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How do a group of prenursing students and a group of second-year nursing students differ in their concept of the functions of the professional nurse?

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HOW DO A GROUP OF PRENURSING STUDENTS AND A GROUP OF SECOND-YEAR NURSING STUDENTS DIFFER IN THEIR CONCEPT OF THE FUNCTIONS OF THE PROFESSIONAL NURSE?

By

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(A.B., University of Vermont, 1948)

A field study submitted in partial fulfillment of the requirements for the Degree of Master of Science in the School of Nursing Boston University August, 1960

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CHAPTER I
INTRODUCTION

During the years of the writer's experience with nursing students, she was aware of some students' deep dissatisfaction with their nursing experiences. Much of this dissatisfaction appeared to be related to nursing experiences which differed to a marked degree from the student's preconceived idea of the activities in which she would be engaged as a professional nursing student.

The high school student who is considering nursing as a career is beset with information, from both professional and lay sources, which stresses the function of the nurse as a comforter and as a technician, but which gives very little information concerning what the professional nurse actually does. Therefore, the writer believed that the high school student was entering nursing with a distorted concept of the functions of the professional nurse. This belief was supported by a study which revealed that ninety-three per cent of nursing students in the group studied derived their career information from infrequent hospital visits or from
fiction and television. It was the opinion of the authors that conflict and confusion during the early months in nursing school were a direct result of this factor.

The student who anticipates a career in nursing is at a distinct disadvantage when compared with her fellow students who are planning to enter teaching or the business world. Those with a career goal of teaching have had direct contact with educational institutions and with teachers for over a decade; those entering the business world know, through the acquisition of skills in their school years, the skills demanded of the beginning secretary or bookkeeper. However, the functions of hospital personnel, at work behind brick walls from which all but the patient and his family are excluded, remain an enigma even to much of the adult population. Indeed, the very atmosphere of mystery and glamour may be instrumental in attracting some students to the profession. Kibrick found that students who withdrew from nursing

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1 Thomas Williams and Margaret Williams, "The Socialization of the Student Nurse," Nursing Research, 8 (Winter, 1959), 21.

were often not realistic in their appraisal of nursing and had entered with such a goal as the finding of "glamour and excitement."

On this basis, the writer was led to believe that there is a marked difference in concepts of the functions of the professional nurse between the prenursing student and the second-year nursing student.

STATEMENT OF PROBLEM

The purpose of this study was to determine how a group of prenursing students and a group of second-year nursing students differed in their concept of the functions of the professional nurse.

JUSTIFICATION OF THE STUDY

The problem was of particular significance at the time of the study. Nursing leaders have become increasingly concerned about the high percentage of student withdrawals from nursing schools. National figures indicate that, since the class of 1945, the attrition rate has not fallen below thirty per cent. The class of

1957 lost thirty-two per cent of its members prior to graduation. While scholastic difficulties, marriage and other factors take their toll, it was the writer's belief that disillusionment with nursing accounted for a significant percentage of the withdrawals. This appeared to be supported by Kibrick's study where dislike for nursing was given as a cause for withdrawal throughout the six months of the study and was the biggest cause of withdrawals during the first three months. Scholastic failure and poor social adjustment did not begin to appear until the third month.

Dissatisfaction with nursing is not limited to first-year students. Nahm found a sharp decrease in satisfaction with nursing as students progressed from the freshman to the junior year. Admittedly, there are many factors to be considered here: Nahm, in a succeeding study, concluded that there was an association between

4 Ibid.

5 Kibrick, op. cit., p. 197.


changes in the total environmental situation in the school of nursing (addition of counseling service, better recreational facilities) and the extent of satisfaction with nursing. She did not explore the possibility that some of these students might have entered the school of nursing with a distorted concept of nursing functions and, while not a part of attrition statistics, they became progressively more disillusioned during the course of their nursing experience.

This writer hoped that exploration of the difference in concepts of nursing functions held by prenursing students and second-year nursing students would provide additional insight into this area. A wide difference in concepts of nursing functions between these two groups might indicate re-evaluation of present recruitment methods with particular attention to information now given concerning nursing functions.

SCOPE AND LIMITATIONS

The writer believed that the study would be of greater value to her if it were done in an area with which she was familiar and to which she planned to return as an instructor. She, therefore, selected for the study students from the Mary Fletcher Hospital School of Nursing
in Burlington, a Vermont community of approximately 35,000 persons. The Mary Fletcher Hospital School of Nursing, with a total enrollment of 105 students, is the only nonsectarian, fully accredited, diploma school of nursing in Vermont. It is fully accredited by the National League for Nursing and by the Vermont Board of Registration of Nurses.

The second-year nursing class at Mary Fletcher Hospital School of Nursing had an enrollment of thirty-six students, of whom ten were available at the time of the study. These students had been in the nursing program for twenty months and had completed all formal classes in Medical-Surgical Nursing. Nine of the ten students selected for study were having classes and clinical experience in Obstetrical Nursing. One student was having experience on a medical-surgical unit.

