the major attractor to nursing in this study, wanting to help people, may well be a reflection of the respondents' innately altruistic values.

While nursing as a profession has many dimensions, all the respondents in this study who described nursing functions placed the nurse in a hospital setting, giving direct care to sick patients. Thus, the nurse as "angel of mercy" at the bedside seemed to be the prevalent image for the subjects in this study. No one described nurses as working in the community or with groups of people or as researchers, educators, or administrators.

Attractors to a career as conceived by Corcoran and Clark are the internal motivators that influence one's occupational choice. However, career attractors do not totally explain why individual's choose a specific profession or occupation. External motivators, termed career facilitators, also play a significant role in deciding on a career.

Career Facilitators

Seven of the 22 respondents were primarily influenced in their decision to choose nursing as a career by career facilitators to the nursing profession, the second of the two primary themes delineated in this study. These seven respondents had experience in health care prior to beginning the nursing curriculum. Experiences that were reported included: labor coach (N=1), unit clerk in emergency room

(N=1), x-ray aid (N=1), volunteer/candy striper (N=1), hospital/nursing home aid (N=4). The period of time spent in some aspect of health care ranged from two weeks to four years.

Each interviewee was asked if she had a relative in the health care field. Fifteen indicated that they had one or more relatives in the health care field. Fourteen respondents had relatives who were registered nurses. Some respondents (N=4) had more than one relative in health care including physicians and paramedics. Three respondents had first-degree relatives who were nurses. The other eleven had second and third-degree relatives who were nurses.

Secondary themes identified under the career facilitator category were *observation, imitation of the nursing role, and vicarious experience with the nursing role.*

These secondary themes are conceptualized as active involvement with career decision making. Observation, imitation, and vicarious experience are achieved through involvement with the career under consideration. Activities involve watching and talking to individuals who have achieved the occupational role the individual desires. Actively participating as a volunteer or an employee are examples of vicarious experience with the occupation desired.

Krumboltz (1979, 1990) in his social learning theory of career decision making delineates endowed traits, environment, and exposure to cultural and self-initiated learning as

factors which influence career development. He posits a number of propositions which illustrate the significance of facilitators to anticipatory role socialization. Those responses by interviewees that were congruent with *observation, imitation, and vicarious experience* will be presented to illustrate the responses that were assigned to the primary theme career facilitators to anticipatory socialization to nursing.

Observation of a role influences the observer to pursue that role or reject it. Krumboltz (1979, 1990) states that role observation is facilitative to role socialization because

an individual is more likely to express a preference for course of study, an occupation or the tasks and consequences of a field of work if that individual has observed a valued model being reinforced for engaging in activities s/he has learned are associated with the successful performance of that course, occupation or field of work. (p. 39).

Role models can be relatives and friends for some individuals. Beaman and Reichelt (1989) found evidence in their study that suggested parents influenced career choice. A number of respondents in this study credited relatives and friends who were nurses with helping them confirm the decision to become a nurse.

One respondent recalled talking to cousins and an aunt who were nurses "to get more information about nursing." Another interviewee who had returned to school eight years after high school, marriage, and pregnancies related a relative's influence on her career decision as follows.

My great aunt and a cousin...talked to me a lot about being a nurse. They seem happy with what they are doing (age 28 years).

In this study, respondents expressed developing a favorable image of the nursing role as a result of exposure to role models. This exposure occurred either in the work place or through observation of nurses caring for the respondents' sick relatives. Direct observation of the nursing role is characterized by Krumboltz as experience with a real model. The following responses exemplify observation of real role models as facilitative of decision making to pursue nursing.

There was one nurse in particular who was such a sensitive person. She got real involved in my mother's care and with us. My mother felt like she was one of the best nurses. My mother put so much trust in her and all of them. I began to feel that I wanted that kind of involvement with people too (age 19 years).

There were two RN's that I talked to about my thoughts on quitting A___ and going into nursing. They were very helpful in telling me what was involved. They also encouraged me to earn my BSN right away and not go the ADN route than the BSN route (age 35 years).

I had great nurses when I was in G_____ S_____ Hospital. They were there for me and I see one of them, she was a graduate from here. She still remembers me when they told me that I was having my pacemaker put in and it was how they treated me. They treated me great. Even for the babies, they were always there for them. They don't just let them cry, they are one on one with the kids and stuff (age 26 years).

My mother works in an emergency room and I watched what she did. I was very impressed by what nurses did (age 19 years).

I had lots of allergies when I was a kid and I have been seeing an allergist since I was ten and I had a lot of contact with nurses. They gave me my

shots etc, they were nice (age 18 years).

I work with nurses. (Respondent was a nurses' aide). I get to see how they are really the important ones in taking care of patients. This influenced me a lot (age 35 years).

When I had my children, it was very clear that the nurses were the ones who worked with you and helped you (age 44 years).

Finally, a respondent who had a young child with a chronic illness described the impact a nurse had on her career decision. This woman was able to observe nurses during the time her child was hospitalized.

The nurses were all really great. But there was this one nurse who was really special. I remember one time, I was nine months pregnant with my second child and I just couldn't stay the whole night with my son. I was so tired. He was 18 months old then and used to cry for me whenever I wasn't there, mama, mama. This nurse put him in a stroller and wheeled him everywhere. When I came back he was calm and not screaming for me. She really paid him special attention (age 28 years).

Krumboltz also characterizes role models as being *vicarious*. *Vicarious models* are presented through the media. Television, movie, or live theater presentations of nursing can have considerable influence on an individual's process of occupational choice. However, only one of the respondents in this study when asked if a television program or a movie or a play had influenced their career decision, agreed that the media had. "I watched many health shows, and discovery shows dealing with the hospital setting." This interviewee also had read books about health care. No one in this study, as a

child had read any of the juvenile series such as Cherry Ames or Nancy Drew which depicted nurses in many of the story plots. One other interviewee stated that when she began thinking about nursing as a career she bought "medical books" such as anatomy books, physiology books, and self-help medicine books.

Krumboltz believes that during the process of career decision making the decision can be further reinforced if significant others value that occupation. He states:

An individual is more likely to express a preference for a course of study, an occupation or the tasks and consequences of a field of work if that individual has been consistently positively reinforced by a valued person who models and/or advocates engaging in that course, occupation or field of work" (Krumboltz, 1979, 1990, p. 40).

A number of respondents stated that valued people, namely, relatives, friends or other nurses, thought that the respondent would be a good nurse.

