SOCIALISATION OF THE STUDENT NURSE IN THE NURSING PROFESSION

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OPSOMMING

Professionele ontnugtering by die studentverpleegkundige, wat 'n belangrike rede vir beroepsverlating is, was die onderwerp van hierdie navorsing onder studente in die Oos-Kaap. Een van die belangrikste redes vir professionele ontnugtering is gebrekkige sosialisering van die student in die beroep.

Die volgende faktore wat met professionalisering en sosialisering verband hou is ontleed: die invloed van beroepsleiding en voorbereiding vir die verpleegberoep; die student se motivering vir die keuse van verpleging as beroep; die rol van identifiseringmodelle; spanwerk; werkstevredenheid, voorgenome staking van die beroep na voltooiing van opleiding en studente as motiveerders en werwers. Leemtes wat tot professionele ontnugtering bydra is ten opsigte van elk van hierdie faktore gevind.

INTRODUCTION

Since Florence Nightingale established a nursing school in conjunction with St Thomas' Hospital in 1860, society has changed and particularly medical technology has undergone tremendous developments.

Together with these changes and innovations, demands have been placed upon the nursing profession, calling for a distinct expertness required of the person performing the role of a nurse.

Within the dynamic development of the nursing profession, various problems can be cited which need attention:

- those problems that arise from the need to differentiate the nursing profession from other professions within the hospital setting;
- the problem of nursing's continuing stance of submission to medical authority;
- the controversy about whether the nurse has a distinct role definition;
- the question whether the type, nature and duration of education programmes for nurses are adequate in order to meet the requirements society demands of a profession.

The existence and importance of these issues cannot easily be cast aside even if they tend to spark off value-laden philosophical discussions. There are however other more practical problems which require serious attention by those associated with the nursing profession, hence the need for this research project.

One such problem which has received much attention — is known as *professional disillusionment* (Cohen, 1981).

Although professional disillusionment refers to the phenomenon of fledgling nurses dropping out during the first year after graduation, this concept should be extended to include the phenomenon of young women not entering the nursing profession as student nurses.

Without trying to simplify this important problem, it does seem from information obtained from newpaper reports, letters to the newspaper, articles from various journals of the nursing and medical professions, papers delivered at conferences and symposia, that the student nurse finds herself within a two-dimensional problem area:

firstly, those problems originating from the actual work environment; and

— secondly, those problems that centre around her own personal development within her profession, inhibiting the flow of the forces of the process of socialisation.

It must be clearly stated that although there is a need and a function for professional socialisation, we are here dealing with socialisation of a person to remain in the nursing profession as long as it is mentally, physically, emotionally, socially and economically possible for them to do so.

AIM OF RESEARCH

In order to test the statement of professional disillusionment, the 3rd year B. Cur. students of the University of Port Elizabeth undertook a compulsory research assignment as part of their curricular training under leadership of Mr Bezuidenhout, an ex-lecturer in sociology, with the following objectives in mind:

- to determine what image the student nurse has of herself and her profession;
- to determine what factors enhance the socialisation of the student nurse in her profession;
- to determine what factors inhibit the process of socialisation and

 to identify the reasons why student nurses are dropping out of the profession after completing their training.

METHODOLOGY

A group-administered questionnaire was used as a primary instrument to obtain the information. These questionnaires were distributed to student nurses registered as such at various hospitals and academic institutions in the Eastern Cape region. The only students who did not participate in this research were the 3rd year B Cur students of the University of Port Elizabeth, who launched this project.

The respondents completed the anonymous questionnaires under supervision, thus eliminating any discussion of the content of the questionnaire and enabling the researchers to obtain a personal answer from each respondent.

SAMPLING

In all, 101 questionnaires were received back. Of these 101 nursing students, only 1 was male; the majority being between 18—21 years of age. More than 60 persent are Afrikaans speaking and the majority of all students originated from a rural environment. An average of just over 2 years in the nursing profession was indicated.

DELINEATION OF THE REPORT

Before the factors enhancing and inhibiting the process of socialisation of the nurse are to be discussed, and attention is paid to the phenomenon of *professional disillusionment* it will be appropriate to first of all discuss briefly the process of socialisation with reference to the student nurse.