The high school students who were participants in the study were members of the senior classes of two central Vermont high schools, located seven miles apart and in two different communities. Each school had an enrollment of approximately 600 students. The writer had hoped to confine the participating students to those planning to enter a diploma program in nursing the following September. Due to limited numbers of prenursing students in the schools selected, it was necessary to
include a few students who had not made a definite decision concerning a diploma or degree program. This is believed by the writer to be a major limitation of the study. Students considering a degree program in nursing might differ in their concept of functions of the professional nurse from students interested in a diploma program.

High school students who had had experience as hospital aides or who had participated in Future Nurses' Clubs were excluded from the study. There was no attempt to eliminate students who had relatives in nursing or those who had been hospital patients; these students might be expected to have a better concept of nursing functions than prenursing students without such experiences.

Other limitations were encountered. The students selected were from three communities and from a single geographic area. Further, the concepts of only ten high school students and ten prenursing students were studied. The size of the sample was determined by the number of second-year nursing students and prenursing students available in the area and in the period of time available for completion of the study.

The questionnaire constructed by the writer consisted of thirty functions, selected from the large number of possible nursing functions. In order that each item might be understood by the prenursing student,
non-technical terms were used which might have been less acceptable to the nursing student.

At one of the high schools, the Guidance Director preferred, for reasons of time and convenience, to administer the questionnaire to the students. The writer believed that her lack of contact with these seven students might have had some effect on the study results.

**DEFINITION OF TERMS**

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

1. **Prenursing student:** a high school senior who plans to enter a basic program in professional nursing.

2. **Second-year nursing student:** a student who has been in a three-year diploma program in professional nursing for twenty months.

3. **Professional nurse:** a registered nurse who is a graduate of a basic program in professional nursing.

**PREVIEW OF METHODOLOGY**

A single questionnaire composed of thirty items was prepared for administration to both groups of students.
The questionnaire was administered by the writer to two high school juniors interested in a nursing career and to two second-year nursing students from a small Vermont school of nursing. This preliminary testing was carried out to determine whether the test items were understandable to both groups of students. No adjustments in the questionnaire were necessary.

The Director of the School of Nursing at Mary Fletcher Hospital was contacted and an appointment arranged at which time permission was given for the study to be done at Mary Fletcher Hospital School of Nursing. The Director arranged an appointment for the following week at which time the writer met with the ten students selected from the second-year class and administered the questionnaire. The time taken by the students to complete the questionnaire was ten minutes. The questionnaires were then collected.

The Guidance Director at High School A was contacted personally by the writer. Because of graduation activities and a full schedule, he requested that the questionnaire be left with him for administration to the students in groups of two or three. This was done and seven completed questionnaires were obtained one week later. Because questionnaires completed by ten prenursing students were necessary for the study, the Guidance
Director of High School B was contacted and permission obtained to administer the questionnaire to three students from the senior class of that school. These students were chosen by the Guidance Director on the basis of their availability. The writer administered the questionnaire to the three students as a group.

SEQUENCE OF PRESENTATION

Chapter two presents a review of pertinent literature. Methodology of the study is given in Chapter three. This is followed by presentation and analysis of the data in Chapter four. Chapter five consists of the summary, the conclusions drawn and recommendations made as a result of the study.
CHAPTER II
THEORETICAL FRAMEWORK OF THE STUDY

REVIEW OF LITERATURE

With the growing concern with attrition rates in schools of nursing, it is not surprising that attention is being focused upon factors which may cause disappointment and disillusionment in the young nursing student with subsequent withdrawal from the school of nursing. From a review of the literature, however, it appeared that to date little attention has been given to misconceptions of the functions of the professional nurse held by the prenursing student. Rather, emphasis upon research in this phase of attrition has been upon the effect of forced change in role concept and upon factors in the educational program or physical environment of the school. Relatively little material was available concerning what the prenursing student sees as functions of the professional nurse and how her concept of these functions influences her adjustment in the school of nursing.

The prenursing student is a part of the lay public and, therefore, shares to a considerable degree the
concepts and beliefs held by the public. A study dealing with public images of the nurse indicates confusion concerning the functions and duties of the professional nurse.\(^1\) Frequent references were made to the similarity of the professional nurse's duties to those of the physician. It appears that two extreme polar images of the professional nurse are held by the public: "a nice girl who sits with sick people"\(^2\) or "a lady with a lamp"\(^3\) and, on the other hand, the starched and efficient technician. The results of this study, therefore, appeared to support the present writer's belief that prenursing students perceive nursing activities in terms of very simple or very complex functions.

That prenursing students do share with the public stereotyped ideas concerning nurses and nursing was brought out in a recent study dealing with socialization of nursing students. The authors found that the cultural backgrounds of nursing students in their study resulted in cultural norms which blocked the student from

\(^1\) Public Images of the Nurse ("A Study of the Registered Nurse in A Metropolitan Community," Part II; Kansas City, Mo.: Community Studies Inc., 1955).

\(^2\) Ibid., p. 51.

\(^3\) Ibid.
"a general participation in or consideration of the type of activity a bedside nurse must face as a part of her work routine."\(^4\) The impressions of the students about nurses and nursing appeared to be "stereotyped ideas apparently held about nursing by the larger society"\(^5\) and strongly service and science centered. The authors concluded that "most students came to nursing with ideas and expectations that were markedly different from those manifestly necessary for daily nursing activities."\(^6\)

While Williams and Williams placed emphasis upon cultural factors influencing satisfaction in nursing, the findings of the study would appear to support this writer's belief that prenursing students are not aware of the actual functions of the professional nurse.

