ABSTRACT

The purpose of this study is to explore student nurses’ perceptions of nursing, their perceived goals as nurses and their future career pathways. The study involved a cross sectional approach using Ford’s (1986) taxonomy of human goals as a theoretical framework. This paper presents a part of a larger study that involved two groups of nursing students, however the findings from one group only are reported. A questionnaire was administered to 126 nursing students enrolled in the first semester of a nursing degree program. Results revealed four main goals students hold as a nurse: first, Happiness (satisfaction for self and others), second, Evaluation (self efficacy), third, Social Validation (opportunity to help others), and, fourth, Safety (job security). Results also indicated that nursing provides opportunity for travel and the participants had a limited perception of career paths. Findings have implications for nurse education (long and short term) especially in regard to providing a realistic view of nursing as a profession and future career pathways. These findings are especially significant given the current shortage of nurses.

LITERATURE REVIEW

According to Kiger (1993) student nurses come into the profession with a strong perception of what it entails. They see it as not just a job but a career, profession or vocation; indeed, some may see it as a calling (Raatikainen 1997). However, over the last decade there has been global concern regarding the decreasing number of individuals who are selecting nursing as a career option and the high attrition rate of student nurses and qualified nurses (Buchan 1997; Campbell and Dickson 1996; Cowin 2001; Helmsley-Brown and Foskett 1999; Jalili-Grenier and Chace 1997; While and Blackman 1998). Today this situation is more acute and the international shortage of nurses has both short and long term implications in the provision of quality health care (While and Blackman 1998). Both nurses and the general population are ageing and Cowin (2001) asks the fundamental question: ‘Who will replace this workforce?’ (p.313). Campbell and Dickson (1996) propose that ‘now, more than ever, it is essential to promote success and reduce the number of students who leave schools of nursing’ (p.47). To reduce this attrition Day et al (1995) advocate that educators should ‘imbue students with a realistic view of the role of the professional nurse’ (p.357). Within this goal is the proviso to ensure a flow of motivated nurses who possess the abilities, skill and knowledge to perform at a competent level in the clinical area (While and Blackman 1998).

Findings from a study by Helmsley-Brown and Foskett (1999), which investigated the reasons why young people (ages 11, 15 and 17 years) selected nursing as a career path, showed that the main reason for choosing nursing was a desire to help people and children. A study by Happell (1999) involving 793 first year undergraduate nurses across 12 universities in Victoria, Australia, found that career aspirations concentrated on midwifery, paediatrics and areas that involved a high-tech focus. These students were less favourable toward caring for older people, people with mental health problems and people with a physical disability. This limited perception
of career pathways within the nursing profession has serious implications for future patients and health care provision.

According to Bacon et al (2000), Happell (1999), Jessup (2001), Kiger (1993) and Rossiter and Yam (1998), within the media the stereotypical images of nurses and nursing persist. In the media the nurse is nearly always female (male nurses are shown on programs such as All Saints), depicted as a battleaxe, a sex symbol or in a subordinate role, or, portrayed as less important than doctors. These persistent images do not serve to encourage young people into the profession and do not indicate the many career pathways that are available. These images may also influence the prospective nurse’s family since according to Spouse (2000a) studies have shown that individuals who decide to undertake nursing do not have the support of their family.

Considering these influences ‘students enter nursing with strong images of how they will practise’ (Spouse 2000a, p.730). Therefore, this study also explored student nurses’ perception of nursing and themselves as nurses. Ford’s (1986) taxonomy of human goals was used as a theoretical framework to underpin this study. These goals identify internal cognitive goals and range from arousal, evaluation, experiential, psychological, social relationship and task goals. Identification of specific goals, which encourage the person to select nursing as a career, will help indicate the best direction on how to recruit students in the future.

The recruitment of future student nurses seems an arduous task, however, with a determined effort from both educators and clinicians marketing of nursing as a professional career, which offers specialised career paths that could be achieved. Thus, an aim of this present study is to identify the goals newly enrolled student nurses hold in relation to their perception of being a nurse and future career pathways. Essentially, results could determine if these goals and perceptions are realistic enough to sustain them through the rigours of a nursing degree course and into the future.

AIMS

The research presented in this paper sought to explore the following:
1 The reasons why first year student nurses select nursing as a career and their perceptions of being a nurse; and,
2 Individual goals in relation to being a nurse and future career pathways.