Socialisation of the Student Nurse

Most student nurses today are not prepared for the technical and emotional demands of the nursing role. Their image of the nursing profession is derived from sources such as television programmes and shows, love stories in which the nurse plays an important and leading role and picture stories, and not from real experiences. These student nurses too hold the values and attitudes of the lay public, rather than those of the profession.

In addition to this misconception, many nursing students are experiencing the psychological problems of adolescence and often have not yet established their own identities or goals (Cohen, 1981).

Added to this, are the demands on them by the educational process and the environment in which they have to gain practical experience and recognition as clearly stated in the following response to the question on the image of the student nurse in today's hospital setting:

... although being in her difficult adolescent and post-adolescent years, and struggeling to find herself as a fully grown-up, she is sometimes negative towards everything, everybody and towards herself to such a degree, that she is constantly frowning and questioning other's motives, and therefore losing a lot of her attractiveness and feminity as a young girl. She works long demanding hours and does not receive recognition for that and therefore there is a lack of enthusiasm and a lot of aggression amongst the young nurses.

Socialisation of the student nurse differs from that of the school pupil in that they are well away on the path to adulthood. They begin their formal training equipped with stereotypes, beliefs, expectations and ideas about the world inside and outside the nursing profession. It is therefore necessary that these beliefs, expectations and ideas must be integrated into the student's professional identity, if they are to internalise the professional role.

Before the nurse can adequately perform her professional role, she must develop cognitive skills and technological proficiency, internalise the cultural and ethical standards of the nursing profession, understand and accept the nurse's role and perform her role in relation to the other members of the hospital team and the patients she has to care for.

The importance of these requirements are emphasised in the following quotation. When a lecturer

of one of the training schools was asked about her views on the ideal nurse's training she said:

A balanced correlation should be maintained between theory and practice. There should be excellent communication between all the members responsible for her training e.g. lecturers, clinical teachers, ward sisters, doctors, etc including regular liaison meetings to evaluate not only the quality of training, but also to evaluate the performance of the student nurse.

Furthermore, Kelman postulated three identifiable different processes that play an important role in the professionalisation and socialisation process (Kelman, 1967), they are: compliance, identification and internalisation. Of these three, internalisation is the most important, because this implies that the nurse has accepted the influence of the profession, because she believes in it and is thus willing to perform her role according to the role expectations she has let herself be orientated to.

In conclusion thus, socialisation of the student nurse is a dynamic process, needing the responsive participation of both partners that is the student nurse herself and the socialisation agent, and their willingness to compromise their own personal objectives in reaching a mutual objective, the Nursing Profession!

As a Sociologist the writer will try to explain the reasons for the phenomenon — professional disillusionment

At this point the writer would like to explain that he does not want to imply that he knows the nursing world, nor the nursing profession, but that as a Sociologist and researcher, he has come to know the nursing profession as a patient, has had interesting discussions with various persons within the nursing profession and above all, has come to know the nursing profession through the eyes of nursing students who have been his students for five years. Both valuable and interesting data on the nursing profession has been obtained in this

Now turning to the actual findings of our research:

OCCUPATIONAL GUIDANCE AND PREPARATION FOR THE NURSING PROFESSION

 When the student nurse was asked if she had received any occupational guidance before entering the profession:

56% said that they received **no** form of occupational guidance.

 When those that did receive occupational guidance were asked, if it corresponded to the real nursing situation as they have come to experience it:

37% said that it **did not** correspond to the **real** situation, thus leaving us with only

7% who received the correct information about the nursing profession.

 When asked to what extent they received some form of preparation for the nursing profession:

17% were never prepared, thus entering a profession without knowing what would be expected of them:

60% were **poorly** prepared, giving them thus only a slight advance over those that **never** received any preparation for the profession.

 When taking the cultural background of the student nurses into account, it was found that:

more students came from a rural environment and were Afrikaans speaking; and

more English speaking and bilingual students came from the urban areas.

Remark: It does seem that it is not only the factor of preparation and vocational guidance that needs attention, but also the cultural background that is important.

 To try and determine the extent to which persons within the profession, whom the student knows well, advised the prospective student not to enter the nursing profession, the findings indicate that the

50% who were in contact with such a person were influenced positively rather than negatively

Remark: Unfortunately, however, the same cannot be said of the student nurse if she should be in the

same position to influence others to accept nursing as a career (more about this later).