Kibrick was concerned with the thirty per cent of nursing students who do not complete their nursing course. She cited dislike for nursing and disappointment in the nursing course as factors in attrition. While her study was concerned with role perception rather than with

\(^4\)Williams and Williams, op. cit., p. 21.

\(^5\)Ibid.

\(^6\)Ibid.
concept of function, still there is a relationship between the two. According to Kibrick, "the aspects of motivation found to be significant were the realism of the expectations of the student, the source of her information about nursing and whether she had considered related glamorous occupations before entering nursing." 7 Relating to functions, Kibrick noted that some students enter nursing with highly idealized concepts of nursing and then find "that in addition to teaching and gentle ministrations to the patients, nurses also carry bedpans, clean utility rooms and give enemas." 8

Kumpan, 9 studying satisfactions and dissatisfactions among nursing students and graduate nurses, recommended further research in the area of satisfactions and dissatisfactions of nursing students. She found that five per cent of student withdrawals in her study were due to dissatisfaction with nursing.

Nursing is probably not the only profession whose applicants enter lacking accurate information concerning

7 Kibrick, op. cit., p. 188.
8 Ibid., p. 84.
9 Helen Kumpan, "A Comparison Study of Satisfactions and Dissatisfactions Between Student and Graduate Nurses" (unpublished M. Ed. dissertation, School of Education, Boston University, 1958).
duties and functions. Ross\textsuperscript{10} quotes sources to prove that high school students in the United States make occupational choices with very little knowledge of occupations. A study done on attrition among engineering students revealed an attrition rate of about fifty-six per cent.\textsuperscript{11} Six per cent of voluntary withdrawals were due to dislike for engineering; the present writer considered also that some percentage of the forty-six per cent who withdrew to change curricula might have been a result of dissatisfaction with engineering. Students considering a career in engineering share with prenursing students an isolation from early contact and experience in the field. In contrast, attrition rates among medical and dental students, who might be expected to have had more direct contact with professional duties, are from ten to fifteen per cent.\textsuperscript{12} Armsby concluded his study of attrition in engineering schools with recommendations for improved


\textsuperscript{11}Henry Armsby, "Graduation and Withdrawal Ratios for Engineering Students," \textit{Higher Education}, 10 (November, 1953), 45-47.

\textsuperscript{12}Margaret West and Christy Hawkins, \textit{Nursing Schools at the Mid-Century} (New York: National Committee for the Improvement of Nursing Service, 1950), p. 54.
programs of selection and counseling.

Egan,\(^{13}\) studying attrition in the first year of nursing school, found that a major factor was dislike for nursing, given as a reason by twenty-two of thirty-seven students withdrawing. Students with experience as hospital aides tended to complete the course. She suggested that careful evaluation of recruitment programs should be made to determine whether students were obtaining information from reliable sources which presented factual and unbiased data.

A review of recruitment literature supported Egan's conclusion and also validated this writer's belief that recruitment literature either offers little information concerning nursing functions or presents nursing functions which are appealing to the high school student because of their stress upon "giving comfort" or "assisting the doctor." Functions considered to be the most glamorous appear to be emphasized. Such information leaves the student considering a nursing career with a faulty concept of nursing functions.

\(^{13}\)Shirley Egan, "A Study of the Relationship Between Factors of Social Background and Withdrawals During the First Year in a Selected School of Nursing" (unpublished Master's thesis, School of Nursing, Boston University, 1957).
Arbuckle, discussing the unrealistic light in which children view many occupations, told of a young woman whose interest in nursing was very much influenced by "the Florence Nightingale legend and by the glowing propaganda put out by schools of nursing." Her experience as a nurse's aide effected a rapid change in her career goal.

A pamphlet published to stimulate interest in nursing as a career appears to emphasize the nurse's role as the doctor's assistant. Statements such as "this baby's life depends. . . . upon the knowledge, judgment and skill not only of his doctor but also of [the nurse]" and "she doesn't practice medicine, of course, but she's the doctor's co-worker in all kinds of technical procedures and his delegate in his absence" would tend to suggest to the prenursing student that she will be performing very complex functions similar to those performed by the physician.

Current recruitment practices, reported in several issues of a national magazine, appeared to support


the belief that inadequate information concerning nursing functions is presented to the high school student who is interested in nursing. One recruitment program reported was described as covering the subject of nursing "in all aspects--the status of the nurse in the community, the careers open to her, marriage prospects and her personal satisfaction in giving service." There was no suggestion of nursing activities and functions but, rather, stress upon status and marriage prospects. Another project in recruitment featured representatives of supply houses discussing and demonstrating intravenous and oxygen therapy as well as a discussion of clinical specialties by persons in those areas. Still another program reported was highlighted by the selection of Miss Student Nurse of the Year. Over some objections that the glamour of the nursing profession was being overemphasized, Miss Student Nurse addressed prenursing students throughout the state. The twenty per cent rise in nursing school

16 Helen Adams, "A Woman's Board Taps Community Resources," Hospitals, 28 (February, 1954), 73.

17 Emil Stahlhut, "Nursing Careers Previewed at Teen-Agers' Institute," Hospitals, 26 (February, 1952), 66.

enrollments which occurred in this state the following year was attributed partly to this recruitment program.