People told me I would be good at it.
My friends and people like that (age 35 years).

I became friends with a lot of the nurses. They encouraged me to pursue nursing (age 35 years).

The nurses I work with really encouraged me to go into nursing. They could tell from how I did as a nurses' aide that I was cut out for nursing (age 35 years).

Carol (a friend) serves as my role model. She is like the perfect [nurse], I mean simply with kids. ...And she's like great (age 26 years).

I have a great aunt and a cousin who talked to me a lot about being a nurse. They seem happy with what they are doing (age 28 years).

I talked to a friend of my mother who was a nurse and she said it was rewarding. She emphasized the

BSN (age 19 years).

Talking to other respected people who were nurses seemed to be a significant factor in deciding to become a nurse. of import seemed to be that these individuals conveyed a positive view of the profession. In addition, these significant role models gave the respondents the impression that they had "what it took" to be a good nurse. Fifteen of the 22 respondents in this study had a first or second degree relative who was a nurse. A number of respondents had friends who were nurses. In almost every instance, the respondents did talk to their relatives about nursing. Some of the respondents talked with relatives after they had already made the decision to study nursing, but the majority prior to making the decision. Those individuals who talked with relatives after making the decision to pursue nursing did so for information reasons primarily, such as what were the courses like or how hard were the courses.

Krumboltz posits the idea that individuals are more likely to pursue a given occupation if they have an inclination towards that field of work or profession. He states:

An individual is more likely to take actions leading to enrollment in a given course or employment in a given occupation or field of work if that individual has recently expressed a preference for that course, occupation or field of work (Krumboltz, 1979, 1990, p. 46).

A number of respondents in this study had considered nursing as a career choice for a period of time before

actually enrolling in a nursing program. One individual made a career change to become a nurse. After making up her mind that she wanted to be a nurse, she stated, "I didn't do anything about it for two years." Another interviewee stated that she actually decided she wanted to be a nurse "when I was in Junior High School." A respondent who was in the first semester of her sophomore year stated that "one day in my senior year, that was it." It was then that she decided to be nurse. Finally, another respondent related that she "wanted something to do and that would let me make a contribution especially with children." Within one year of this "restless" feeling, she started studying nursing.

Interestingly several respondents (N=5) had no desire to be a nurse when they first started college. For example, one wanted to be a doctor but "didn't want to be in school for the rest of my life. I want to get married and have children while I am still young." Another stated that she was going to major in mathematics, but "I got bored with the idea of working with numbers all the time. I like being with people." A third interviewee started out to be an elementary teacher "because I like kids." However, she became disillusioned with the course of studies and met someone who was studying nursing and decided to give it a try.

There were three respondents who chose nursing not because of recently expressing a preference for the occupation as Krumboltz states. Instead these respondents had decided at

a very young age that they wanted to be a nurse. "I have wanted to be a nurse since I was seven years old. That's all I ever wanted." This interviewee had a mother who was a nurse whom she admired very much. Another stated, "I decided sometime in seventh grade that I was going to be a nurse." The third respondent stated that she decided to be a nurse in junior high.

All of these respondents, whether they were pursuing a different course of study and then decided on nursing, expressed a preference for nursing, or knew since they were young adolescents or before that they wanted to be a nurse, did share one commonality. That is, they all wanted to be nurses to "help people" which again reinforces the altruistic (attractor theme) rationale for choosing nursing.

Direct involvement in the chosen occupation is highly reinforcing relative to making the decision to pursue a desired occupation. The ability to "try on" what it feels like to work in a hospital or with sick people can play a significant role in occupational choice especially at the stage of anticipatory socialization. This involvement can be as a volunteer in a health care agency, an employee such as a nurses' aide, or caring for an ill family member or friend. Krumboltz states:

An individual is more likely to take actions leading to enrollment in a given course or employment in a given occupation or field of work if that individual has been exposed to learning and employment opportunities in that course, occupation

or field of work (p. 47).

Seven of the respondents in this study had worked or currently were working in the health care field. Employment that ranged from nurses' aide to clerking in an emergency room definitely had a positive influence on nursing as a career choice for these individuals. One respondent stated,

I had never thought about being a nurse until I started working as a clerk in the emergency room. I was so impressed at how the nurses could handle anything from patients who were dying to alcoholics who were violent. They were always so kind and compassionate. It was then that I started thinking about being a nurse too (age 22 years).

Another interviewee worked as a nurse's aide in the newborn nursery. However, she was greatly influenced by observing her mother working as a nurse in an emergency room.

After watching my mom, I realized that it was important to help people. There seems to be a shortage of caring people. It is important to be with a person and encourage people to get well (age 19 years).

Caring for a relative or having been a patient correlated positively with career decision making in this study. Five of the respondents had had direct experience with the health care field as a patient or had cared for an ill relative. For each of these interviewees, these experiences had started them thinking about being a nurse or had reinforced the decision they had already made to study nursing.

My grandmother was sick and I took care of her because she lived with us, you know, and I am around my ma [sic] because

she is always sick with her kidneys and such because she has been sick since she was a baby (age 26 years).

I did have an old grandfather who was ill and I used to help take care of him (age 19 years).

Whether the individual was employed as a health care worker or took care of an ill relative, the opportunity to learn about nursing or "try on" the role directly had a positive impact on career choice. This finding is also closely linked with role modeling as a motivation to select a particular occupation.

These interviews did not reveal any influence made by career counselors on occupational choice. Respondents who received any professional counseling relative to career opportunities (usually in high school) were never informed that nursing was a worthwhile career. Indeed, the opposite seemed to occur. Those respondents who discussed the role of counselors relative to occupational choice decision making indicated counselors had given them information about medicine or law. Nursing as a worthwhile or viable occupation was never mentioned by the counselors.

An incidental question asked of the second interviewee, "Why did you choose a four year program instead of an associate of arts program?" yielded an interesting response. (This interviewee was a divorcee with two children and it seemed reasonable that she would choose a faster route to becoming a nurse). Consequently, this question was included

in the remaining 20 interviews. The primary reason given by the interviewees was that other nurses, whether relatives or mere acquaintances, told them to pursue the BSN and not waste time on the ADN. It was explained that opportunities for advancement were more likely if the nurse had a BSN degree versus an ADN. Two of the respondents stated that they had originally planned to go to an ADN program. One of these respondents could not get into the ADN program because it was fully admitted and had a waiting list. The other respondent stated that there was an administrative mix-up. She thought she was enrolled in the ADN track but instead found herself in the BSN. Since she had earned so many credits toward the BSN she decided to continue in that degree option. Only one respondent stated that she chose the BSN route because of earning potential.