METHOD

This exploratory study involved a cross sectional design using both qualitative and quantitative approaches. This paper is part of a larger study and will report findings in relation to one group only. This group consisted of 126 nursing students currently enrolled in Semester 1 of a nursing degree program at a tertiary institution in Perth, Western Australia. The findings related to this group are significant given the initial recruitment issues and determining the reasons and images people bring with them as they embark on a nursing career.

Instrument

Following a review of the literature, the researchers developed a questionnaire, consisting of demographic data and open-ended items related to students’ images and expectations of becoming a nurse. Also included were items asking about their perception of the nursing profession, the reasons they selected nursing as a career path, perceptions of status of nurses, possible factors (i.e. parents, relatives, friends or the media) that might have influenced their choice.

A questionnaire can be used to collect data related to the aforementioned issues, however, the use of art may help the students to express thoughts, feelings, fears and expectations more graphically (Spouse 2000a, 2000b). Furthermore, use of drawings may also be a means to explore and identify students’ feelings and anxieties (Styles and Radloff 2000) and again this information could provide academic staff with the first building blocks on which to provide interventions to help retain students within the profession. Students were also asked to draw a picture of how they saw themselves as a nurse at the time of completing the questionnaire and in the future. The students were informed that they did not have to be an artist as the researchers were seeking their interpretation. Only the data and drawings relating to Ford’s (1986) taxonomy of goals and career pathways are presented here. For further details of stereotypical images of nursing, perceived status of nurses to other health professionals and who and what influenced them in their chosen career see Ward et al (2002).

Procedures

The tertiary institution granted ethics approval to conduct the study. Following a successful pilot study the researchers administered the questionnaire to students in the fourth week of their nursing degree program. Distribution of the questionnaire early in the semester helped minimise the influence that nurse education may have had on their perception of the nursing profession and future career paths. The questionnaire was distributed in lecture time to increase the likelihood of a higher return rate. To ensure individual responses to items in the questionnaire the students were asked not to confer. The students were informed that participation in the study was on a voluntary basis; any student who did not want to participate could return the questionnaire. To safeguard anonymity they were advised not to write their name or student number on the questionnaire. The students were assured that involvement or non-involvement in the study would not impede on their study progress.
Data analysis

Demographic data were managed, and statistical analyses carried out using the SPSS and responses to open items within the questionnaire were transcribed, coded and then managed using the Non-numerical Unstructured Data Indexing Searching and Theory Building (NUD•IST 4) software (Richards and Richards 1994). Ford’s (1986) taxonomy of human goals was used to categorise responses to questions. For example, Evaluation, Happiness, Social Validation, Safety, Social Responsibility, Arousal and Task goals. Other data were coded according to themes which emerged from the data, for example, future plans and negative aspects of nursing. These data assisted in building a picture of the participants’ images of nurses and nursing, possible anxieties related to clinical practice, and career pathways.

The drawings were categorised according to Ford’s (1986) taxonomy of goals. They were categorised into the appropriate goal, Happiness or Social Validation. Some students provided detailed images whilst others a more representative cartoon of what they wanted to depict.

FINDINGS

Of the 140 students enrolled in semester one of the nursing degree course, 126 completed the questionnaire - a response rate of 90%. Thus, the sample is accepted as representative of this particular cohort of students. Of the 126 respondents, 118 (93.7%) were female and 8 (6.3%) male. Ages ranged from 17 to 53 years (m= 21.63 yrs, SD 7.54). In relation to country of origin, 105 (83.3%) participants were born in Australia and the remainder originated from various countries such as the UK, Asia, and the USA. In total 119 (94.4%) participants were Australian citizens. None of the participants was of Aboriginal descent.

Of the 126 participants, 87 (69%) produced a drawing in response to the item in the questionnaire which asked them to draw a picture that illustrated how they envisaged themselves as a nurse at the present time and in the future. Seven drawings were excluded, as they were incomplete, thus, in total, 80 (63.5%) drawings were accepted for inclusion in the study.

Table 1 provides a description of the types of goals the participants identified in relation to seeing themselves as nurses. In increasing order of frequency, when percentages mentioned by participants are totalled (ie Happiness and Evaluation), goals included: Happiness - satisfaction for others and self; others 54 (42.9%) and self 50 (39.7%) - total of 82.6%; Evaluation - self efficacy: positive 68 (54%) and negative 13 (10%) - total of 64%; Social Validation - 54 (43%); Safety - employment 40 (31.7%); Social Responsibility - altruism: 22 (17.4%); and Arousal - excitement 20 (16%). Questionnaires were identified numerically and this code number is used when a quote is presented in Table 1.

<table>
<thead>
<tr>
<th>GOAL</th>
<th>Definition</th>
<th>n &amp; %</th>
<th>Statements from participants</th>
</tr>
</thead>
<tbody>
<tr>
<td>HAPPINESS</td>
<td></td>
<td>54 (42.9%)</td>
<td>Others Make people’s last days of their life a bit more enjoyable’(105)</td>
</tr>
<tr>
<td>Satisfaction for self and others</td>
<td>Caring for patients will make the self and others happy</td>
<td>50 (39.7%)</td>
<td>Self ‘The caring and patient side and then helping them will be the best feeling’(08)</td>
</tr>
<tr>
<td>EVALUATION</td>
<td></td>
<td>68 (54%)</td>
<td>I have high demands of myself. I know I’ll become a good nurse and will always try to get better’(103)</td>
</tr>
<tr>
<td>Self-efficacy (positive)</td>
<td>Wanting to perform as a nurse to the best of one’s ability and providing the best care</td>
<td>13 (10%)</td>
<td>I’m still unsure of what I want to do’(100)</td>
</tr>
<tr>
<td>Self-efficacy (negative)</td>
<td>Being undecided about their decision to be a nurse</td>
<td>(Total = 64%)</td>
<td></td>
</tr>
<tr>
<td>SOCIAL VALIDATION</td>
<td>Nursing providing an opportunity to help others</td>
<td>54 (43%)</td>
<td>I would like to help care for people in our society and I just love the interaction with people’(01)</td>
</tr>
<tr>
<td>SAFETY</td>
<td>Nursing offering job security</td>
<td>40 (31.7%)</td>
<td>‘There is a constant need for nurses every day. So in the end I would be able to have a steady reliable job’(101)</td>
</tr>
<tr>
<td>SOCIAL RESPONSIBILITY</td>
<td>An altruistic approach to caring. A desire to help less fortunate individuals</td>
<td>22 (17.4%)</td>
<td>‘I want to travel and work all over the world especially in remote areas such as South America and Africa and care for people’(06)</td>
</tr>
<tr>
<td>Equity and fairness</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>AROUSAL</td>
<td>Wanting a job that is not boring - plenty of variety and excitement</td>
<td>20 (16%)</td>
<td>‘Hands on work. Always on the go. Meeting new people’(14)</td>
</tr>
<tr>
<td>Entertainment</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>TASK</td>
<td>Wanting to develop in competence and excellence</td>
<td>5 (3.9%)</td>
<td>‘To provide the best system possible and change the way nurses think and feel about the system’(41)</td>
</tr>
</tbody>
</table>

Table 1: Goals identified by participants and coded using Ford’s (1986) human taxonomy of goals

For Table 1, please refer to the full text for accurate data representation.
In relation to the 80 (63.5%) students who had drawn a picture which illustrated how they perceived themselves as nurses, 47 (58.8%) drawings reflected the Happiness Goal. The students portrayed themselves with smiling faces or a ‘sunshine’ representation reflecting enjoyment (see Figure 1). Although 22 (17.4%) participants identified a goal of social responsibility (equity and fairness), only five (6.3%) participants represented this goal through their drawings. These participants presented images of working in a third world country or working in various places (rural, hospital and community) helping people.

One of the goals identified by Ford (1986) within the category of Social Relationship Goals is Self Determination, which involves personal control, freedom and autonomy. According to Ford (1986) this goal involves defining one’s identity as a separate person and promoting personal control over life circumstances. These factors could relate to how nurses might conduct their career progression; that is by possessing the control, freedom and autonomy to manage and enhance their elected career pathway. For example, participants judge they have the freedom to select an area of nursing in which to practice, and where and how this practise will be experienced.