The writer believed that too often recruitment for nursing consists of information concerning qualifications for admission, description of programs and career opportunities, rather than factual information concerning what the student may expect to do as a nursing student. In support of this belief were the instructions given in a manual prepared for recruiters. The embryo speaker is told that every speech should include "information regarding qualifications for nursing, opportunities in nursing, selection of a good school and availability of scholarships and loan funds."\(^\text{19}\)

Another recent pamphlet about nursing careers reviews the historical background of nursing, discusses how to choose a school, gives personal and scholastic requirements for entrance, lists types of schools and then goes on to a discussion of scholarships and career opportunities in nursing.\(^\text{20}\)


\(^{20}\)Cecilia Schulz, "Nursing," American Journal of Nursing, 58 (September, 1958), 1230.
Some persons involved in recruiting for nursing apparently do make an effort to present a realistic picture to the prenursing student. One community reported a recruitment program where "bedside nursing as a romantic idea gave way to a more reasonable and intellectual concept." Activities discussed, however, were listed as dissection of a human heart, demonstration of an electrocardiogram, discussion of the physiology of the heart and an analysis of classical methods of treatment of heart disease.

Such techniques of recruitment, along with mass media, emphasize the nurse's function as comforter and technician. There is little or no opportunity provided for the prenursing student to familiarize herself with the many daily functions of the professional nurse which fall somewhere between the very simple and the extremely complex.

Kaback, discussing guidance and counseling in schools of nursing, emphasizes the need for guidance for

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the student prior to her entrance into a school of nursing. She speaks of inaccurate concepts which may result in later dissatisfaction with nursing. A preadmission interview, Kaback believes, may reveal that the prospective student knows very little about the work of the professional nurse.

In another article, Kaback\textsuperscript{23} suggests that preadmission interviews should present a realistic picture of both classroom routines and care of patients. She believes that dissatisfaction among nursing students frequently reflects inadequate admission policies.

McPartland\textsuperscript{24} presents an excellent study of changes in concept held by students in schools of nursing. The term "reality shock" was felt to be applicable here to the revision of idealized conceptions, made necessary by direct experience with the work of the occupation. Such revision in the direction of the realities of the situation causes considerable trauma to the student. This study pointed up the shift of emphasis from the idealization of the nurse held by the freshman student to the


perception of the nurse in task-centered terms, typical of the senior. The investigators found that senior students referred to their attraction to nursing in terms of glamour and this was felt to suggest that seniors felt that their reasons for entering nursing were unrealistic.

Review of the literature provided basis for belief that dislike for nursing is an important factor in attrition; that present recruitment practices provide the prenursing student with little information concerning nursing functions and that such information often stresses functions which might be considered glamorous; and that students in a nursing school may feel that their reasons for entrance into the school of nursing were unrealistic.

**STATEMENT OF HYPOTHESIS**

Nursing functions as perceived by the prenursing student differ markedly from those of the nursing student who has completed twenty out of thirty-six months in a diploma program.
CHAPTER III

METHODOLOGY

SELECTION AND DESCRIPTION OF SAMPLE

The Mary Fletcher Hospital is a private, non-profit institution of 260-bed capacity, located in Burlington, Vermont. It is fully approved by the Joint Commission on Accreditation of Hospitals and holds membership in the American Hospital Association. The hospital's facilities are used for teaching purposes by a university school of nursing and medical college.

The Mary Fletcher Hospital School of Nursing, an integral part of Mary Fletcher Hospital, was selected for this study because of the writer's interest in nursing education in Vermont and her expectation of returning there as an instructor. This is the only nonsectarian, diploma school of nursing in Vermont fully accredited by the Accrediting Service of the National League for Nursing. It is a member agency of the National League for Nursing in the Department of Diploma and Associate Degree Programs and of the Vermont League for Nursing.
The School of Nursing has an enrollment of 105 students. Its purpose is "to prepare its graduates to function in beginning positions in professional nursing, except in public health nursing."\(^1\) The educational program includes "instruction in the classroom and a patient-centered clinical instruction program consisting of demonstrations, clinics and conferences."\(^2\) The Director of the School of Nursing directs the educational program; there is also a Director of Nursing Service.

The ten nursing students selected for participation in this study were members of the junior class in the School of Nursing. Of the thirty-six members of this class, twenty-three were on vacation or affiliation at the time of the study. Three students were having Operating Room experience and were not available for the hour when the questionnaire was to be administered. The ten remaining students were made available for this study by the Director of the School of Nursing.

At the time of the study, these ten nursing students had been in the nursing program at the school for twenty

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\(^1\) *Bulletin*, Mary Fletcher Hospital School of Nursing (Burlington, Vermont: Mary Fletcher Hospital School of Nursing, 1959), p. 11.

months. They had completed all formal classes in Medical-Surgical Nursing. Nine of the students had completed an affiliation in Psychiatric Nursing and were, at the time of the study, having theory and practice on the Obstetrical unit; the tenth student had been absent due to illness and was having experience on a Medical-Surgical unit prior to leaving on psychiatric affiliation.