As previously stated the mean age of the study group was 23.7 years, with a range of 18 to 44 years old. There was a significantly different tone to the interviews when the respondents were age 20 years or less and when they were 21 years or older. The respondents who were 21 or older seemed to convey a sagacity and higher level of commitment than did the younger respondents. The 18, 19 and 20 year-old respondents were often giggly and spent considerably less time on elaborating their answers. For example, when asked "Why do you want to be a nurse?", the typical reply was simply "to help people" or because "I like people and I want to help

them." This was contrasted with responses of those who were 21 and older. These individuals tended to elaborate more on their reason for career choice. Their typical responses were more thoughtful and often had a philosophical overtone. For example, one 26-year-old responded that she wanted to be a nurse for

the feeling I get when I can't do something in a situation I feel so empty. I feel so intense about that so that when I can do something for someone that makes things better it is like a high. It's more what you do for them than to them.

A 21-year-old responded:

It's important to help people. There is a shortage of caring people. It is important to be with a person and encourage the people to get better.

And finally, a 44 year old respondent who had been an elementary school teacher stated:

I had been home with my children for the past three years and have not been working. I wanted something to do that would let me make a contribution especially with children.

Summary

Twenty-two student nurses representing six baccalaureate schools of nursing participated in this study to identify attractors and facilitators to the decision to choose nursing as their occupation. Anticipatory socialization as a process in career decision making was supported by the responses to the question, "why do you want to be a nurse?" Fifteen of the

22 respondents interviewed were attracted to nursing primarily because they wanted to help people or to feel useful. These responses were ultimately encoded as *altruistic attraction*, *self-fulfillment attraction*, and *image attraction* under the major category of attractors to the profession.

Seven of the respondents to the study question were influenced in their decision making primarily by facilitators to the career. Responses that were categorized as career facilitators were encoded under the following themes: *observation (role models) of nurses*, *imitation of the role* through voluntary or paid experiences, and *vicarious experience with the role* through media. Krumboltz's social learning theory was used to process data that were included in the career facilitator category.

The data suggest that internal motivations or career attractors were more influential to career decision making than were career facilitators as indicated by initial reasons articulated in response to the first interview question. Sixty-eight percent (N= 15) of the respondents made their decision to choose nursing based primarily on career attractors, which were the ideal of altruism, the images held of the profession, and the need for self-fulfillment. Facilitators to the profession accounted for 32% (N=7) of the primary reasons why the interviewees chose nursing as occupational choice. Observation of the role of the nurse, imitation of the role, and vicarious experience with the role

were the emergent themes codified under the category, facilitators to the career.

The correlation of the findings in this study with other studies done on occupational choice will be addressed in Chapter Five. The significance of the findings as well as the limitations will also be discussed.

CHAPTER 5

DISCUSSION

Overview of the Study

The purpose of this study was twofold: To ascertain what motivated individuals to choose nursing as their career, and to determine if their career choice was mediated more by career attractors or career facilitators. A qualitative methodology using non-structured, in-depth interviews was employed. Corcoran and Clark's (1984) conceptualization of the pre-entry phase to an occupation, namely *anticipatory socialization*, was the guiding framework for the study. Corcoran and Clark postulate that anticipatory socialization to a career consists of two processes that guide the decision to pursue any given occupation. These are career attractors and career facilitators, or the internal and external motivations that induce an individual to choose a particular career.

The study population consisted of a convenience sample of 22 pre-nursing students enrolled in National League of Nursing accredited baccalaureate programs. The students attended colleges or universities in the Chicago-land area. The study was limited to the Chicago-land vicinity as there was the potential for a large pool of students from a diverse ethnic,

cultural, and racial population.

The 22 pre-nursing students were all interviewed one time either face-to-face or over the telephone. Telephone interviews were resorted to in order to accommodate students who were otherwise unavailable for an in-person interview. The first part of every interview was devoted to obtaining demographic information such as the respondents' age, previous degree earned or college courses taken, experience in the health care field, and whether or not the respondent had a relative who was a health care worker.

The second part of the interview consisted of guided questioning beginning with the question, "Why do you want to be a nurse?" Using the respondents' answers to this first question subsequent queries evolved from those responses. The additional questions asked were based on ten themes identified in the literature and cited in Chapter 3, as influencing career decision making. For example, the influence of media such as books or video representations of an occupation, was one of the themes identified from the literature. Thus, an interviewee might have been asked if s/he had read any fictional or real accounts of nurses or if s/he had been influenced to choose nursing based on a movie, live play, or television dramatization about the occupation.

Data were analyzed using the Miles and Huberman (1984) process of data reduction, data display, and drawing of conclusions. Using anticipatory socialization as the concept,

two primary themes, career attractors and career facilitators (Corcoran and Clark, 1984) were identified. Secondary themes that emerged from the interviews such as altruism, vicarious experience, or imitation were categorized under one of the primary themes.

Review of Findings

Data from fifteen interviews were categorized under the primary theme career attractors. The three secondary themes identified under this category were *altruistic attraction*, *self-fulfillment attraction*, and *image attraction to nursing*.

The most prevalent secondary theme was *altruistic attraction*. Altruistic attraction was assigned to responses such as "I want to help people," or "I like people and want to do something for them."

Self-fulfillment attraction was a theme that recurred with some regularity. Self-fulfillment was assigned to such statements as, "I wanted to do something that would let me make a contribution...", or "There seems to be a shortage of caring people," or "When I can do something I feel so intense about that it is like a high, it's more what you do for them than to them."

Image attraction was the third secondary theme ascribed to career attractors. Descriptors such as nurses were "caring for people," or "helping people," or to be admired were assigned the theme *image attraction*. However, this theme was not as clearly discernible as altruism and self-fulfillment

attraction. More significantly, image attraction was obviously intertwined with altruistic attraction.

The second primary theme reflective of anticipatory socialization was career facilitators. Secondary themes identified under career facilitators were *observation, imitation of the nursing role, and vicarious experience with the nursing role.*

Observation of role models was a significant career facilitator in this study. Fourteen of the respondents had relatives who were nurses and either discussed the career with them or had the opportunity to observe them in the role. Some respondents had friends who were nurses and had the opportunity to dialogue with them about the occupation or observe them in the role. Despite the availability to many of the respondents of first or second degree relatives who were nurses, the opportunity to observe first hand the nursing role in a health care setting had significant influence on the decision to choose nursing as a career. Oftentimes this observation took place because the individual had been a patient or had relatives who had been patients in hospital settings.