 When the student nurse was asked who had influenced her to choose nursing as a career the following data was obtained.
 61% made their own decision

Remark: This indicates that there is a group of students who not only wanted to nurse out of own free will, but who are also inherently self-motivated.

30% were influenced by their parents.

Remark: It is interesting to note the virtual absence of influence by two important socialising agents in particular i.e. senior hospital personnel and the tutors of training schools.

Furthermore, the professional associations exerted no direct influence.

Suggestion

It is thus suggested that instead of these parties undertaking separate recruitment activities, both parties who are directly involved in the training of students should, with the assistance of student- and professional nursing associations, and after discussion, decide on a joint plan of action for recruiting suitable candidates.

OCCUPATIONAL CHOICE AND MOTIVATION

It is always interesting to determine why a person chooses a specific career. Regarding student nurses' motivation for choosing nursing as a career the following information was obtained:

68% of the students indicated that they chose nursing for humanitarian reasons, while

9% regard it as a life-ideal

6% chose nursing because it is a second occupation to medicine

14% regarded it as a calling, but no longer identify with the profession

3% were unsure why they chose nursing in the first instance.

Remark: The abovementioned 14% focuses the attention on the subject of the research which is professional disillusionment, as well as the absence of particular occupational objectives.

 When the student nurse was asked if she would choose another profession or career if she had the opportunity to start her careerlife over again, it was found that: 35% said that she would choose another career;

34% said no; and

32% were uncertain.

Remark: This means that just over 65% of the student nurses have a problem identifying with the nursing profession.

• When a further analysis was made, it was found that:

More Afrikaans speaking students than English speaking students would have made another career choice;

more students, when only considering those that come from a bilingual home, will again choose nursing as a profession.

Remark: One wonders whether the recruiting officials should not bear this in mind!

 Furthermore, when we considered those students who stated that they had made the wrong occupational choice, it was found that:

more students were either never or poorly prepared for the nursing profession:

When considering those students who stated that they were well prepared for the nursing profession, it was found that:

slightly more students were uncertain than those who were sure that they had made the right decision.

Remark: A two-fold observation can be made:

- it is not so much the significance of the fact that the students were actively prepared or not, but rather the quality of preparation given to the student before actively entering into the profession; and
- that the tendency of uncertainty may be due to the fact that the

student nurse cannot identify with the profession.

We must at all times bear in mind that it is not the buildings, technical instruments, knowledge, etc that is crucial to the nursing profession, but rather the quality of a person that makes the profession.

Nursing is often seen as a calling.
 This question was also put to the student nurses.

77% regarded nursing as their calling

Remark: This figure correlates with the statistics on the students' motivation for choosing nursing as a career (68% humanitarian reasons; 9% life-deal)

23% do not regard nursing as their calling although some were of the opinion that it was a calling in the beginning.

Remark:

- despite the fact that the student is of the opinion that she is unsure about her choice of nursing as a career, there is a tendency for the student nurse to hold to the traditional concept that nursing is a calling rather than an occupation;
- here too, a degree of professional disillusionment can be seen.
- When the data was analysed more closely, it was found that: more Afrikaans speaking students said that they regarded nursing as a vocation; and when only considering the billingual students, it was found that:

78% viewed nursing as a vocation, thus a high motivation can be observed.

IDENTIFICATION MODELS

Remark:

- the student nurse has passed the stage of identifying with her parents, school teacher, etc and now seeks other models with whom she can identify.
- the most important models in her career-life are her nursing education school lecturers and her seniors within the hospital situation.
- both these models are important and without them no student nurse can identify with the nursing profession.

- When the student nurse had a choice to make between identifying with the models in her training school and in the hospital, it was found that:
 - 68% choose to identify with someone within the training school; only
 - 5% choose both the training school and the hospital.
- In an attempt to obtain more information about the extent to which teaching and hospital personnel serve as identification models it was found that

12% regarded all their tutors as good identification models;

60% regarded most of their tutors as identification models; and only

3% regarded some tutors as identification models.

- When the extent to which the student's immediate seniors served as identification models was analysed it was found that: the most students regarded some of their seniors as identification models.
- Furthermore, when the student nurse had to evaluate the degree to which the senior nurse was an adequate leader within the ward situation, the following information was obtained: only 8% said that most senior nurses were adequate leaders;

49% said that some were;

23% said that a few were; and 20% said that none were.