The high school students who were selected for participation in the study were members of the senior classes of two public high schools in central Vermont. The high schools were in two different communities, seven miles apart. High School A, with an enrollment of approximately 650 students, is located in an industrial community of 10,000 persons. High School B, with an enrollment of approximately 600 students, is located in a community of 8,000 persons, primarily office and industrial workers. Both high schools are approximately forty miles from the Mary Fletcher Hospital School of Nursing. The School of Nursing attracts applicants from both high schools as it is the nearest fully accredited, nonsectarian, diploma school of nursing.

It had been planned to administer the questionnaire to prenursing students in the community where the School of Nursing is located. However, it was found that all
senior prenursing students in that high school were members of a Future Nurses' Club. In order to avoid selection of students with this experience, two other schools were selected.

The size of the sample was determined by the number of prenursing students and second-year nursing students available in the area and in the period of time available to conduct the study. Second-year nursing students were selected because the writer arbitrarily decided that a minimum of twenty months in a professional nursing program was necessary to show a difference in concepts of nursing functions between prenursing and nursing students.

TOOL USED TO COLLECT DATA

The questionnaire method of obtaining information was selected because this device insures a certain uniformity from one measurement situation to another. 3

On the basis of the writer's own knowledge and experience with nursing functions as well as a review of

pertinent literature, she selected thirty nursing and non-nursing functions, each concerned with the care and comfort of the patient. Some functions were simple and might be considered the responsibility of hospital aides or the housekeeping department; others were highly technical and might be considered the responsibility of a physician or other specially trained personnel. The remaining functions were those which might be considered functions of the professional nurse.

In order to determine differences in concepts of functions between prenursing and second-year nursing students, it was necessary to construct three headings: 1) Functions Which Most Professional Nurses Would Not Consider Professional Nursing Functions; 2) Functions Which Most Professional Nurses Would Consider Functions To Be Performed By The Professional Nurse; 3) Functions Which Most Professional Nurses Would Consider Might Be Performed By The Professional Nurse But Might Also Be Performed By Less Skilled Hospital Personnel. The functions selected were arbitrarily placed under these three headings so that there were ten functions under each heading.

The thirty functions were then assembled in a single list in random order. Non-technical terms were used so that each function might be understood by either a second-year nursing student or by a prenursing student. A copy of
the questionnaire will be found in Appendix A.

The questionnaire was pre-tested by the writer who administered it to four students, two prenursing students from the junior class of a small Vermont high school and two second-year nursing students from a small Vermont school of nursing. The preliminary testing was done to determine whether the items were understandable to both groups of students. No changes in the questionnaire were necessary as a result of this testing.

PROCUREMENT OF DATA

When the questionnaire was completed, the Director of the School of Nursing at Mary Fletcher Hospital was contacted by telephone to determine whether she would be willing to participate in the study. An appointment was made for the following week at which time the writer visited the school and discussed with the Director the purpose of the study, methods to be used and time required. The Director's permission to conduct the study was obtained. Arrangements were made for the questionnaire to be administered to ten nursing students one week later, prior to a scheduled class.
On the day when the questionnaire was to be administered, the writer met with the ten second-year nursing students in a hospital classroom. She introduced herself as a student at Boston University School of Nursing who was conducting a study to meet a program requirement, and asked for the students' participation in completing the questionnaire. The students were asked to circle the numbers of items which they believed were functions of the professional nurse. They were told that the questionnaire was not a test, that names were not required and that no grades would be assigned. All questionnaires were completed within ten minutes and collected by the writer. The students were then briefly told the purpose of the study.

The Guidance Director at High School A was contacted personally by the writer on the day following her appointment with the Director of the School of Nursing. Permission was given by the Guidance Director for students at this school to participate in the study. However, because senior students had full schedules due to pre-graduation activities, the Guidance Director asked that he be allowed to administer the questionnaire to the students in groups of two and three. The writer discussed the study and the questionnaire with the Guidance Director,
emphasizing requirements for prenursing students participating in the study. Requirements included interest in a diploma program in nursing and non-participation in Future Nurses' Clubs or as a hospital aide. Instructions were also given concerning questionnaire administration, stressing that students were to be told that the questionnaire was not a test, that names were not required and that no grades would be assigned. The questionnaires were administered by the Guidance Director during the following week. Seven senior students met the requirements for prenursing participants in the study and the writer received seven completed questionnaires.