Imitation of the nursing role was also found to bear some influence on the decision to pursue nursing. A number of the respondents had experience in a health care setting as a paid employee or as a volunteer. Some respondents also had the opportunity to care for sick relatives at home which was

positively persuasive in their decision to choose nursing as a career.

The least significant influence on the decision to pursue nursing was the theme *vicarious experience with the nursing role*. *Vicarious experience* is gained through media influence particularly through television or movies and through reading about nursing in fictional, biographical or autobiographical accounts. Interestingly, only one respondent stated that watching specific television shows was influential in her decision to be a nurse. Another respondent stated that she read medical textbooks.

Discussion of Findings

Career Attractors

Considering the myriad of social changes that have taken place since the Olesen and Davis (1964, 1966) study that described the socialization of nursing students to the profession, it was interesting to find that the motivations for choosing nursing in the 1990's in this particular study group were not significantly different from the reasons advanced in the Olesen and Davis study which was conducted in 1962 through 1965. The most common motivation to choose nursing in the Olesen and Davis study was for altruistic reasons, a characteristic that endured from beginning the course of studies through to the student nurses' graduation in their sample.

The respondents in the study presented here who fit the

category of *altruistic attraction* were typically drawn to nursing because they wanted to help children or sick people. In both instances the recipients were seen as dependent and not deserving of their fate. Children in particular were frequently characterized as frightened, helpless victims of circumstance. The traits of the recipients support the notion that individuals who value helping behavior would be naturally drawn to needy recipients. Hospitals are natural settings for individuals who are socially outgoing, nurturant, and do not need to be in a dominant position or role. Indeed, the hospital environment might well be likened to an altruistic heaven with so many people needing help and succorance!

This finding is in accord with Olesen and Davis' findings in which the respondents in their study maintained the image that nurses were caring, helping, and dedicated to others, in other words, altruistic. However, the respondents in this study exemplify more closely the conception of altruism as delineated by Cohen (1978) and Hatfield (1978).

According to Cohen altruism is composed of three elements: giving or the desire to do so; empathy; and no motives of reward from the object of the altruistic behavior (p. 81). Hatfield (1978) classified helping relationships into three categories: exploitative; reciprocal; and truly altruistic (pp. 119-20). Based on the responses to the question, "Why do you want to be a nurse?" this study's participants manifest Hatfield's (1978) truly altruistic

relationships and the components of Cohen's (1978) conception of altruism. None of the respondents were motivated by financial or other worldly gains as their reasons for selecting nursing as career choice. In addition, the respondents expressed a strong desire to help people or described themselves as having empathy for all people as motivators for choosing nursing.

Rosenhan (1978) contends that altruism may satisfy standards of behavior that an individual has internalized and that could lead to covert self-reinforcement. In other words, altruism is associated with satisfaction of internal behavioral standards or perhaps more correctly one's sense of values. In this study, the idea of helping people, while considered altruistic, was always inimitably linked with the secondary theme under career attractors, *self-fulfillment attraction*. In retrospect, this is not a surprising finding.

Krebs (1970, p. 258) states that altruistic individuals evoke a positive response from others, thus altruism is a desirable personality trait. Garnering a positive feeling or response from what one does for another is certainly self-fulfilling. As one of the respondents in this study stated "...it is like a high." The notion of helping others as a way of "making a contribution" also correlates with altruistic behavior and a need for feeling self-fulfilled in the nursing role. Vocal intonations and/or facial expressions of the respondents during the interviews almost universally took on

a "wistful" character when they described why they wanted to be nurses. Their words truly painted the Nightingale image of the "angel of mercy" at the patient's bedside. One cannot argue that Florence Nightingale stands out in history as a dominant person who was both a leader and yet self-effacing. What she did in establishing the profession of nursing was for the well-being of others and not her own gain. In addition, her writings regularly address the sense of fulfillment she gained from her work (Woodham-Smith, 1951).

In this study the respondents' valuing nursing for altruistic reasons corroborated O'Neill's (1973) findings as well. To recall, O'Neill found that nursing students attached greater importance to altruistic and philanthropic ideals. On the other hand, the general, female college students included in O'Neill's study valued achieving recognition as opposed to being generous and helping people.

Finally, Krebs and Russell (1981) in their review of the literature on the concept, altruism, found that role-taking may give rise to altruistic behavior. Thus, the individual who wonders what it is the other person is feeling, or what they would do if they were in that person's situation are engaging in role-taking behavior according to Krebs and Russell. They believe that role-taking behavior leads to empathy and consequently gives rise to altruistic behavior.

There may indeed be some validity to their characterizing altruism as arising from empathy. However, one needs to be

cautious in accepting their interpretation unequivocally. Certainly, research to examine the link between altruism and empathy needs to be done.

Discussion of Findings

Career Facilitators

Exploring career choice from a developmental perspective, Caplow, (1954); Borow, (1966); and Ginzberg, (1951) conceptualize that process as long and subject to many variables including subjects taken in high school, preprofessional experience with the career, and the influence of significant others in the individual's life. Ginzberg and Caplow delineate the stages of occupational choice into three periods. These periods are the *fantasy period*, *tentative period*, and the *realistic period*. Ginzberg further divides the realistic period into three substages. These substages are chronological and are *exploration*, *crystallization*, and *specification*. The mean age of the respondents in this study was 23.7 years with a range of 18 years to 44 years old. Based on Ginzberg's developmental periods, the respondents in this study would be in the *realistic period*, *specification stage*.

Ginzberg's notion of *exploration* is exemplified by engaging in direct experience in the desired occupation. In this study, many of the respondents had experience with health care either as a volunteer or as a paid employee. Direct experience with health care was categorized under the theme

imitation. For many of the respondents this was their first introduction to the idea of becoming a nurse. This notion of "trying out" for the occupation through experiences in health care correlates with the *exploration period* delineated by Ginzberg.

Typically, exploration leads to the *crystallization* phase in which the individual commits to the occupation, or decides that is what s/he wants to be. The final period, *specification* is described as the steps taken to assume the occupational role (Ginzberg, 1951). All of the respondents in this study are in the specification period as they are all enrolled in a course of study which will lead to a baccalaureate degree in nursing.

