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USE OF THE MORISON CHECK LIST TO COMPARE PROBLEMS
EXPRESSED BY BEGINNING AND ADVANCED STUDENTS
IN AN OREGON COLLEGIATE SCHOOL OF NURSING

by

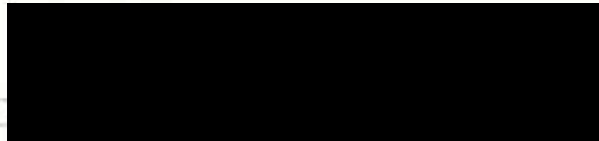
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A THESIS

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PREFACE

An interest in the problems of student nurses prompted the author's choice of subject matter for this treatise. It was believed useful information could be contributed to the field of student guidance and counseling by discovering if differences existed in problems expressed by beginning and advanced nursing students.

Dorothy J. Darm

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CHAPTER I

INTRODUCTION

The complexity of today's civilization gives rise to an enormous variety of problems affecting every phase of human activity. Some are minor and could more properly be classified as irritations. Others are of greater magnitude and may involve major changes in the life of the individual.

In schools of nursing, the student encounters not only the difficulties common to all young women, but also the stresses inherent in the nursing program. Some of the major areas of anxiety normal to all girls in late adolescence relate to:

1. need for approval, love and personal security
2. need to conform to the peer group
3. concern with personal appearance and popularity
4. worry over scholastic ability
5. concern for the future; vocation and/or marriage
6. conflict over personal behavior and ideals
7. conflict between need for independence and dependence
8. need to overcome feelings of inadequacy
9. need for emotional stability. (3, 11, 15, 5, 21)

Major areas of concern more specifically pertaining to the student nurse are associated with the need to:

1. assume heavy responsibilities
2. assume liability for errors

3. assimilate a great deal of knowledge quickly
4. do strenuous physical work
5. perform esthetically distasteful tasks
6. submit to personal restrictions
7. adjust to the unwritten laws of the group in institutional living
8. accept illness and death. (18, 28, 30, 34, 35)

Although entrance requirements for schools of nursing are usually rigid and are designed to eliminate those with little potentiality for success, approximately one third of all students admitted fail to complete their program. (1) A percentage of these prove to be academically or temperamentally inadequate for a career in nursing. The balance, even though they appear to be capable of completing the curriculum, encounter some problem or combination of problems that make their withdrawal from school the easiest course to follow. (5)

Nurse educators are aware of deficiencies in the academic program that contribute to student problems and withdrawals and are taking steps to correct them. Research concerning curriculum, clinical nursing practice, evaluation and student guidance plays an important part in the program of many schools. A continuous process of upgrading is prevalent among most schools of nursing. Theory and clinical practice are being analyzed and evaluated to assure meaningful learning experiences.

In this connection, the identification, analysis and treatment of student problems is of great importance. "Their existence interferes both with achieving the purposes of nursing education and with the ease

and pleasure of carrying it on." (7) Any research contributing to the body of knowledge concerning students' problem areas can assist in evaluating the effectiveness of the nursing curriculum and aid in the expansion of guidance services.

Statement of the Problem

The purpose of this study is to compare the problems expressed by two student groups in a selected collegiate school of nursing as determined by the Problem Check List-Form for School of Nursing by Luella J. Morison. (24) One class consists of 22 first year students (designated as sophomores in their school) who have completed seven months of study in the hospital setting. The other is composed of 30 senior students within five months of graduation. Both have completed one year of college in preparation for entering the clinical area.

In addition, by means of a supplement questionnaire, an effort is made to determine:

1. who was of most help to the students in solving their problems and in adjusting to the school of nursing, (i.e., family, clergyman, faculty adviser, supervisor, roommate)
2. how they rate the availability of help with their problems, (i.e., help available; "always," "usually," "occasionally," or "never")
3. what suggestions the students have to improve the guidance services of their school.

Experimental Hypothesis

In analyzing the data obtained, it is hypothesized that there will be measurable differences found between the sophomore and senior students.

Limitations

This study is limited to data that can be obtained by use of the Morison Check List and Supplement Questionnaire. The value of any conclusions drawn are necessarily dependent on the reliability and validity of the measuring tool.

The study is further limited to one selected school of nursing and to the 22 sophomores and 30 seniors enrolled at that school. Since this group is only a sample of the universe, this embodies the limitations of chance sampling.

The third limitation is imposed by the reluctance, or even inability, of the participating students to identify their problems with accuracy. The test will reveal only those difficulties which the individuals recognize and are willing to admit and which are present at a given time.