The study required questionnaires to be completed by ten prenursing students. Therefore, the writer contacted personally the Guidance Director at High School B on the day after she had received the seven completed questionnaires. Permission was given by the Principal of High School B for three senior prenursing students to participate in the study. The Guidance Director at High School B selected three prenursing students, who met the requirements for participation in the study, on the basis of their availability on that day. The three students and the writer met in a classroom adjoining the office of the Guidance Director. The writer explained that the
questionnaire was not a test, that names were not required and that no grades would be assigned. The students completed the questionnaire in ten minutes. The writer collected the completed questionnaires and then briefly explained to the students the purpose of the study.
CHAPTER IV

FINDINGS

PRESENTATION AND DISCUSSION OF DATA

For purposes of analysis and discussion, functions on the questionnaire will be identified as follows:

Area I: Functions Which Most Professional Nurses Would Not Consider Professional Nursing Functions

Area II: Functions Which Most Professional Nurses Would Consider Functions To Be Performed By The Professional Nurse

Area III: Functions Which Most Professional Nurses Would Consider Might Be Performed By The Professional Nurse But Might Also Be Performed by Less Skilled Hospital Personnel

There was considerable difference in concept of functions of the professional nurse between prenursing students and second-year nursing students in Area I. The ten functions in this area on the questionnaire were

1See Appendices for list of functions in Areas I, II, and III.
technical functions perceived by most professional nurses as functions of the physician or other specially trained personnel.

As shown in Figure I, prenursing students appeared to reflect the preoccupation with technical or glamorous functions which was discussed in the Review of Literature. This was in marked contrast to the same functions as perceived by second-year nursing students. Eight prenursing students believed that the professional nurse might "Start a blood transfusion" while this was seen as a professional nursing function by only two second-year nursing students. "Withdraw from a patient's vein a sample of blood to be examined in the laboratory" was believed to be a nursing function by seven prenursing students but by only two students with twenty months in a diploma school of nursing. Five prenursing students, and only one second-year nursing student, believed that the professional nurse might assist the doctor during surgery by "tying off the ends of blood vessels to stop bleeding." Four prenursing students and two second-year nursing students believed that a professional nurse might administer ether to a patient having "a very small operation."

The remaining six functions in Area I were perceived less frequently by the prenursing students as professional nursing functions; there was more
Fig. 1 Distribution of Affirmative Responses to Questionnaire Items
agreement between prenursing and second-year nursing students. "Order pain-relieving medicine for a patient who is in pain" was believed to be a professional nursing function by three prenursing students and by two second-year nursing students. Two prenursing students believed that a professional nurse might "Inform a patient's family of complete details concerning his condition" and might "Make the decision concerning the type of diet which should be given to each patient." Only one second-year nursing student believed that a professional nurse might give a patient's family complete details about his condition and no second-year nursing students perceived the ordering of diets as a professional nursing function. Only one prenursing student, and no second-year nursing students, believed that the professional nurse's responsibilities included removal of sutures from an incision, doing a complete physical examination, and applying a cast.

It would appear that the prenursing student has some orientation to professional nursing functions. She is apparently aware that such functions do not include application of casts, ordering of pain-relieving medication and removal of sutures. However, emphasis upon glamorous functions in recruitment literature and mass
media may be reflected in the response to items concerned with starting a blood transfusion, assisting the doctor in surgery and withdrawing blood from a vein for laboratory examination. The less glamorous functions, such as ordering diets and informing families about the patient's condition, were less often perceived by the prenursing students as professional nursing functions.

There were affirmative answers from second-year nursing students in Area I. Two second-year nursing students believed that professional nursing functions included starting a blood transfusion, ordering pain-relieving medication, taking a sample of blood for laboratory examination and giving anaesthesia for minor surgery. One second-year nursing student believed that assisting the doctor in surgery by "tying off the ends of blood vessels to stop bleeding" was a professional nursing function. Possibly, the second-year nursing student had performed such functions, or seen them performed by a professional nurse, in an emergency situation. One such instance was cited by a second-year nursing student following administration of the questionnaire at the School of Nursing.

Functions in Area II were believed to be considered professional nursing functions by most professional nurses. Four of these functions were believed to be
functions of the professional nurse by a large number of the prenursing students. All prenursing students believed that "Watch patient after an operation for signs of bleeding" and "Observe a patient for reaction to a blood transfusion" were professional nursing functions. All second-year nursing students believed that observing patients for reaction to a blood transfusion was a professional nursing function and nine second-year nursing students perceived "Watch patient after an operation for signs of bleeding" as a function of the professional nurse. Nine prenursing students and all second-year nursing students recognized "Take a patient's blood pressure" and "Change soiled bandages" as professional nursing functions.

Other functions in Area II received considerably fewer affirmative responses from prenursing students. Six prenursing students believed that a professional nurse might teach a patient to give himself an injection; all second-year nursing students perceived this as a professional nursing function. Six prenursing students, but only five second-year nursing students, gave an affirmative response to "Insert a tube through mouth into stomach to feed patient or clean out stomach."

Four functions in Area II were answered affirmatively by fewer than six prenursing students. This was
particularly marked in the area of patient teaching. Only one prenursing student, but seven second-year nursing students, believed that teaching the patient proper habits of diet was a professional nursing function. Four prenursing students, and all second-year nursing students, perceived patient teaching in the area of personal hygiene as a professional nursing function.

Catheterization of female patients, recognized as a professional nursing function by all second-year nursing students, received five affirmative responses from prenursing students. "Test patient's urine for sugar" was believed to be a professional nursing function by all second-year nursing students and by four prenursing students.