A small number of respondents stated that they wanted to be nurses for as long as they could remember. This is in contrast to Caplow's (1954) and Ginzberg's (1951) conceptualization of the developmental process associated with decision to enter a particular career. Recalling their three periods of *fantasy*, *tentativeness*, and *realistic* and based on the age of the respondents in this study, they would be in the realistic period in that they were pursuing their decision to become nurses. The first two periods are important in the decision making process but are not usually associated with a firm commitment to enter the career under consideration. Not until the individual reaches older adolescence or beyond is the decision about a career realistic and committed.

It is interesting that some of the respondents knew from such an early age that they wanted to be nurses. Although the number in this category was small (N=3), there was no commonality that persuaded their career choice, such as relatives who were nurses, experience with health care or the like. What did emerge in these three individuals was that their reason for wanting to be a nurse was to "help people" which again reflects altruistic motives and indicates interaction between career facilitators and career attractors. Perhaps some individuals are innately altruistic and thus manifest these behaviors at an early age and need to find a vehicle that will provide an outlet for their feelings. Nursing would be an obvious choice given that they could conceive of adjusting to the sometimes unsavory aspects of patient care.

Krumboltz (1979, 1990) found in his study that direct involvement with a desired occupation was highly reinforcing in aiding the individual to make a decision to pursue that career. The findings in this study support Krumboltz's finding as well. Analysis of the responses in this study clearly revealed that while experience in the health care field could be categorized as *imitation*, there was also overlap with the theme *observation of the role*. For a number of respondents, nursing as an occupation had not been considered until they worked in a health care setting and observed nurses caring for patients. So while they had the

opportunity to "try on" the role (*imitation*), they were also in a position to observe the role. This combination of imitation and observation seemed to carry great import for the respondents. Despite the fact that they were directly involved in health care, they described many attributes of nursing (as they conceptualized them) as a result of observing the nurses on the units in which they were employed or volunteering.

This finding also compliments that of Birnbaum and Somers (1991). In their study it was noted that some nurses had occupational experience such as a candy striper, nurse's aide, or other health related job prior to becoming a nurse. This prevocational experience for those nurses was equated with a positive conception of the nursing role, better work attitudes, and higher levels of job satisfaction and involvement. Nurses who had not had any prevocational experience were found to adapt less well to the nursing role, and entertained more negative attitudes about the occupation.

Another group of respondents in the present study had observed the nursing role although they were not employed in the health care field. These observations occurred when the respondent had been a patient or had observed nurses caring for a sick relative. A number of these respondents attributed their exposure to the compassionate, caring, competent abilities of the nurses as being highly influential in their decision to pursue nursing. Notably, one respondent left a

well-paying business career to pursue nursing. She was most impressed with the care her ill mother received by nurses.

This notion of professional nurses as role models is important and in fact carries some responsibility. Considering the many individuals a nurse comes into contact with daily, his/her actions may be influential for an individual embracing or rejecting the decision to become a nurse. The manner in which the nurse conducts her/himself carries import at least based on the findings in this study. Observation of a role influences the observer to pursue that role or reject it. If it is also true that individuals who are by nature altruistic are more likely to choose a profession such as nursing than are individuals who do not exhibit a strong concern for others, then nurses who exemplify care and concern in the delivery of patient care will more than likely reinforce the altruistic observer to pursue nursing as a career as well.

In this study it was interesting to note that a significant number of respondents were influenced by direct observation of the nursing role. Krumboltz characterizes direct observation of the nursing role as experience with a real role model. One can conjecture why this might be the case. Since the respondents in the study universally were attracted to nursing for altruistic or self-fulfillment reasons, their own conceptualization or image of the profession more than likely correlated with the empathic,

caring nurse image. Observing the actualization of their conception of a nurse coupled with their own drive to help others and make a contribution may have reinforced their decision to pursue nursing. Reinforcement of a decision to pursue a career based on observation of real role models is congruent with Krumboltz's (1979, 1990) view on the power of role models. This finding also supports Meleis (1975) who points out that prenursing students who interact with individuals in the nursing profession are highly reinforced in their decision to choose nursing.

While a number of the respondents in this study had first or second degree relatives who were nurses, none of the interviewees commented that this fact alone had persuaded them to be a nurse as well. Relatives seemed to be a source of information about the profession but not the source of inspiration to become a nurse. Many of the respondents had already decided to pursue a career in nursing before discussing this with a relative. None of the respondents recalled that a relative had initiated a conversation with them for the purpose of encouraging them to become nurses.

It is possible that relatives convey a different attitude about the work of nursing when they are out of the health care delivery setting. Working long hours, double shifts, weekends and holidays may not be as glamorous appearing as watching the nurse at the bedside comforting and competently caring for a seriously ill patient. As humans are often want to do, they

tend to decry the positive aspects of their work outside of the work setting. Typically, nurses often complain about their patient load, the demands of the administrative components of their role, and the lack of time they have to give the kind of care that they really want to give. Indeed, in this investigator's experience, nurses more often than not state that they would not encourage their child to pursue nursing as an occupation. This advice is given to their children despite the fact that they themselves characterize the work of nursing as very rewarding.

Vicarious experience with the career is modelling of the occupation through the media. Television has certainly become a dominant mode of entertainment since the late 1950's. There has always been a season series or "specials" devoted to some aspect of health care. Most recently, television shows such as St. Elsewhere, Nurses, or Doogie Howser, M. D. depict nurses and physicians in the delivery of care. While the dramatization of the role of the nurse may not be in actuality realistic, it is often the public's primary perception about what a nurse is and does. Considering the steady stream of television programs involving nurses and physicians it was quite surprising that not one respondent found the media to influence positively or negatively their reasons for choosing nursing as an occupation. Of the 22 respondents, only one stated that she watched the Discovery Channel which often details advances in health care or the function of the human

body. However, this was not influential in her decision to choose nursing. Rather, it was conveyed by the respondent more as sustaining her interest in the health care field.

It was interesting to note that the respondents in this study were not influenced by the media in their decision to choose nursing. This is in contrast to the findings in Kalisch and Kalisch's (1987) study in which they contend that the image portrayed of nurses is predominantly a negative one. They conclude that this image dissuades many individuals from entering the profession. It should be noted that the intent of their study was to identify what the lay public's perception of nursing was as depicted in the media. That was not the intent either directly or indirectly of this study. In addition, this study only interviewed persons who had already made the choice to become nurses and did not include any persons who had rejected nursing as a career choice.