Remark:

- considering factors such as poor vocational guidance, inadequate preparation for the correct occupational choice, it does seem that the identification models especially within the hospital setting have a greater responsibility towards the profession, than is realised;
- it must also be borne in mind, that identification models are not born, but that they have to proceed through exactly the same socialisation process as the student nurse;
- there is thus a vicious circle here. Poor socialisation received, poor socialisation given!;

- this becomes very clear when observing the following information:
- When the student nurse was asked whether her own senior nursing students were adequate identification models, the following was found:

75% stated that only some were, thus accentuating the above observation.

Remark:

- it is not the researcher's task to consider reasons to seek excuses for such observations — valueladen judgements will then be exercised but
- we must bear in mind, that leadership and the function of identification models are interrelated, and therefore attention should be given in developing not only the leadership potential of the student nurse, but also of the qualified nurse.

TEAMWORK

Remark:

Teamwork is of considerable importance within the hospital setting — it not only provides for work proficiency, but also the building of balanced interpersonal relationships.

- When the student was asked to what degree she experiences teamwork within the nursing situation, the following information was received:
 - 84% stated that it only happened occasionally.
 - 9% said that they always experienced it; and
 - 7% said they never experienced it.
- After closer analysis of this phenomenon it was found that:
 Poor teamwork would influence the student more towards negativism in recommending her profession
- When the student was asked to explain her professional relationship with the medical doctor, the following significant findings were made: only

8% stated a friendly relationship;

29% a precarious relationship; Other comments were:

. . . they think that they are superior.

... they think we are unintelligent.

. . . they treat us like 'dirt'.

Remark:

- Although the medical practitioner is not a direct identification model the student nurse regards him as someone who possesses distinct and special skills and therefore wants to identify with him;
- It is the author's observation that we are currently dealing with a student nurse who: is interested in her fellow man; and is interested in medical technology and not with people who accept all information without question and critical analysis.
- Another area which should receive attention which has been high-lighted due to the high percentage of nursing shortage in South Africa, is the frequency in which the student nurse receives tasks in the hospital for which she does not have adequate knowledge.

60% stated that they often receive such tasks.

Remark:

- this was one of the reasons stated why they are dissatisfied with the working conditions, because they cannot cope with the amount of responsibility when performing such tasks.
- We must not forget, that no matter how well one is prepared theoretically, practical experience is needed for proficiency too!

WORK SATISFACTION

Remark:

- professional disillusionment is not only related to the process of socialisation but is also influenced by work satisfaction;
- according to Herzberg's twofactor theory⁴ on work satisfaction, there are two major factors that influence one's attitude and evaluation of one's work situation;
- these two major factors are what he calls the: motivation or internal factors; and the

hygiene or external factors;

- motivational factors refer to those factors which are associated with positive feelings about one's job and is related to the work content itself, such as recognition, advancement and responsibility;
- hygiene factors refer to those factors which are associated with positive feelings about one's job and is related to the environment in which the job is performed, such as supervision, work conditions and salary.
- When the student was asked whether she is satisfied with her working conditions in general the following was found 88% were dissatisfied; and 12% were satisfied
- With reference to Herzberg's two-factor theory it was found that:
 81% of the students referred to the external factors which influ-

enced work satsifaction 19% of the students mentioned internal factors as affecting work satisfaction.

 On analysing the nature of the external factors which cause work dissatisfaction the following was indicated:

23% mentioned hospital policy and organisation as the main factors:

21% mentioned poor interpersonal relationships as the second most important factors;

17% indicated the working conditions, which included the staff shortage and long working hours; 15% mentioned salary as a factor;

13% indicated supervision;

11% mentioned multi-external factors which included most of the abovementioned.

 When the student was asked to elaborate on the nature of the internal factor causing work dissatisfaction, the following findings were made:

35% stated the absence of recognition;

24% stated the nature of the work itself;

24% replied that there was too much responsibility placed upon the shoulders of the student nurse;

17% stated a multi-internal

factor response, including the mentioned factors.

Remarks:

- many of these factors are related to the present nursing shortage, but
- there seems to be an important link between the poor interpersonal relationships mentioned and the previous findings of poor leadership qualities of the senior nursing staff; the problem of the nature of identification models and poor doctornurse relationships. There is a link between supervision, recognition and responsibility;
- salary, although it needs attention, is not the primary factor influencing a shortage of nursing staff, but rather the absence of recognition for the hard work and long working hours the students have to cope with;
- salary must therefore be seen as one of the means through which recognition is given and not as sole motivation factor.

DISCONTINUATION OF THE NURSING PROFESSION AFTER COMPLETION OF TRAINING

Remark:

- Turning now to those factors more directly concerning the reasons why the student nurse drops out of the profession after her training has been completed.
- When the student nurse was asked whether she will continue nursing after completion of training the following was found: 23% indicated that they would not continue nursing 32% indicated that they would remain in the profession 45% were unsure about what they were going to do in the future.

Remark:

- although there are three distinct groups of student nurses, we are only sure of the 32% who will continue in the profession;
- if we ignore the 23% who said that they are not going to continue with the nursing profession, then we must pay attention

- to those who have not yet decided what they are going to do;
- one way in which it can be done, is to pay attention to the reasons given by those who are not going to continue in the profession and are going to drop out and to scrutinise the reasons which those have given for being uncertain;
- this implies the application of the principle prevention is better than cure.
- The following are the reasons given by the students for discontinuing their profession on completion of training:

53% because of lack of recognition;

28% because of the nature of the working conditions;

10% because of salary;

6% because of too much responsibility; and

3% because they would rather work in a semi-nursing position.

 When the reasons students gave for being uncertain whether they would leave nursing or not, were analysed, the following was found:

39% were unsure of either their own future in the profession or of the profession itself.

Remark:

It seems unbelieveable that students could think that the nursing profession which has existed for so many centuries would cease to exist, but for the author as sociologist the explanation can be found in the student's disillusionment with the nursing profession. 22% wanted to leave the hospital environment and work in a private concern

13% mentioned that there is an absence of personal recognition and that they would for this reason have to decide about their own future in nursing;

11% mentioned long working hours as the reason;

4% mentioned excessive responsibility; and

11% were at that stage considering another occupation.

Remark:

In spite of the fact that most nursing students see nursing as a vocation, the majority is uncertain

whether they will continue in the nursing profession.

When evaluating those who said that they do not regard nursing as their vocation, a vast majority said that they would not continue with the nursing profession.

It is clear that the nurse today has a rather black-and-white proposition to make:

We will supply the much needed services and you supply the work conditions!

STUDENTS AS MOTIVATORS AND RECRUITORS

- When the student nurse was asked whether she would recommend her profession or not, the following data was received:
 65% said no and
 35% said yes.
- When the reasons were asked why the student nurse would not recommend her profession, the following reasons were given:
 38% said that they would not do so, because of a multi-external factor reason;

14% said because of multi-internal factor reasons; and

5% said because the nursing profession has little or no status when comparing it with other professions; only

7% said that they would convey the real message to the young school leaver, but leave the decision to the individual herself to make

 When the external factors as proposed by Herzberg were considered, the following was found; 35% mentioned a multi-external factor reason;

21% mentioned work conditions:

18% mentioned hospital policy and organisation;

13% mentioned lack of supervision; and

13% mentioned salary as a reason.

 When taking the internal factors as proposed by Herzberg into account, the following was found: 64% mentioned a multi-internal factor reason;

15% mentioned recongition as a reason;

14% mentioned too much responsibility and 7% mentioned low achievement as a reason.

CONCLUSION

In conclusion then, we have been confronted with various factors such as occupational guidance, preparation for the nursing profession, career motivation, the function of identification models, quality of teamwork and factors influencing work satsifaction that play an important role in the process of professionalisation and socialisation.

We have to some extent uncovered some of the areas causing concern over the high percentage of drop-outs from the nursing profession.

Although the Eastern Cape Region has been high-lighted to a certain extent, reports from other areas show a correlation with many of the factors mentioned, but there are also differences. It is therefore strongly suggested that when any further research must be done on this problem within the nursing profession, it is imperative to seek solutions per region and not according to a general evaluation of all hospital-cum-training schools in South Africa.

It must also be realised that this research and paper concerns only White student nurses and therefore research of this nature, must also take cultural aspects of other races into account, if we want to obtain insight into the general student nursing situation in South Africa and neighbouring communities.

To conclude: it does seem that the student nurse situation is a multi-factor problem, and therefore a multi-professional team approach to try and solve this problem is proposed, because it is not only a profession, but a service to the community who regards health services as an institutionalised value.

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