Of the 126 participants 101 (80.2%) mentioned a career path (see Table 2). Results showed that 32 (25%) participants selected a combination of midwifery and paediatrics, 14 (11%) selected midwifery and 10 (8%) selected paediatrics. In total, 56 (44%) participants selected either paediatrics or midwifery as a career path. In contrast, only 10 (8%) participants selected theatre or surgery as a career path. Results also showed that a large proportion of participants (35, 27.7%) viewed nursing as a passport to ‘travel’; perhaps highlighting they have the freedom to broaden their career choices and pathways.

Of the 126 participants, 80 (63.5%) completed a drawing. Of these 80 drawings, 18 (22.5%) depicted their vision of their future career path. Of these 18 drawings, 13 (72%) related to traditional clinical environments (nursing in a hospital environment) and five (27%) related to either midwifery or paediatrics. These five drawings showed a nurse caring for pregnant women and children in a hospital setting.

Under the category of Task Goals (a higher level goal) Ford (1986) identifies five types one of which is Mastery which refers to achievement, competence and excellence. The goal of Mastery was evident in only five (3.9%) of the 126 participants’ responses. In relation to the drawings made by the students, 13 (16.3%) illustrated ‘self growth’ as they progressed through their nurse education program by illustrating specific attributes of being a nurse; being knowledgable, caring, compassionate, and efficient (see Figure 2).

Table 2: Self Determination Goal (involving personal control, freedom) or career pathway mentioned by the participants.

<table>
<thead>
<tr>
<th>Career path</th>
<th>n &amp; %</th>
</tr>
</thead>
<tbody>
<tr>
<td>Travel</td>
<td>35 (27.7%)</td>
</tr>
<tr>
<td>Midwifery and/or paediatrics</td>
<td>32 (25%)</td>
</tr>
<tr>
<td>Midwifery</td>
<td>14 (11%)</td>
</tr>
<tr>
<td>Paediatrics</td>
<td>10 (8%)</td>
</tr>
<tr>
<td>Theatre/surgical</td>
<td>10 (8%)</td>
</tr>
</tbody>
</table>
Negative aspects of nursing

Negative aspects or areas of care were mentioned by the participants (See Table 3) as factors in their consideration of nursing as a career. Twenty-one (16.6%) mentioned death or dying; 21 (16.6%) mentioned conditions (eg pay, shift work, staffing levels); 10 (8%) an aversion to handling bodily fluids; and eight (6.3%) mentioned the care of the elderly.

<table>
<thead>
<tr>
<th>Negative aspects of nursing or areas of care mentioned by the participants.</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Negative aspects of caring</strong></td>
</tr>
<tr>
<td>Death/dying</td>
</tr>
<tr>
<td>Conditions: Pay, shift work, staffing levels</td>
</tr>
<tr>
<td>Body fluids</td>
</tr>
<tr>
<td>Elderly care</td>
</tr>
</tbody>
</table>

DISCUSSION

As expected, the participants were predominantly female, Australian and in general came from a young age group. Findings from the study show the participants identified a limited range of goals. Reasons for this may be related to the development level of the students (at the beginning of their nurse education), and their limited knowledge of what nursing and the nursing profession involves. The limited range may also reflect the goals which are pertinent to the students at the time in their life span. The two most frequently mentioned goals related to Happiness (satisfaction for self and others) and Evaluation (self-efficacy). These goals appear to represent the satisfaction that the participants wanted to achieve through helping others. Happiness, represented as smiling faces and sunshine, was also reflected in the drawings made by the students. The notion of happiness and caring for others supports findings of Hemsley-Brown and Foskett (1999) who found that young people proposed that the attributes of caring, being loving and friendly are the attributes inherent in nursing.

Participants mentioned caring for people in third world countries, reflecting the goal of Social Responsibility (equity and fairness). This altruistic approach indicates that the students want to help those individuals perceived as less fortunate than themselves. It is significant, however, that not one participant mentioned an intention of working within the Aboriginal community. Perhaps nursing in a third world country seems more romantic and would also provide an opportunity to travel. Furthermore, an altruistic approach also reflects the happiness goal in that it would further enhance participants’ feelings of self-satisfaction derived from providing care. This finding supports that of Hemsley-Brown and Foskett (1999) who found that young people make a career choice based on the enjoyment this employment would give them.

Results related to Evaluation goals reflect those of Ferguson (1990) who suggests that satisfaction and fulfilment in one’s career is very important. Evaluation goals relate to behavioural outcome rather than cognitive accomplishments (Ford 1986) and this group of students wanted to strive to do their best and perform to the best of their ability. There was, however, no emphasis on cognitive exploration as to how this performance would be achieved. For the purpose of this study, Ford’s (1986) Safety goals (an important part of everyday life) were interpreted as safety in employment as this factor is fundamental to supporting the person and/or family. The participants viewed nursing as a secure career path, thereby providing consistent opportunity for work. This potential may reflect the view that nursing continues to be perceived as a female occupation and that participants were projecting their future employment needs of remaining in the workforce while they pursued a family life. Moreover, they perceived nursing as a ‘passport’ to work and to see the world, perhaps indicating an encouraging outlook in regard to employment, and a means of further enjoyment and freedom.

Results, which identified a very limited range of desirable nursing contexts, reflected those of Happell (1999) who observed that individuals have a narrow view of the dimensions of nursing and the career paths that it can offer. Participants in this study tended to select the ‘nice’ high turnover environments, such as midwifery and paediatrics. These environments may be perceived as ‘happy places’, caring for mothers with newborns and children, and thus providing participants with increased self and employment satisfaction. Furthermore, they may consider that these areas of care have no tragedies because dying is a remote possibility. This maintenance of happiness is also indicated in the recognition of, and desire to avoid, the negative aspects of care (death, dying, aged care). It appears these students possess a limited view of the intricacies of caring. As Happell (1999) observes this limited view of career pathways, and the reluctance to work in aged care, psychiatric nursing or with people with physical and mental disabilities, has far reaching implications for the profession.

The stereotypical images of nurses evident in this study support Bacon and McKendrick’s (2000), Jessup (2001), Kiger’s (1993) and Rossiter and Yam’s (1998) findings. The participants, in their drawings, depicted the nurse wearing a starched cap, even though for nurses in Australia, the cap has not been part of the uniform for approximately 20 years. Perceptions of the provision of care in the drawings showed nurses caring for patients predominantly in a hospital setting. These persistent images reflect how health care is portrayed through the media, in effect reinforcing stereotypical images of caring. However, according to Jessup (2001) the nursing profession has the potential ‘to throw off a negative self image’ (p.215) and challenge the media’s perspective of nurses and nursing. This view is shared by Bacon et al (2000), who report that people are now beginning to ‘see nurses as well educated, independent thinking
professionals’ (p.31). All nurses therefore, including both clinically based and educators, cannot afford to rest on their laurels but must strive to reinforce this progressive image, and once and for all reject those outmoded myths.

CONCLUSION

In conclusion, findings demonstrate that students enter nursing with a limited perspective of what the nursing profession entails. Essentially, the participants perceived nursing as a means of receiving pleasure from providing care, from interactions with patients, and from fulfilling pleasure and providing activities such as travel. Consistent with this view is the fact that students tended to select areas of care, such as midwifery and paediatrics, which perpetuated this prospect of happiness. The participants also perceived nursing as a means to ensure employment security; either within Australia or if they elected to travel. The altruism expressed by some students who wished to help others did not, however, extend to indigenous Australians.

The most apparent limitation of this study is that the results cannot be generalised to all individuals who elect nursing as a career. Focus groups may have given the participants opportunity to expand on their responses, in particular in relation to the negative aspects of nursing, and thereby provide clarity to the results. Another limitation was not ensuring that participants who were repeating the semester were excluded from the study. Also, if the participants were asked to rank a list of nursing career choices the results may have provided a clearer indication of future career paths.

Despite these limitations, results do substantiate previous research and highlights that the profession needs to be more proactive and dispel the notion that nursing offers limited career opportunities. As Haprell (1999) observes, nurses work in a wide variety of care settings and ‘the nursing profession must seek actively to portray the equal importance of all aspects of nursing care, and to deter the situation where certain aspects of practice are considered more important and/or more desirable than others’ (p.505).

It is the responsibility of nurse educators to provide prospective nursing students with information, which gives a realistic, and not a romantic vision of nursing. This may be addressed by persuading the media to present a more realistic and balanced portrayal of nursing and by providing more information to schools and presenting talks at schools by role models who reflect the diversity and complexity of the nurses’ world. In doing so, the nursing profession might be better placed to attract and retain future nursing students and nurses in the workforce, thus ensuring adequate provision of appropriate health care in a wide range of settings.

REFERENCES