Fourth, the time involved in the study is limited to one specific date, rather than multiple tests given at varying times.

Finally, in presenting the results, the intent is to limit the conclusions to a comparison of the problems encountered at an early and advanced point in nursing education and not to determine cause or suggest remedies.

Assumptions

For the purpose of this study it is assumed that:

1. Student nurses encounter many problems typical of all women in their late teens and early twenties plus those related to preparing for a nursing career.
2. The accumulation and analysis of the data obtained will reveal the problem areas of the student groups within the limitations of the study.
3. The sophomore and senior students will not differ in their willingness to reveal their problems.

Importance of the Problem

The administration of the Problem Check List and the Supplement Questionnaire to the two groups selected could serve a twofold purpose. First, it may be of help in evaluating the guidance program in the school of nursing in question. The anonymity afforded could very possibly expose unsuspected problem areas of the students.

Second, it is hoped that a comparison of the data may furnish information on the variation in degree of stated problems between the two groups. This could be of value in furnishing clues on what to include in the guidance program and curriculum for the beginning and advanced student.

Procedure for Collection of Data

The procedure for securing data used in this study was as follows:

1. Selected the Problem Check List-Form for School of Nursing to determine student problems. The reason for this selection included:
 - a) ease of administration and scoring
 - b) availability of printed forms
 - c) standardization of instrument
 - d) test designed to reveal student problems.
2. Designed the Supplement Questionnaire.
3. Selected a school of nursing on the basis of such criteria as:
 - a) a program leading to a B. S. degree
 - b) accreditation by the National League for Nursing
 - c) Problem Check List not previously administered in the school.
4. Obtained approval to administer the test through a personal interview with the director of the school. Explained the purpose of the study and the possible value of the results.
5. Arranged with the advisers of the two student groups a suitable time to administer the test.
6. Explained to the students the purpose of the study and the fact they were not to sign their names as the results were to be based on a group rather than on an individual. Further explained that the individual tests would not be seen by the school faculty, but that the total findings would be made available for the school's use.
7. Administered the Check List and Supplement.

8. Presented the results in tabular form, comparing the two groups.
9. Drew conclusions.

Preview of Subsequent Chapters

Chapter II is devoted to the validation from the literature of the Problem Check List and to a review of the literature and related studies. In Chapter III the procedures actually followed in procuring the data are delineated and the results obtained, presented in tabular form. Chapter IV is an incorporation of those conclusions which can be drawn from the body of the data, together with a summary and recommendations for further study.

CHAPTER II

REVIEW OF THE LITERATURE AND RELATED STUDIES

Validation from the Literature of the Problem Check List

The instrument used in this study was the Problem Check List-Form for School of Nursing which was adapted by Luella J. Morison from the Problem Check List-College form devised by Ross L. Mooney at the Bureau of Educational Research, Ohio State University. (24)

The Check List consists of 364 problems classified into 13 areas:

1. Health and Physical Development
2. Finances and Living Conditions
3. Social and Recreational Activities
4. Social-Psychological Relations
5. Personal-Psychological Relations
6. Courtship, Sex and Marriage
7. Home and Family
8. Morals and Religion
9. Adjustment to School of Nursing
10. The Future: Professional and Educational
11. Curriculum and School Program
12. Adjustment to Human Relationships in Nursing
13. Adjustments to Administration of Nursing Care.

Each of these 13 areas contains 28 problems, arranged in groups of four across seven columns. The student is to read the problems and underline

those which are of "personal concern"; then, after completing the entire list, is to look back over the items underlined and circle those which are of "most concern." There are five summarizing questions to answer at the end. They are:

1. Do you feel that the items you have marked on the list give a well-rounded picture of your problems?
2. How would you summarize your chief problems in your own words? Write a brief summary.
3. Have you enjoyed filling out the list?
4. Whether you have or have not enjoyed filling out the list, do you think it has been worth while doing? Could you explain your reaction?
5. If the opportunity were offered, would you like to talk over any of these problems with someone on the nursing faculty? If so, do you know the particular person (s) with whom you would like to have these talks? (24)

The author of the check list felt that number one of the summarizing questions is a way of validating the test. In a study reported in the manual, 95 percent of the participants answered "yes," and indicated they felt the Check List gave a well-rounded picture of their problems. (24)

In a study done at the River Falls State College in Wisconsin in 1947, the Problem Check List-College Form was administered to 578 students; of this number 88 percent thought the items marked gave a well-rounded picture of their problems. (31)

Eighty-five percent of the students in a collegiate school of nursing in Oregon who took the test in 1957 also answered the first summarizing question in the affirmative. (20)

The Problem Check List was used in a study of students in a diploma program in Washington in 1958 in which 102 students participated; of this number, 82 percent answered "yes" to question one of the summarizing questions. (26)

These studies would seem to indicate that students completing the Check List do believe it gives a true picture of their problems.

Review of the Literature

Harold E. Jones, Professor of Psychology at the University of California said of the Problem Check List-College Form:

Since the list is not designed to produce "scores" and no normative or correlational data are supplied, it cannot be assessed with regard to the usual concepts of reliability and validity. (17)

He also stated:

The use of the Check List for surveys (unsigned) is advocated as a means of discovering topics for discussion, to throw light on educational needs, and to study problem clusters, trends, and differences among groups. (17)

Morris Krugman, also writing of the college form Check List, stated:

The Mooney Problem Check List is not a test, and therein lies its strength. Psychologists, guidance workers, industrial personnel workers and educators have been searching for years for a simple way to evaluate personality, but simple ways in a complex field have a disagreeable habit of yielding little. Most of the paper and pencil tests of personality have been extremely disappointing. The Mooney Problem Check List has not been in that category because it promised little and produced much. (19)

Gordon and Mooney conducted a study to determine if the horizontal grouping of problems into the various areas was easily discovered by

subjects completing the Check List-College Form. They felt the results would be more valid if this grouping was not obvious because there might be a tendency to skip entire areas that seem inappropriate, or to limit problems in areas that carry a "stigma." (12)

As a part of a pre-counseling procedure, the test was distributed to 126 students (41 of whom had completed the check list previously). The test was collected by instructors the following day. The subjects then completed a questionnaire which contained these questions: (12)

1. State whether items relating to particular classes or types of problems, (i.e., health, religion, etc.) are grouped together in any way or are scattered throughout the Check List.
2. If there is a grouping, please describe the grouping or pattern.

The responses indicated:

	<u>students taking test for first time</u>	<u>students who had taken test before</u>
Items scattered	19	7
Items grouped (incorrectly described)	55	23
Items grouped (correctly described)	11	11

Gordon and Mooney concluded:

The chance of a student's identifying the horizontal grouping of items by problem areas, under circumstances optimally favorable to discovery, is small.... Thus the Check List avoids the undesirable features associated with grouping problems by areas. (12)

One of the conditions necessary for accumulating accurate data when using an instrument such as the Check List is that the subjects answer

honestly and sincerely. Bennett, remarking on the uses of the Mooney Problem Check List, said:

The Mooney Problem Check List and other instruments of this type will have value only for students who take the time to fill them out honestly and with some sense of responsibility. (4)

Commenting along this same line, Ross Mooney asserted:

There is little indication that students try to hide their problems or to "play" with the check lists. They are suprisingly serious and constructively interested, exposing far more problems than had originally been anticipated. (22)

Review of Related Studies

The Check List-Form for School of Nursing was first administered in 1945, by Morison to a group of 321 students, (211 freshmen and 110 seniors) in six schools of nursing located in differing sections of the country. The purpose of this study was twofold: to compare the problems of the different schools, and to explore the various uses of the Check List. (23)

The results included:

1. The average number of problems marked by all students was 35.6 (freshmen 36.5, seniors 33.8).
2. The area in which the students reported the most problems was "Social and Recreational Activities."
3. The problems marked by 25 percent or more were predominantly those showing limitations on time and correlated pressures on the students in schools of nursing. Problems relating to the home, to morals and religion, to courtship, sex and marriage concerned relatively few of the students.

4. Freshmen indicated problems mainly in the areas relating to "Adjustments to School of Nursing," while seniors marked problems primarily centered around their future.
5. There was evidence that the students needed a program which was more sensitive to their development as individual personalities. (23)

In 1952, Eileen Johnson, using the Morison Check List, made a survey of problems listed by the 24 freshmen students enrolled at Memorial Hospital School of Nursing in Tennessee. Her purpose was "...to compare these findings with the information gathered by other investigators, and then try to outline a guidance program which would meet the students' needs as indicated by the survey." (16) The primary problem area was "Adjustment to School of Nursing," with "Social and Recreational Activities, Finances and Living Conditions, and Health and Physical Development" following in that order. Problems relating to "Home and Family, Morals and Religion, Courtship, Sex and Marriage, and Adjustment to Human Relationships in Nursing" were relatively unimportant to the group.

Johnson's recommendations were:

1. A guidance program be inaugurated as soon as possible within Memorial Hospital School of Nursing.
2. An inservice education program be instituted for the faculty to acquaint them with the objectives of the program and its services.
3. