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Exploration of the counseling role of thirteen instructors in a school of nursing.

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EXPLORATION OF THE COUNSELING ROLE OF THIRTEEN INSTRUCTORS IN A SCHOOL OF NURSING

BY
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(B.S. in Nursing, Boston University, 1957)

A field study submitted in partial fulfillment of the requirements for the Degree of Master of Science in the School of Nursing Boston University 1959

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The author is indebted to the thirteen instructors, whose willingness and cooperation made this study possible.
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CHAPTER I
INTRODUCTION

Statement of Problem

Students in schools of nursing today have grown up in a turbulent world—they were born during World War II, have lived through the Korean War and last year they witnessed a recession. These students have had to adjust to this changing world; now they must also adjust to a new experience away from home and family. Living in a nurses' residence with other girls, acclimating themselves to a new intensive program of studies, learning to care for patients with varying degrees of illness may produce new problems for these adolescents.

The period when the students are seventeen to twenty years of age are the formative years of their lives. They need guidance and counseling at this period perhaps more than at any other time. To whom shall students in a school of nursing turn for help? The obvious answer is to the adults with whom they have the most contact—the instructors. Many diploma schools of nursing do not have a guidance person on the faculty and one of the many functions of the instructor is to be a part-time counselor. Some authorities on counseling feel that this should be a role assumed by the teacher even if there is a guidance person on the faculty.
This exploration of the counseling role of thirteen instructors was done at X School of Nursing. It included an analysis of the feelings of the instructors toward counseling and the actual counseling done by the instructors with the students currently attending the school.

Justification of Problem

The faculty at X School of Nursing was in the process of reevaluating its guidance and counseling program when this study was started. This study was done primarily to produce data that will enable the faculty to strengthen its counseling and guidance program and secondly, to make the instructors become more aware of the problems facing adolescents who are coming into a world of work and change.

Scope and Preview of Methodology

The study of the counseling role of thirteen instructors was done over a period of six weeks from the beginning of January until the middle of February, 1959. The thirteen instructors are also the counselors for the 138 students currently enrolled in the school.

A meeting with the faculty members was held to orient them to the study that was being conducted and to enlist their cooperation and help. Each faculty member was requested to keep a record on a special form devised for this study for each student she counseled during the six-week period.
At the end of the six weeks when the forms kept by the counselors were collected, a questionnaire, also constructed for this study, was used to obtain information about each counselor.

Definition of Terms

The terms guidance, counseling, guidance counselor and counseling role are defined to clarify their use in this study.

Arbuckle¹ gives the following definition for GUIDANCE:

"(1) Guidance refers to the process of putting into effect guidance and personnel services. It is action.
(2) Guidance refers to helping, assisting, and clarifying the problems of those who are disturbed.
(3) Guidance implies the understanding of human behavior so that preventive action may be taken with regard to problems and difficulties.
(4) Guidance concerns itself with the individual child."

Arbuckle² feels that COUNSELING is a part of GUIDANCE and that COUNSELING

"is viewed as an interaction between two people that enables the disturbed individual to come to the point where he can make choices and decisions that are rational and logical; it is an interaction that is basically verbal, and is emotional in nature; it is an interaction that

¹Arbuckle, Dugald, Guidance and Counseling in the Classroom, p. 6.

²Ibid., p. 133.
enables the individual to accept and to use information and advise, and to accept an unchangeable environment without being overcome by it. The complexity of the emotional disturbance requiring counseling must be such that it can be relieved only by the development of greater insight on the part of the client, and this insight is the result of the interaction between the counselor and the client."

Arbuckle further states that the term GUIDANCE COUNSELOR is "the name given to the individual who performs some of the various guidance services."

The following definition of ROLE that Benne suggests is the one that is used in this study. "Role means the cluster of functions that come to be expected of a given class of workers within positions that they typically occupy in the organizations or social systems in which they work." Therefore, the term COUNSELING ROLE is used to denote that the instructor has many roles and counseling students is one of these roles.

Sequence of Presentation

Chapter II presents the framework of the study. It includes a review of literature and a statement of hypothesis. Chapter III discusses the development of the tools used to

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3 Ibid., p. 6.

collect the data, the present program for counseling and guidance at the school, and the procurement of the data. Chapter IV includes a presentation and discussion of the data obtained. Chapter V is the summary, conclusions and recommendations.
CHAPTER II
FRAMEWORK OF THE STUDY

Review of Literature

In the past fifteen years several studies have been done relating to problems of students in schools of nursing. Dill,\(^1\) in 1946, did an analysis of personal problems of student nurses in four diploma schools of nursing in Massachusetts using the Morison Check List. Some of her conclusions were that the areas presenting the most problems were in social and recreational activities, health and physical development, finances and living conditions and then curriculum and school program. She found that students are willing to help administrators in organizing a better guidance and counseling service.

Schmitt,\(^2\) in 1948, used the Morison Check List on 715 affiliating students at the University of Pittsburgh as a part of a study of psychological problems of students. She, too, concluded that the area with the most problems was


\(^2\)Schmitt, Mary, A Curricular Study of Psychological Problems Encountered by Students in the Basic Professional Program in Nursing.
in social and recreational activities. She requested the students, staff and faculty members to fill in some "information sheets" describing psychological situations or problems. This information disclosed more problems relating to hospital situations. Group discussions with senior students regarding psychological problems revealed that the data on the "information sheets" was quite valid. Further she reviewed the records of 104 basic professional students enrolled at the University of Pittsburgh School of Nursing between 1940-45 and anecdotes on their records revealed that there were more psychological problems as the students progressed in the school.

In 1955, Howland used the Morison Check List and a questionnaire and found that second year students had the highest average number of problems. However she found that the first year students expressed greater willingness to discuss problems than the other classes and about 50 per cent of the students felt that counseling was valuable. Howland states in her summary that schools of nursing need to provide more time for the instructors to counsel students as many students considered their counselors too busy to disturb them.

3 Howland, Ellen D., "A Study To Determine The Opinions of Nursing Students Toward the Counseling Program In a Selected School of Nursing," Unpublished Master's Study, Boston University.
For several years leaders in nursing have become more aware of the need for an adequate guidance and counseling program in schools of nursing. Kelleher,\textsuperscript{4} in 1945, discovered that there was little information to guide schools of nursing in establishing or evaluating an effective guidance program. She developed a check list of practices recognized by educators as sound to determine criteria for evaluating guidance programs around five general areas: (1) "Learning" the student. (2) Informing the student. (3) Counseling service. (4) Placement activity and (5) Follow-up activity. She then selected outstanding leaders in nursing who represented administrators of guidance programs in schools of nursing, persons interested in guidance as evidenced by their contributions to the literature and members of one of the two Guidance Committees of the National League of Nursing Education. This group was sent the check list of criteria and from the consensus of their opinions she determined the desirability of various practices and revised her check list of criteria accordingly. Kelleher suggests that the criteria she established be used by schools of nursing for self-evaluation of their guidance programs and as a basis for an in-service program.

Nahm,\textsuperscript{5} in 1948, did a study of 428 senior students at twelve schools of nursing in Minnesota to determine their satisfactions with nursing and their understanding of mental hygiene principles. She used an adaptation of the Hoppock Job Satisfaction Scale to determine satisfactions of students with nursing in their particular situation in their particular school. She states that "it seems probable that satisfaction is dependent upon complicated interrelationships between actual conditions which are present in the environment and characteristics of individuals who make up a specific group."\textsuperscript{6} She then devised test items on mental hygiene and found that many senior students neglected to recognize the importance of home and family background in producing personality maladjustments. She found that 25 per cent were lacking in skills which are needed in helping others with their problems and in a basic understanding of human behavior. Nahm used the Minnesota Personality Scale to measure personal adjustment of the senior students. The findings of her study "indicate that, if selected objectives are to be achieved to an extent which would seem desirable, a number of changes need to be made in schools of nursing. Shorter hours of work are needed, as well as better health care of students, and improved social and recreational facilities. However, preparation of faculty members in schools of nursing should

\textsuperscript{5}Nahm, Helen, \textit{An Evaluation of Selected Schools of Nursing With Respect to Certain Educational Objectives}.

\textsuperscript{6}Ibid., p. 70.
receive more attention than any other item. This preparation should be designed to help prospective teachers, supervisors and administrators to develop an understanding of the principles of democracy and of mental hygiene, as well as skill in applying these principles in their day-by-day relationships with others. ...Better preparation of faculty members in these areas would do much to improve the human relationships in hospitals and schools of nursing."  

In 1947, Garrigan sent 175 graduate nurses in the Army Nurse Corps a questionnaire containing eighty-one questions relating to their personal and professional background, their opinions and attitudes toward life and their profession, their present position and future plans. The returns of this questionnaire indicated that many were dissatisfied with nursing and the need for a good guidance program in schools of nursing. Garrigan emphasized that the education of the faculty did not include preparation in guidance and she states that "within the nursing school, faculty members should be urged to obtain further preparation in the field of guidance at local universities." She further states that

"ideally a guidance program should serve as a 'preventive measure' that aims to foresee and avoid difficulties of an educational, vocational, personal or social nature; it should be a

7 Ibid., p. 76.
8 Garrigan, Mary Ann L., "Guidance In The School of Nursing: A Suggested In-Service Program For Faculty Members" Unpublished Master's Thesis, Boston University, 1947.
'sustaining device' to maintain, measure, and assure progress in growth, development, and accomplishment toward goals; it should be a 'curative' technique to help people to clarify and solve their problems, and an 'inspirational plan' that will help establish security, belongingness, a desire to participate, create mutual and self-respect, and help all of those concerned to develop a greater tolerance, understanding, and appreciation of people and life. 9

Garrigan suggests that faculties of schools of nursing use an in-service program whose general objective is

"to acquaint those concerned with the education of the student nurse with a working knowledge of guidance to prepare them to participate in planning, carrying out, and realizing the full value of guidance activities in a school of nursing." 10

The National League of Nursing Education11 in 1946 published a booklet aimed at assisting schools of nursing in developing their guidance programs. In this booklet emphasis is placed on the preparation of the instructors who are to do the guiding.

"A person undertaking participation in a guidance program cannot work successfully without a rather broad training in certain aspects of psychology. Those fields which deal with the growth, development, and adjustment of the personality are of particular importance. Narrowness of general education sometimes will limit in other ways the ability of certain members of a staff to learn or practice some of the necessary techniques."

9 Ibid., pp. 5-6.
10 Ibid., p. 43.
It is further stated that "the guidance program should be considered to be an integral part of the total program of the school."\textsuperscript{12} The NLNE, too, suggests an in-service program and the utilization of record forms to obtain valuable information for guiding and counseling students. The National League for Nursing now has Dr. Goldie Kaback on its staff as a consultant in guidance and counseling.

In 1938, a booklet published by the NLN and written by Dr. Kaback\textsuperscript{13} provides current information on guidance and counseling programs for schools of nursing. Dr. Kaback sent out questionnaires to faculty members and students in forty-eight schools of nursing, which are members of the Council of Member Agencies of the Department of Diploma and Associate Degree Programs of the National League for Nursing to determine the guidance services and counseling needs in schools of nursing. Kaback states that "faculty members who serve as advisors often have little time or the 'wrong' time allocated for counseling activities." She recommends that hospital schools of nursing employ full time counselors to organize and implement the guidance program.

"The increasing number of faculties in hospital schools of nursing which are trying to develop guidance and counseling services for their students establishes the fact that these services

\textsuperscript{12} Ibid. p. 55.

\textsuperscript{13} Kaback, Goldie, Guidance and Counseling Perspectives for Hospital Schools of Nursing, 1958.
are no longer peripheral or margin to the central purpose of nursing education."\textsuperscript{14}

Hatch\textsuperscript{15} states that the outcome of counseling to students is that "the influence of counseling should certainly be evident among the students in a school of nursing. Not only will a greater percentage of those who entered be among those graduating, but also research has indicated that the level of academic accomplishment will improve."

Triggs\textsuperscript{16} writes that "research in nursing education begins to indicate that first, through careful selection, and second, through carefully planned educational counseling and remedial work, student mortality can be reduced to a minimum." Further, if a student is withdrawing, Densford\textsuperscript{17} says that the school of nursing owes an obligation to the student to help her to go into some other work.

The evidence that has been presented indicates the value of a Guidance and Counseling program to help in reducing

\textsuperscript{14} Ibid., p. 83.

\textsuperscript{15} Hatch, Raymond N., "Do You Have Counseling or Confusion?" \textit{American Journal of Nursing} 54: 585, May, 1954.

\textsuperscript{16} Triggs, Frances C., \textit{Personnel Work In Schools of Nursing}, p. 41.

\textsuperscript{17} Densford, Katherine and Johnston, Ruth, "Guiding Practical and Professional Nursing Students," \textit{Nursing Outlook}, October, 1953.
attrition rates in the schools of nursing. With the expanding development of hospitals, especially with the help of the Hill-Burton Act, the need for qualified nurses is constantly increasing. The obligation of faculties of schools of nursing is to help prepare the number of nurses needed in a world with an expanding population and an increase in medical awareness. Lewis\textsuperscript{18} states that "in the last analysis, counseling is one of the best ways we can help hospitals nursing personnel learn to give better care to the patients."

Even though an instructor is designated as a counselor, it does not mean that the other personnel do not share in helping students with their problems. Students have contacts with many different types of personnel during their formative years in a school of nursing and Johnston\textsuperscript{19} says that

"to achieve the two primary goals of counseling—helping the person who is counseled to solve present problems as well as helping her to solve her problems better in the future—requires the participation of all who have contacts with students."

Whether the students are in the classroom or in the

\textsuperscript{18}Lewis, Garland K., "Counseling? or Criticizing?" The \textit{American Journal of Nursing}, 58: 1409, October, 1958.


ward areas, they need help in adjusting and Smith\textsuperscript{20} suggests that "one of the major purposes of a guidance program in a nursing school is to help the students adjust to the many aspects of a new experience." She uses a sociogram for group work among students and she feels that this helps instructors in assigning laboratory partners and ward assignments for students.

The teacher acting as a counselor is not found in the educational systems of our elementary and secondary schools as well as institutions of higher learning. Wicas\textsuperscript{21} says that "even though a professional counselor is available, the pupil may turn to his teacher for help." The teacher can assist the counselor by providing information about the student. Hamrin\textsuperscript{22} feels that the teacher in the classroom is invaluable in gaining observations about students. He states that

"it is also possible for a teacher to make valuable observations of class groups as well as of individuals. Like a good public speaker, the teacher can train himself to observe evidence of genuine interest or lack of interest on the part of his audience. Observation, furthermore, is a most useful method of studying some of the interpersonal relations among students and between the teacher and his students."


\textsuperscript{22} Hamrin, Shirley and Paulson, Blanche, Counseling Adolescents, p. 208.
Brown\textsuperscript{23} states,

"With or without a trained counselor and a set of guidance services at hand there is much in the area of guidance that can be done by the teacher. Indeed, even if a school is fortunate enough to have a counselor and a set of guidance services--the counselor cannot carry on a guidance program without the aid and cooperation of the teacher."

Teachers often feel frustrated because of the lack of time for counseling. Hutson\textsuperscript{24} suggests lessening the load of the teacher to allow more time for counseling.

Every school of nursing must develop its own counseling and guidance program. What may be best in one school will not necessarily meet the needs of the instructors and students in another school. Strang\textsuperscript{25} says,

"There is no one best guidance program for all situations. The best plans for each situation grows out of student needs, the personality and preparation of the staff, the financial resources of the school, and the characteristics of the community."


\textsuperscript{24} Hutson, Percival W., The Guidance Function in Education. p. 15.

\textsuperscript{25} Strang, Ruth, The Role of The Teacher In Personnel Work. p. 49.
Statement of Hypothesis

The literature reviewed indicates that students of nursing, like all students, had problems but because of the uniqueness of their learning experiences they had additional problems especially during the first year when their adjustment is the greatest. Although this indicates the need for counseling, instructors in nursing, because of lack of time and feelings of inadequacy to counsel, failed to meet this need. This study attempts to prove that these hypotheses are true in reference to X Hospital School of Nursing.
CHAPTER III
METHODOLOGY

Selection and Description of Sample

This study of the counseling role of thirteen instructors was done at X Hospital School of Nursing. The school of nursing is connected with a 365 bed modified-general Hospital located in a metropolitan city along the eastern seaboard.

The program of study at the school provides for formal classes and clinical experience in the home hospital for the students during the first and second years. Six months of the third year are spent at other hospitals studying Pediatric Nursing and Psychiatric Nursing.

There are 138 students enrolled in the school. The personnel employed for the school of nursing are thirteen full-time instructors, a part-time nutritionist, a librarian, a registrar, three housemothers, two secretaries, an Associate Director of Nursing Education and the Director of Nursing. The Health Director is also a part-time person for the school of nursing. The thirteen instructors serve as counselors for the students.

Present Counseling Program At The School

Prior to 1958, the assigning of students to instructors for counseling was done by the Associate Director of Nursing
Education. However, because the Associate Director was new in this position in September, 1958, the instructors in Fundamentals of Nursing and the Clinical Instructors in Medical-Surgical nursing did the assigning as a group project. The freshmen students were assigned alphabetically to the instructors. The counselors kept the upper-class students who had been assigned to them in the previous two years so that each had a total of eight to ten students. A new instructor "inherited" the counselees of the person she replaced.

When a new instructor applies for a faculty appointment she is informed of the counseling program by the Associate Director of Nursing Education. If the instructor to be employed has had little experience in teaching, she is given assistance in teaching and counseling by the Associate Director.

A personal and family data form is kept by the counselor for each student in an individual folder. All counseling sessions held with students are recorded on a plain sheet of paper which is also placed in this folder. Confidential material usually is not recorded.

The counselors meet all of their counselees in the fall. The only students with whom they confer regularly thereafter are freshmen, who are seen every nine weeks when grades are given.

Students usually call the counselor for an appointment. The counselors do not have any office hours, but their doors
are always "open".

The Associate Director of Nursing Education plays an important role in the over-all counseling program. Some of her activities include:

a. Acting as a consultant for instructors.
b. Helping instructors interpret information.
c. Helping in the formation of decisions relating to the program.
d. Referring of problems and referring of counselees to resource people.
e. Acting as liaison between instructors and other sources.
f. Reading books and articles in the field of guidance and counseling and having reference material available.
g. Acting as a sounding board for both students and instructors.

The faculty formed a Guidance Committee in the fall of 1958 to evaluate and revise the Guidance and Counseling program. In February, 1959, they began an in-service education program which included speakers in the field of Guidance and Counseling.

Tools Used to Collect Data

Review of the literature failed to uncover any forms or questionnaires that could be used to obtain information
about the counseling role of an instructor. Therefore a Counseling record form\(^1\) for the counselor to keep was devised to include data regarding the student's class in school, category of problem, outcome of counseling session, whether counseling was planned or unplanned, who initiated the counseling, the time spent, whether the conference was recorded and kept in the student's counseling folder and a brief note on the nature of the problem. The Directions for the Counseling Form\(^2\) included a definition of counseling and indicated that a check could be used in most instances to give the information requested for the study.

A questionnaire\(^3\) was devised to obtain the following information about the instructors: number of years as an instructor, number of years in present position, approximate working hours per week in the day by day activities of an instructor, courses taken that the instructor felt helped her most in her role as a counselor, the resources available to the instructor if she needs help in counseling, and the number of counselees in each class assigned to the counselor. A "yes or no" type questionnaire with space for comments was

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\(^1\) See Appendix page

\(^2\) See Appendix page

\(^3\) See Appendix page
included to elicit the feelings of the instructors toward counseling.

An interview with the Associate Director of Nursing Education\(^4\) provided information on the current guidance and counseling program at the school.

**Procurement of Data**

At a meeting that was held in January, 1959, to orient the faculty members to the study that was being conducted, each instructor was given a number to facilitate coding the information. All forms and questionnaires were thusly numbered. The instructors were requested to keep a record form for each student counseled during the month of January and first two weeks in February. This counseling form provided information for each counseling session. During the orientation an example of each of the categories of problems was presented as follows:

a. Social--student discouraged because she never goes out on dates.

b. Personal--family problems.

c. Professional--student having difficulties on wards or in classroom.

d. Legal--student wishes to change her name.

\(^4\)See Appendix page
The faculty discussed other examples of categories. The counselors were informed that they might find that more than one check in an area on the form was needed to present the data accurately.

At the end of the six-week period the instructors completed the questionnaire about themselves.
CHAPTER IV
FINDINGS

Presentation and Discussion of Data

Of the thirteen instructors participating in this exploration of the counseling role, eleven saw counselees during the six-week period of the study. The two instructors who did not see any students for counseling teach third year students in a clinical specialty and have nursing service responsibilities which utilize ten hours of each instructor's time every week. Thus they were not as accessible to the students as other instructors and this may account for the fact that they were not approached by their counselees.

One hundred students were seen by counselors during the six-week period. Of the total number, sixty-three were first year students, thirty were second year students and seven were third year students. As mentioned in Chapter III, students spend six months away from the school in the third year which might account for the small number of third year students seeking counseling. The first year students are advised to see their counselors at the end of each grading period and a grading period occurred during the six weeks that the study was being conducted. This undoubtedly is one reason for the large number of first year students.
The greatest number of student problems was in the professional category with a total of seventy-seven students being counseled as shown in Table 1. Of the fifty-three first year students presenting problems in this category, twenty-six saw their counselors as requested on their report cards. Nineteen of the twenty-six discussed only their grades and had no other problems. The remaining first year students presented problems relating to difficulty in ward adjustment, progress in nursing, make-up work, laboratory performance, conduct in the infirmary and job opportunities with a student who was leaving nursing. Nineteen second year students had problems in this category and ten of the counseling sessions were related to progress in and attitudes toward nursing. The other problems presented by the second year students were failing grades, death of a patient and interpersonal difficulties. The problems of the five third year students in this category were in relation to performance in nursing, a personality clash with a head nurse and information regarding graduation. It is interesting to note that eight students discussed plans for further education; three of these were first year students, two were second year students and three were third year students.

For the most part personal problems were related to boy friends and family situations. Since many of these problems were confidential, no further analysis could be made.
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The nature of the social problems was not disclosed. Little information was obtained regarding problems in the other categories. It is interesting to compare the results of this study with the studies done with students by Dill\textsuperscript{1} and Schmitt\textsuperscript{2} which revealed more problems in social and recreational activities, whereas this study of actual counseling showed more problems in the professional area.

In eighty-four sessions the counselor listened to the student, a fact which suggests a non-directive approach to counseling. However, in fifty-one conferences the counselors gave information, as can be seen in Table 2. In some of these cases it was indicated that the counselor had also listened. In thirty-four sessions counselors gave advice, but there were no sessions where only advice was given. The action taken on problems presented by each class of students was very similar for the type of problem presented.


\textsuperscript{2} Schmitt, Mary, A Curricular Study of Psychological Problems Encountered by Students in the Basic Professional Program in Nursing. p. 154.
TABLE 2
ACTION TAKEN BY INSTRUCTORS IN COUNSELING SESSIONS

<table>
<thead>
<tr>
<th>Class in School</th>
<th>Number of Students</th>
<th>Gave Information</th>
<th>Gave Advice</th>
<th>Listened</th>
<th>Another Visit</th>
<th>Settled Matter</th>
<th>Other</th>
<th>Referred Health Service</th>
<th>Other</th>
</tr>
</thead>
<tbody>
<tr>
<td>First Year</td>
<td>63</td>
<td>32</td>
<td>25</td>
<td>50</td>
<td>9</td>
<td>9</td>
<td>1</td>
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<tr>
<td>Second Year</td>
<td>30</td>
<td>15</td>
<td>8</td>
<td>28</td>
<td>9</td>
<td>6</td>
<td>5</td>
<td>2</td>
<td></td>
</tr>
<tr>
<td>Third Year</td>
<td>7</td>
<td>4</td>
<td>1</td>
<td>6</td>
<td>2</td>
<td>2</td>
<td>2</td>
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<tr>
<td>Total</td>
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<td>20</td>
<td>17</td>
<td>8</td>
<td>3</td>
<td>1</td>
</tr>
</tbody>
</table>
Table 3 shows who initiated the counseling sessions. The first year students initiated the counseling in almost two-thirds of the sessions, whereas the second and third year students initiated the conference about the same number of times as did the instructor.

In all three classes there were more counseling conferences by appointment than in unplanned meetings as indicated in Table 4.

The amount of time spent in counseling sessions ranged from five to ninety minutes with an average of thirty minutes per conference. Personal problems required the longer sessions, and were present in equal numbers among the classes. In most instances the counseling sessions with the students were recorded by the counselors and the information was filed in the student's counseling folder.

Eight of the thirteen instructors spent more than forty hours per week in their day-by-day activities as shown in Table 5. The most time allotted by any instructor for counseling was four hours per week and only one instructor spent that amount of time. The average hours per week spent by the instructors for counseling was 1.30. Supervising students in the clinical area, administration, teaching in the classroom and attending committee meetings, in that order, accounted for the greatest amount of the instructors' time. The two instructors who saw no counselees during the six-week period only allow fifteen and thirty minutes respectively of
TABLE 3
WHO INITIATED COUNSELING SESSION--STUDENT OR INSTRUCTOR

<table>
<thead>
<tr>
<th>Class in School</th>
<th>Student</th>
<th>Instructor</th>
<th>Total</th>
</tr>
</thead>
<tbody>
<tr>
<td>First Year</td>
<td>46</td>
<td>17</td>
<td>63</td>
</tr>
<tr>
<td>Second Year</td>
<td>15</td>
<td>15</td>
<td>30</td>
</tr>
<tr>
<td>Third Year</td>
<td>3</td>
<td>4</td>
<td>7</td>
</tr>
<tr>
<td>Total</td>
<td>64</td>
<td>36</td>
<td>100</td>
</tr>
</tbody>
</table>

TABLE 4
NUMBER OF COUNSELING SESSIONS WHICH WERE PLANNED OR NOT PLANNED

<table>
<thead>
<tr>
<th>Class in School</th>
<th>Planned</th>
<th>Not Planned</th>
<th>Not Indicated</th>
<th>Total</th>
</tr>
</thead>
<tbody>
<tr>
<td>First Year</td>
<td>36</td>
<td>26</td>
<td>1</td>
<td>63</td>
</tr>
<tr>
<td>Second Year</td>
<td>16</td>
<td>11</td>
<td>3</td>
<td>30</td>
</tr>
<tr>
<td>Third Year</td>
<td>5</td>
<td>2</td>
<td>4</td>
<td>7</td>
</tr>
<tr>
<td>Total</td>
<td>57</td>
<td>39</td>
<td>4</td>
<td>100</td>
</tr>
<tr>
<td>Instructor</td>
<td>Number of Students Counseled</td>
<td>Teaching in Classroom</td>
<td>Supervising in Clinical Area</td>
<td>Administration</td>
</tr>
<tr>
<td>------------</td>
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<td>-------------------------------</td>
<td>----------------</td>
</tr>
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<tr>
<td>13</td>
<td>7</td>
<td>8</td>
<td>18</td>
<td>2</td>
</tr>
</tbody>
</table>

*Students counseled During Six-Week Period of the Study.*
their total week for counseling. One instructor has thirty hours of her total work week unaccounted for and yet allows only fifteen minutes each week for counseling students.

An analysis of the questionnaire filled in by the instructors revealed that the instructors had been teaching one to ten years and had been employed in their present positions one to five years. It is significant to note in Figure 1 that the more experienced instructors allow more time for counseling than do the less experienced instructors. Seven of the instructors have had teaching experience only in their present positions.

The courses that have been most helpful to the instructors in their role as counselor have been Interpersonal Relations and Principles of Guidance. All of the courses listed by the instructors that have been helpful to them can be seen in Table 6. One instructor indicated that she had taken no courses that she felt were helpful to her in counseling students.

The resources available if the instructor needs help in counseling are presented in Table 7. It is significant that few instructors are aware of resources available to them. Only one instructor listed five resources available to her and the other instructors listed fewer than five. Two instructors indicated that they knew of no resources that would be available to them if they needed help. The most common
Years as Instructor

Years in Present Position

Hours Allotted for Counseling

Figure I

Years as Instructor, Years in Present Position and Hours Allotted for Counseling Students by Thirteen Nursing Instructors
TABLE 6
COURSES WHICH AIDED INSTRUCTORS IN COUNSELING ROLE

<table>
<thead>
<tr>
<th>Courses</th>
<th>Number of Instructors</th>
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<tbody>
<tr>
<td>Interpersonal Relations</td>
<td>5</td>
</tr>
<tr>
<td>Principles of Guidance</td>
<td>4</td>
</tr>
<tr>
<td>Counseling Techniques and Theory</td>
<td>3</td>
</tr>
<tr>
<td>Psychology</td>
<td>2</td>
</tr>
<tr>
<td>Tests and Measurements</td>
<td>2</td>
</tr>
<tr>
<td>Experimental Course in Psychiatry</td>
<td>2</td>
</tr>
<tr>
<td>Nursing in Child Psychiatry</td>
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<tr>
<td>Practice Teaching (Group Dynamics)</td>
<td>1</td>
</tr>
<tr>
<td>Human Relations Seminar</td>
<td>1</td>
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<td>Advisors at College</td>
<td>1</td>
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<tr>
<td>Philosophy</td>
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<td>Religion</td>
<td>1</td>
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<tr>
<td>Principles of Teaching and Guidance</td>
<td>1</td>
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<tr>
<td>of Learning Activities</td>
<td></td>
</tr>
</tbody>
</table>
TABLE 7
RESOURCES AVAILABLE TO AID INSTRUCTORS IN COUNSELING

<table>
<thead>
<tr>
<th>Instructor's Number</th>
<th>Other Faculty Members</th>
<th>Associate Director of Nursing Education</th>
<th>Library Books</th>
<th>Director of Nursing</th>
<th>Pamphlets</th>
<th>Audio-Visual Aids</th>
<th>People Outside Hospital in the Field</th>
<th>Associates in Obs.</th>
<th>Health Service</th>
<th>Husband</th>
<th>Psychiatrists</th>
<th>Clergy</th>
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<td>13</td>
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<td>8</td>
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<td>3</td>
<td>1</td>
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<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td>30</td>
</tr>
</tbody>
</table>
resources listed were other faculty members and the Associate Director of Nursing Education.

The feelings of the instructors towards counseling were recorded on a "Yes-No" questionnaire as represented in Table 8. It is interesting that one of the two instructors who indicated that she did not like counseling was one of the instructors who saw no counselees during the period that the study was being conducted. The comments which were recorded were most revealing. Lack of adequate time for counseling was mentioned by several instructors. Three instructors commented that students realize the busy schedule they have and sometimes the student has to wait two to three days to see her counselor. Three instructors felt that the nursing instructor should be concerned with all kinds of problems but should know when to refer students. Two instructors wrote that some problems were beyond their scope to handle and one indicated that handling all kinds of problems made for possible difficulties in the instructor's role and her relationship with students. Five instructors felt that students would come to them with more problems if they weren't an instructor. The two instructors who teach third year students indicated that students seem to come to see them more readily after they have been in the clinical area where they teach. Only two instructors felt that counseling should not be considered a part of the role of an instructor. One of these instructors stated
## TABLE 8

### INSTRUCTORS FEELINGS TOWARD COUNSELING

<table>
<thead>
<tr>
<th>Question</th>
<th>No Answer</th>
<th>Yes</th>
<th>Comments</th>
</tr>
</thead>
<tbody>
<tr>
<td>Do you like counseling?</td>
<td></td>
<td>11</td>
<td>2</td>
</tr>
<tr>
<td>Do you consider counseling a part of the role of an instructor?</td>
<td></td>
<td>11</td>
<td>2</td>
</tr>
<tr>
<td>Do you feel that students would come to you with more problems if you weren't an instructor?</td>
<td>1</td>
<td>5</td>
<td>7</td>
</tr>
<tr>
<td>Do you feel that there should be a plan for students to change counselors?</td>
<td>1</td>
<td>11</td>
<td>1</td>
</tr>
<tr>
<td>Does your teaching schedule allow for convenient times for the students to come to see you?</td>
<td></td>
<td>5</td>
<td>8</td>
</tr>
<tr>
<td>Do you feel that a nursing instructor as a counselor should be concerned with all kinds of problems?</td>
<td>5</td>
<td>8</td>
<td></td>
</tr>
</tbody>
</table>
that she didn't have time to make counseling meaningful. One instructor felt that students should not be allowed to change counselors. One instructor commented that instructors should also be able to change counselees and another wrote that she didn't feel that students should be assigned to an instructor, but should be allowed to choose her own counselor.
CHAPTER V

SUMMARY, CONCLUSIONS AND RECOMMENDATIONS

This study was an exploration of the counseling role of thirteen instructors in X School of Nursing located in a Metropolitan city on the eastern seaboard. It was undertaken primarily to enable the faculty to strengthen its counseling and guidance program. Review of the literature indicated that students in schools of nursing need counseling and the instructors, who assume the role of part-time counselors, frequently do not have adequate time for counseling because of their many teaching functions.

The study was conducted over a six-week period in January and February, 1959. Forms for the instructors to use for each counseling conference and a questionnaire to obtain information about the amount of time spent in day-by-day activities of the counselor and her feelings toward counseling were devised for this study.

Summary of Findings

The findings of this study are:

1. More first year students were counseled than were second or third year students.

2. The greatest number of problems presented by the students was in the professional category relating to grades and nursing performance.
3. Of all the techniques employed by counselors, that of listening and giving information were used most consistently.

4. Counseling sessions were initiated more often by first year students, than by either second or third year students.

5. The amount of time actually spent by the instructors in counseling students ranged from five to ninety minutes with an average of thirty minutes per session.

6. Eight of the thirteen instructors spend more than forty hours per week in their day-by-day activities.

7. The average number of hours allotted by the instructors for counseling each week was 1.30.

8. The more experienced instructor tends to allot more time for counseling than does the less experienced teacher.

9. Three of the instructors have had courses in Counseling and four have had courses in Guidance.

10. Few resources were listed as being available to the instructor if she needs help in counseling. The resources listed by the largest number of instructors were the Associate Director of Nursing Education and other faculty members.

11. Eleven of the thirteen instructors like counseling
and consider it to be a part of the role of an instructor.

12. Five instructors felt that students preferred to seek help with their problems from someone other than the instructor, who would be evaluating their nursing performance and grading them.

13. Several instructors mentioned the lack of adequate time for counseling and felt that students are aware of this.

14. Two instructors wrote that some problems were beyond their scope to handle and one indicated that handling all kinds of problems made for possible instructor-student difficulties.

Conclusions

The data provided evidence to support the hypotheses made in Chapter II.

1. Instructors are able to spend little time in counseling students due to the heavy schedule of activities.

2. Second and third year students are not benefitting from the counseling program as much as are the first year students.

Further conclusions that can be made are:

1. The instructors are unaware of resources that could be available to them to help them with
counseling.

2. Faculty members do not seem to be educationally prepared for the role of counselor although they feel that this should be a part of the teaching activities.

3. The focus of the counseling program in X Hospital School of Nursing appears to be on educational achievement rather than on all the needs of the student.

Recommendations

On the basis of this study the following recommendations are being made to the Administration and Faculty at X Hospital School of Nursing:

1. That the in-service program on Guidance started for the faculty in February, 1959 be continued throughout the next school year and include such counseling aids as role playing, case study methods and interpersonal relationships.

2. If all student needs are to be met, a plan must be devised for counseling students with all kinds of problems in all classes in the school.

3. Some effort should be made to acquaint all faculty with the resources that are available to aid them in counseling.
4. An evaluation should be made of the time spent in day-by-day activities of the instructors in an attempt to provide more time for counseling students.

5. That administration consider the possibility of appointing a full-time trained counselor to the faculty. This person could coordinate and organize the guidance program with the help of the faculty.

6. That in assigning counselees to instructors consideration be given to teaching experience and tenure in present position.

7. That new instructors be assigned a minimum number of counselees to allow them time to adjust to their teaching activities and to their new environment.

8. That the two instructors who also have nursing service responsibilities either be relieved of these responsibilities or not be assigned any counselees.

9. That instructors designate regular office hours during which they will be available to the students.

10. That students be allowed to change counselors and that counselors be allowed to change counselees.
11. That a study be conducted to determine the problems that the students feel they have and their feelings toward the counseling program.
BIBLIOGRAPHY


Garrigan, Mary Ann L., "Guidance In The School of Nursing: A Suggested In-Service Program For Faculty Members," Unpublished Master's thesis, Boston University, Boston, 1947.


APPENDIX
INTERVIEW WITH ASSOCIATE DIRECTOR OF NURSING EDUCATION REGARDING PRESENT COUNSELING PROGRAM

1. Who assigns counselees?

2. How many counselees are assigned to each instructor?

3. Are all of the instructors counselors?

4. How are instructors oriented to the counseling program?

5. Are there any special records that are kept for counseling?

6. Do the instructors have any office hours?

7. How do they arrange to see their counselees?

8. What is the role of the Associate Director of Education in the counseling program?
9. Are counselors required to see students at any particular intervals?

10. Has there been or is there now any inservice education re counseling?

11. How many students in the school?

12. How many instructors in the school?

13. What is the relationship between the Health Service and the counseling program of the school of nursing?

14. Are there any current studies re counseling going on at the present time? If so, what are they?
DIRECTIONS FOR COUNSELING FORMS FOR INSTRUCTORS

1. Definition of Counseling--from Arbuckle. "Counseling is viewed as an interaction between two people that enables the disturbed individual to come to the point where he can make choices and decisions that are rational and logical: it is an interaction that is basically verbal, and is emotional in nature; it is an interaction that enables the individual to accept and to use information and advice, and to accept an unchangeable environment without being overcome by it. The complexity of the emotional disturbance requiring counseling must be such that it can be relieved only by the development of greater insight on the part of the client, and this insight is the result of the interaction between the counselor and the client."

2. Please fill in a form for each student who comes to see you.

3. Please place a check under each group of headings.

4. Please keep these records for the next six weeks.

5. The number on your forms should be included on any forms that you should use which are not numbered.

6. If you have any questions which may arise, you can contact me at 07-5664.

Thank you for your cooperation,

Faye Clark
**Counselling Form for Instructors**

<table>
<thead>
<tr>
<th>Class in School</th>
<th>Category of Problem</th>
<th>Action Taken</th>
<th>Who Initiated Meeting?</th>
<th>Date</th>
</tr>
</thead>
<tbody>
<tr>
<td>1st year</td>
<td>Social</td>
<td>Gave information</td>
<td>Student</td>
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</tr>
<tr>
<td>2nd year</td>
<td>Personal</td>
<td>Gave advice</td>
<td>Instructor</td>
<td></td>
</tr>
<tr>
<td>3rd year</td>
<td>Professional</td>
<td>Listened</td>
<td></td>
<td></td>
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<td>Settled matter</td>
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**Brief Notes on Nature of the Problem:**
QUESTIONNAIRE REGARDING COUNSELING

PLEASE ANSWER THE FOLLOWING QUESTIONS.

1. How many years have you been an instructor?

2. How many years have you been employed in your present position?

3. How many working hours per week (approximate) do you spend in each of the following?
   a. Teaching in the classroom
   b. Supervising students in the clinical area
   c. Administration
   d. Preparation for classes
   e. Counseling students
   f. Recording conferences with students
   g. Attending faculty meetings
   h. Attending committee meetings
   i. Other (Please specify)

4. List the courses you have taken that have been most helpful to you in your role as a counselor.

5. List the resources that are available to you if you need help in your role as a counselor.
6. How many counselees do you have assigned to you? ______
   1st year_____, 2nd year_____, 3rd year_____

ANSWER YES OR NO TO THE FOLLOWING QUESTIONS BY PLACING A CHECK IN THE APPROPRIATE BOX. PLEASE ADD ANY COMMENTS THAT YOU MAY HAVE:

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1. Do you like counseling?

2. Do you consider counseling a part of the role of an instructor?

3. Do you feel that students would come to you with more problems if you weren't an instructor?

4. Do you feel that there should be a plan for students to change counselors?

5. Does your teaching schedule allow for convenient times for the students to come to see you?

6. Do you feel that a nursing instructor as a counselor should be concerned with all kinds of problems?