Barkely and Kohler (1992), in their study on high school males' images of nursing, found a strong correlation between the television depiction of nursing and the students' image of nurses. Indeed, in their conclusions they advocate a strong focus on how the media represents the nursing profession. They believe that the media should portray nurses in a more realistic fashion as well as showing nurses of both genders administering patient care.

One could further speculate that individuals choosing nursing for altruistic reasons, as the respondents in this

study did, may reject the media image of nurses as not being true to the nature of the profession. The individuals ages 23 through 44 years in this study all had the opportunity to observe nurses in real settings. This adds further confirmation to the idea that experience with real role models as noted by Krumboltz (1979, 1990) is highly reinforcing in the decision to choose a particular career.

Discussion of Findings

Secondary Findings

A number of interesting findings emerged from the study that were not elucidated in the literature review of other studies similar or pertinent to this one. One finding in particular was related to the age of the respondents. It will be recalled that the age range of the interviewees was 18 to 44 years. Of note was the difference in the thoughtfulness of the responses of the interviewees age 21 and older. As pointed out in Chapter 4 of this study, the responses of the 21 year old and older interviewees tended to be more philosophical and more highly altruistic. The need for self-fulfillment was greater in the respondents in this age range as well.

A number of ideas are raised in an attempt to understand this finding. Life experience may play a role in career choice at a later age. Perhaps the opportunity to try out other careers either through imitation or observation created a dissonance between the reality of the career and what the

individual perceived the occupation to be like. Thus different occupations are mentally "cast off" as not meeting the expectations that the individual holds. As potential careers are omitted, the individual tends to assess personal likes, potential interests, and strengths. For some of these individuals the choice that best "fits" them is nursing.

Life experience may also effect a change in values such that the feeling of making a contribution becomes more important than other elements of a career, such as potential for advancement or financial gain. Perhaps life events that were life threatening, either personally or for some significant other, were positively reinforcing to choose nursing. This threat to life may be a variable operant in the need to find self-fulfillment in a career subsequent to that event.

Over the years the earning potential and entry salary for nurses has improved considerably. The investigator was surprised, therefore, that no respondents stated that they intended to be a nurse primarily because they could earn a comfortable living. Only one respondent after probing, stated that she had chosen to get her baccalaureate degree in nursing rather than an associate of arts degree because her potential for advancement and thus improved income was better. She was a single mother with two young children to raise and this was an important fact to her. Given the current tenor in which the nursing profession capitalizes on the improved income for

nurses it was surprising that the respondents in this study did not reflect this attitude.

It was interesting to note that all of the respondents in the study portrayed nurses working in hospital settings. Nurses currently work in a variety of settings outside of the hospital. Yet, all of the respondents pictured themselves at the bedside taking care of patients. This conceptualization of nursing may well reflect the students' lack of socialization into the actual role of nursing as the respondents were all prenursing students. Nursing in all of its dimensions had not yet been introduced to these respondents nor had they had any contact with nursing faculty. It is likely that they held an idealized view of the profession and believed that nursing care took place predominantly in a hospital setting. Current health care reforms are focusing more on primary or out-of-hospital care. Increased emphasis on illness prevention, health promotion which will occur predominantly in ambulatory care settings, may have an interesting effect on anticipatory socialization to the nursing profession for future nurse aspirants who view nursing as care that occurs in a hospital.

Lastly, despite the fact that the nursing shortage has currently eased, the predictions in the profession is that this is a false period of reassurance. Changes in the health care industry will increase the need for nurses in settings other than tertiary care facilities. The need for qualified

nurses at both a beginning and advanced level of preparation will increase. High school students are recruitment sources for schools of nursing. However, high school counselors often do not discuss nursing as a career with high school students. It was interesting to note that in this study, no interviewees had been encouraged to pursue nursing because of a high school counselor. When the students in this study were asked who influenced them to decide to be nurses, wherein high school counselors were cited as examples of influential people, not one respondent attributed their decision to a high school counselor. The nursing profession needs to address this void in high school career counseling in order to insure a continuous supply of individuals to respond to the increasing needs for health care professionals.

Correlation of Findings with the Conceptual Framework

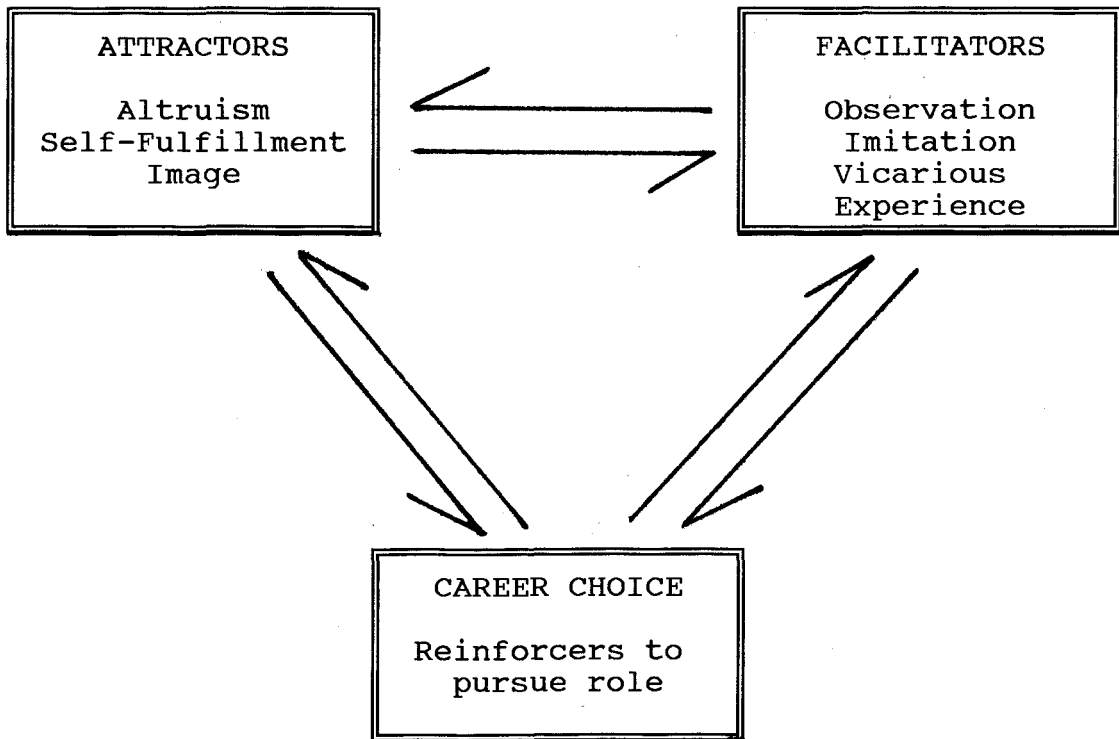
Corcoran and Clark's (1984) conceptualization of anticipatory socialization being a process of career attractors and career facilitators provided the framework for the analysis of the results of this study. In their own study, these authors do not discuss the aspect of career facilitators, addressing only career attractors. On the other hand, Krumboltz (1979, 1990) looks at anticipatory socialization from the perspective of career facilitators almost exclusively, although he acknowledges that genetics, environment and culture are also important considerations in career choice.

Numerous reviews of the interview transcripts for this study revealed that it was definitely possible to categorize the respondents answers under the two primary themes, career attractors and career facilitators. It was also possible to subsume responses under the secondary themes under each of the primary categories. However, it was also clearly apparent that none of the respondents were conclusively influenced by either career attractors or career facilitators. For example, if respondents were persuaded to choose nursing as a result of *observation of the role*, they were also intrigued with the characteristics of the nurses. The respondents described these nursing traits as caring, empathic, kind, compassionate and so forth. These were in this investigator's view clearly descriptors of altruistic qualities. This conclusion as to what are altruistic behaviors is supported by individuals who studied the concept altruism such as Krebs and Russell (1981), Rushton and Sorrentino (1981), Ridley and Dawkins (1981), Horowitz (1968), Cohen (1978), and Hatfield (1978).

In this study the respondents answers to "why they wanted to be a nurse" were congruent with Corcoran and Clark's career attractors. Specifically, internal motivations such as the need for self-fulfillment, their own image or conceptualization of the career, and altruistic values were in keeping with Corcoran and Clark's operationalization of career attractors. While Corcoran and Clark do not describe career facilitators as antecedent to anticipatory socialization and

occupational choice, it was clear that they are significant. *Observing nurses* and *imitating* them were strongly reinforcing for career decision making in this study.

Krumboltz (1979, 1990) provided cogent examples of how one is facilitated to choose a particular career. The findings in this study corroborated Krumboltz's findings. Thus, his model based on social learning theory, fits well with the career facilitators identified in this study, *career imitation*, *career observation*, and *vicarious experience* with a career. Combining the work of Corcoran and Clark and Krumboltz, the following conceptual model is advanced to portray anticipatory socialization as elucidated in this study.

Conceptualization of ResultsANTICIPATORY SOCIALIZATION
TO NURSING

Model Explanation

Attractors and facilitators are the two primary themes identified in this study. Under attractors three secondary themes are elucidated, *altruism*, *self-fulfillment*, and *image*. These secondary themes are the intrinsic values or motivators held by individuals which are persuasive in making a career choice. Thus, attractors are components of career choice.

Facilitators are the external events in individuals' lives which serve to motivate them to choose a particular occupation. Secondary themes identified under the primary theme, facilitator, are *role observation*, *role imitation*, and *vicarious role experience*. Facilitators are also components of career choice.

No one individual is motivated to choose a career solely by either career attractors or career facilitators. Both influence to a greater, lesser or equal degree occupational choice. Indeed, individuals' career choices are generally based on interaction of both career attractors and career facilitators. Thus the model depicts the two primary themes identified in this study that influence career choice and the secondary themes ascribed to each of the primary themes. All of the themes influence career choice while at the same time influencing each other. *Role imitation*, while a facilitator of career choice, can influence *altruism*, an attractor of career choice. An individual choosing a career such as nursing for altruistic reasons might have this internal

motivation reinforced by the opportunity to "try on" the role

Limitations of the Study

This study is limited by factors such as accessibility of subjects; willingness of the selected schools to participate in the study; and the time that each subject had available to be interviewed without interruption.

Problems with accessibility of subjects resulted in a loss of subjects from the pool and insufficient time to explore responses in-depth. Despite the fact that the potential pool for subjects was 345, accessibility of the subjects was a confining problem in the study. In a number of instances, subjects who had arranged for a scheduled interview at a designated site with the interviewer did not keep the appointment. Phone numbers that the subjects provided on the return postcards for the investigator were either incorrect or the subject could never be reached at that number. Subjects did not return phone calls when messages were left for them by the investigator. Finally, some subjects arrived late for the interview and then had a limited amount of time to spend with the interviewer.

The sample consisted of students enrolled only in baccalaureate programs within a specified geographical area which limits the generalizability of the study results. In addition, all subjects were female and thus reflected only one gender perception to the exclusion of male pre-nursing students.

The investigator's original intent was to include both associate degree and baccalaureate degree programs offering a nursing sequence of study. The associate of arts degree schools were the least willing to participate in the study. The primary reason for this was attributed to the need to maintain student confidentiality. Some of the AD programs chose not to answer the query seeking their participation in the study. Consequently, the one AD school who agreed to participate in the study had to be dropped from the pool of possible subjects because of inadequate information sent to the investigator. The lack of AD participation limits the generalizability of the study to pre-nursing students other than baccalaureate.

The intent of the interviewer was to conduct all interviews in person. However, due to inability to meet with students during day or evening hours, some interviews were conducted by phone to accommodate subjects who could only be interviewed late at night (after 10PM). While the same format was used in the phone interview as the person-to-person interview, the inability to see the interviewees facial expressions may have eliminated the investigator's ability to discern facial cues that could have stimulated questions. Despite the limitations enumerated, the interviews were lively, rather lengthy and yielded substantive information.

The subjects who chose to participate in the study were self-selecting. That is individuals who would normally be

more outgoing, willing to help others, or simply interested in participating in a research study were the types of subjects who volunteered. This had a limiting effect on the study especially as it relates to generalizability and perhaps even as a threat to validity. Consequently, behaviors described as being facilitative or attractive to choosing nursing as a career, may be behaviors that are particular to a certain personality type, such as the type who participated in the study.

It is noteworthy that the majority of the respondents in this study chose nursing as their career for altruistic reasons. While it is not unusual for a qualitative study to have a rather small sample, it may be that since only 22 students participated there were not enough participants to garner a wider perspective.

The individuals who participated may have done so because it was in keeping with their value, altruism. These participants may have felt inclined to help another nurse who was in need of subjects for completion of the dissertation. Their consent to participate was driven by their innate need to "help" somebody else. In essence, participation in the study provided the respondents another opportunity to help and care for someone else. Invariably, the respondents at the end of each interview wished the investigator luck.