These responses provide basis for belief that functions perceived as professional nursing functions by second-year nursing students may not be perceived as such by prenursing students. Only one of the functions in this area was perceived as a professional nursing function by less than seven second-year nursing students; this function was concerned with insertion of a tube into the stomach, which may be performed by an interne in a "teaching hospital" such as the one in which this study was done. Of this same group of functions, only four were
perceived as professional nursing functions by more than six prenursing students.

Of particular significance was the prenursing student's lack of perception of patient teaching as a professional nursing function. This was illustrated by the responses of the prenursing students to the functions concerned with teaching the patient about proper habits of diet and hygiene. Also, four prenursing students did not perceive as a professional nursing function the teaching of a patient to "inject a 'needle' into himself if necessary." Such a finding was in contrast to Kibrick's\textsuperscript{2} belief that the prenursing student is aware of the teaching function of the nurse.

Functions in Area III are those which most professional nurses would consider functions which might be performed by the professional nurse but which might also be performed by less skilled hospital personnel.

Functions in Area III perceived frequently as professional nursing functions by prenursing students included "Give patient a backrub," with eight affirmative responses; "Answer patients' red call lights," with nine affirmative responses; and "Carry diet tray to patient" and "Make an unoccupied bed," both of which were answered

\textsuperscript{2}Kibrick, loc. cit.
affirmatively by seven prenursing students. All second-year nursing students believed that giving back rubs and answering call lights were professional nursing functions. Six second-year nursing students perceived "Make an unoccupied bed" as a professional nursing function. Four second-year nursing students believed that "Carry diet tray to patient" was a function of the professional nurse.

Other functions in this area received fewer affirmative responses from prenursing students. Five prenursing students would consider" Write a letter for a patient who has a fractured arm," "Arrange flowers in patient's room" and "Arrange linen on shelves of linen closet" to be functions of the professional nurse. Four second-year nursing students believed that arranging linen in the linen closet was a function of the professional nurse while seven second-year nursing students believed that writing letters for patients and arranging flowers in patients' rooms were professional nursing functions.

The two groups of students agreed that cleaning the room after discharge of the patient was not a professional nursing function; only one student in each group responded affirmatively to this function.

The remaining two functions in this area showed greater difference between the prenursing students and the second-year nursing students, these functions being
accepted as professional nursing functions by more second-year nursing students than prenursing students. "Read to an elderly patient" was perceived as a professional nursing function by six second-year nursing students and by two prenursing students. "Wash glasses used to give medicines to patient" was believed to be a professional nursing function by seven second-year nursing students and by three prenursing students.

In Area III was found the greatest number of functions showing little difference in the concepts of the two groups of students. There was no pattern of response: some functions received more affirmative replies from the prenursing students, others were perceived as professional nursing functions more frequently by the second-year nursing students. Possibly, some affirmative responses in this area from the second-year nursing students indicated performance of these functions by the student due to non-availability of other personnel. "Wash glasses used to give medicines to patient," "Answer patients' red call lights" and "Make an unoccupied bed" might be examples of functions performed by the professional nurse when less skilled personnel is not available.

The prenursing student perceived as professional nursing functions those functions which might be considered more familiar to the lay person: making beds and answering
call lights. The prenursing student was less likely to perceive as professional nursing functions those dealing with housekeeping, such as "Clean room after patient has left" and "Wash glasses used to give medicines to patient."
The prenursing student was less likely than the second-year nursing student to perceive as professional nursing functions those functions which might be described as comforting: "Read to an elderly patient," "Write a letter for a patient who has a fractured arm" and "Arrange flowers in patient's room."
CHAPTER V

SUMMARY, CONCLUSIONS AND RECOMMENDATIONS

SUMMARY

This study was undertaken to determine whether there were a difference in concept of functions of the professional nurse between a group of prenursing students and a group of second-year nursing students. It was the belief of the writer, supported in part by attrition studies, that some of the dissatisfactions of nursing students were a result of distorted concepts of professional nursing functions.

It was further believed that prenursing students commonly perceive professional nursing functions in terms of either very simple functions or of technical skills which most professional nurses might consider functions of the physician. Therefore, comparison of concepts of professional nursing functions held by prenursing students and students who have been in a nursing program for twenty months might be expected to show a difference.

On the basis of the writer's own knowledge and experience with nursing functions as well as a review of
pertinent literature, she selected thirty nursing and non-nursing functions, each concerned with the care and comfort of the patient. In order to determine differences in concept of nursing functions between prenursing and nursing students, three headings were constructed:

1) Functions Which Most Professional Nurses Would Not Consider Professional Nursing Functions; 2) Functions Which Most Professional Nurses Would Consider Functions To Be Performed By The Professional Nurse; 3) Functions Which Most Professional Nurses Would Consider Might Be Performed By The Professional Nurse But Might Also Be Performed By Less Skilled Hospital Personnel. Functions were arbitrarily placed under these three headings so that there were ten functions under each heading. The thirty functions were then assembled in a single list in random order.

The questionnaire was pre-tested by the writer who administered it to two prenursing students and two second-year nursing students: this was done to determine whether functions were understandable to both groups of students. No changes in the questionnaire were necessary as a result of this testing.

The questionnaire was administered to ten second-year nursing students at the Mary Fletcher Hospital School
of Nursing in Burlington, Vermont, and to ten prenursing students from the senior classes of two public high schools in central Vermont. Responses were tabulated and analyzed. A comparison was made between functions perceived as professional nursing functions by prenursing students and those perceived as professional nursing functions by second-year nursing students.

CONCLUSIONS

Analysis of the data resulted in the following conclusions:

1. There was a difference in concepts of the functions of the professional nurse as perceived by a group of prenursing students and a group of second-year nursing students.

2. The least difference in concepts of professional nursing functions held by the two groups of students was in Area III (Functions Which Most Professional Nurses Would Consider Might Be Performed By The Professional Nurse But Might Also Be Performed by Less Skilled Hospital Personnel).

3. There was some difference in concepts of professional nursing functions held by the two groups of students in Area I (Functions Which Most Professional Nurses Would Not Consider Professional Nursing Functions) and Area II (Functions Which
Most Professional Nurses Would Consider Functions To Be Performed By The Professional Nurse).

4. Most prenursing students did not perceive patient teaching as a function of the professional nurse.

5. Prenursing students were more likely than second-year nursing students to perceive functions of the professional nurse as those which might be considered highly technical or glamourous.

6. Second-year nursing students were more likely than prenursing students to perceive functions of the professional nurse as those commonly described as "comforting."

RECOMMENDATIONS

Since the findings of this study indicate some difference in concepts of professional nursing functions as perceived by ten prenursing students and ten second-year nursing students, it is recommended that:

1. The study be repeated with larger numbers of students from several geographic areas.

2. Those responsible for preparing recruitment materials include more information concerning functions of the professional nurse.

3. More attention be focused in attrition studies upon the effect of acceptance into nursing programs of students with inadequate or inaccurate knowledge of professional nursing functions.
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APPENDIX A

QUESTIONNAIRE

Following is a list of activities each of which may or may not be performed by a professional nurse. Indicate each activity which you feel is a function of the professional nurse by circling the appropriate item number.

1. Take a patient's blood pressure.
2. Give patient a backrub.
3. Read to an elderly patient.
4. Start a blood transfusion.
5. Answer patients' red call lights.
6. Change soiled bandages.
7. Apply a cast to a fractured wrist.
8. Do a complete physical examination.
10. Carry diet tray to patient.
11. Clean room after patient has left.
12. Order pain-relieving medicine for a patient who is in pain.
13. Withdraw from a patient's vein a sample of blood to be examined in the laboratory.
14. Teach patient good habits of personal hygiene.
15. Write a letter for a patient who has a fractured arm.
17. Inform a patient's family of complete details concerning his condition.
18. Give anaesthesia (ether) to a patient who is having a very small operation.
19. Insert a tube into bladder of a female patient to withdraw urine.
20. Watch patient after an operation for signs of bleeding.
21. Teach patient proper habits of diet.
22. Remove "stitches" from incision of a patient who has had his appendix removed.
23. Arrange linen on shelves of linen closet.
24. Make an unoccupied bed.
25. Assist doctor who is performing an operation by tying off the ends of blood vessels to stop bleeding.
26. Observe a patient for reaction to a blood transfusion.
27. Teach patient to inject a "needle" (hypodermic needle) into himself if necessary.
28. Wash glasses used to give medicines to patient.
29. Insert a tube through mouth into stomach to feed patient or clean out stomach.
30. Make the decision concerning the type of diet which should be given to each patient. (regular, liquid, low calorie, ulcer, diabetic)
APPENDIX B

LIST OF FUNCTIONS IN AREAS I, II, AND III

AREA I (Those Functions Which Most Professional Nurses Would Not Consider Professional Nursing Functions)

Start a blood transfusion
Apply a cast to a fractured wrist
Do a complete physical examination
Order pain-relieving medicine for a patient who is in pain
Withdraw from a patient's vein a sample of blood to be examined in the laboratory
Inform a patient's family of complete details concerning his condition
Give anaesthesia (ether) to a patient who is having a very small operation
Remove "stitches" from incision of a patient who has had his appendix removed
Assist doctor who is performing an operation by tying off the ends of blood vessels to stop bleeding
Make the decision concerning the type of diet which should be given to each patient (regular, liquid, low calorie, ulcer, diabetic)

AREA II (Those Functions Which Most Professional Nurses Would Consider Functions To Be Performed By The Professional Nurse)

Take a patient's blood pressure
Change soiled bandages
Test patient's urine for sugar
Teach patient good habits of personal hygiene
Insert a tube into bladder of a female patient to withdraw urine
Watch patient after an operation for signs of bleeding

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Teach patient proper habits of diet
Observe a patient for reaction to a blood transfusion
Teach patient to inject a "needle" (hypodermic needle) into himself if necessary
Insert a tube through mouth into stomach to feed patient or clean out stomach

**AREA III (Those Functions Which Most Professional Nurses Would Consider Might Be Performed By The Professional Nurse But Might Also Be Performed By Less Skilled Hospital Personnel)**

Give patient a backrub
Read to an elderly patient
Answer patients' red call lights
Carry diet tray to patient
Clean room after patient has left
Write a letter for a patient who has a fractured arm
Arrange flowers in patient's room
Arrange linen on shelves of linen closet
Make an unoccupied bed
Wash glasses used to give medicines to patient