While the majority of registered nurses are women, the fact that this study had no male participants was unfortunate.

It would be interesting to ascertain if males who pursue nursing do so for altruistic reasons. It is conceivable that their motivations might be the same as the respondents in this study or perhaps driven by different values such as income potential.

The students who participated in the study came predominantly from private, church affiliated schools. This may have influenced their motivations to choose nursing as a career. That is students who manifest a strong religious orientation may also be more inclined to pursue careers that have a definite service to human kind component. Replication of this study should endeavor to increase the number of students from public, non-religiously affiliated schools.

Implications for Practice

Four dominant outcomes in this study were that the respondents chose nursing for *altruistic* reasons, for the need for *self-fulfillment*, through *observation* of role models and *imitation*. It may well be that nursing education should weave these values into the curriculum as well as provide more opportunity for the novice student to observe nurses in real settings.

In recent years the nursing profession has stressed the idea that nurses are well compensated for what they do. This was believed to have attraction to the profession. Perhaps, the profession needs to rethink this tactic and instead emphasize the altruistic, helping component of the profession.

This may have some implications for marketing the profession.

Another compelling thought is that individuals who are altruistic may have a better fit with the nursing profession. Perhaps entrance screening should also include an assessment of whether or not altruistic behaviors are a dominant value held by those aspiring to study nursing.

This study bears some consideration of the impact that nurses have in the work setting on observers, some of whom may be entertaining the notion of becoming a nurse. Nurses in the work setting need to convey the highest level of professionalism and convey an attitude of care for the patient and family. Many of the respondents in this study related instances in which they observed nurses at work. These nurses were described as compassionate, caring, competent, and always there. These behaviors were highly valued by the individuals in this study. Indeed, in every instance the observation of the nurses in the role was persuasive for choosing nursing as a career. This outcome seems to substantiate the widely held notion that the best advertising is that done by word of mouth or deed! Nurses should be periodically apprised of their behavior in the workplace and what import it may hold.

Implications for Future Research

The original intent of this study was to interview prenursing students in both baccalaureate and associate of arts degree programs. This intent was not actualized in this study. The sample was derived from baccalaureate programs

exclusively. This study should be replicated interviewing associate of arts degree prenursing students. It would be interesting to see if the findings in this study are corroborated in that population.

In order to obviate the possibility that primarily altruistic people volunteered to participate in the study, it should be replicated in two settings, a college/university and a community college. A larger number of prenursing students in both settings should be interviewed to determine if similar or different outcomes would be found. Increasing the population numbers might capture a broader range of motivators that persuaded the subjects to choose nursing as their educational major.

There has been a recent trend in baccalaureate schools of nursing to offer individuals with degrees in other areas (eg., psychology, sociology, and so forth) the opportunity to earn a baccalaureate degree in nursing in an accelerated program. Thus, once the applicant has finished courses that are requisite to nursing study such as chemistry, or biology the applicant enters the nursing program and can typically complete the course of studies within one academic year and a summer. These students tend to be older, have more life experience, and of course enter the program with a previous college degree and thus are sensitized to the rigors of college study. This population would be an interesting one to study using the same design of this study. It would be

particularly interesting to ascertain if their motivations to embrace the profession of nursing are similar or divergent from that evident in this study.

Because the population for this study represented private, religiously affiliated schools (with the exception of two state schools), this study should be repeated using a broader sample of schools. In this way, the findings relative to career attractors, especially altruism and self-fulfillment, could be either confirmed or rejected. It may be that the type of school chosen by students is based on internal values that may also be congruent with altruistic behaviors.

Since this study corroborated the findings in the Olesen and Davis (1964, 1966) study as well as supporting Corcoran and Clark's (1984) conception of anticipatory socialization, career attractors and Krumboltz's (1979, 1990) description of career facilitators, a study using a different methodology could be pursued. The results of this study can form the basis of a questionnaire to determine motivations for pursuing nursing. This questionnaire could be constructed in such a way as to capture the import the respondents attached to career attractors and career facilitators in their decision making process. Respondents, using a Likert Scale questionnaire, could indicate how important or unimportant certain characteristics of nursing are to them. The questionnaire could be constructed to reflect appropriate

characteristics of both career attractors and career facilitators. Open ended questions would also be retained to ensure that information not covered in the questions would be included. Such a questionnaire would strengthen both Olsen and Davis' (1964) study method and Corcoran and Clark's (1984). In the Olesen and Davis study the questionnaire focused primarily on the image of nursing and did not address other components such as experience with the occupation. The Corcoran and Clark study sample were academicians and not nurses. Further, the results obtained on the anticipatory socialization section of their study did not address career facilitators. The new questionnaire would address this. Finally, this questionnaire might be useful to career counselors in helping individuals who are thinking about nursing determine if they have a "fit" with the profession.

This study did not reveal that high school counselors positively affected any respondents' decision to pursue nursing as a career. A study ascertaining what perceptions high school counselors have about the nursing profession might be revealing. The results of such a study might assist schools of nursing in educating high school counselors about the profession. This information would have potential value for recruitment.

This study or one similar should be replicated with the express purpose of including male subjects in the sample population. Studies that look at male nurses are

predominately quantitative. No qualitative studies could be found that ascertained the motivations for choosing nursing. It would be interesting to determine if male nurses are influenced by the same career attractors and career facilitators as the females in this study were.

Conclusion

This study was a qualitative, descriptive study whose aim was to ascertain what motivated a sample group of prenursing students to pursue nursing as their career choice. Corcoran and Clark's conceptualization of anticipatory socialization was the organizing framework for the study coupled with Krumboltz's application of social learning theory to career decision making.

The results of the study indicate that neither career attractors or career facilitators are the sole motivations for individuals when making a career choice. Instead there is interaction of both processes in all decisions to choose nursing. Two career attractors, altruism and self-fulfillment, were the predominant reasons for choosing nursing. The career facilitators, imitation of the role, and observation also played an important role in the decision to choose nursing.

Perhaps the strongest implications this study has for nursing is that the profession may have more attraction if the altruistic components of nursing are stressed in marketing and recruitment materials. In addition, the impact nurses have in

their day-to-day work as role models to potential nurses has importance. Nurses need to keep this aspect in mind as they do not know who is watching them and perhaps being reinforced or led to consider for the first time the advantages of nursing as a career.

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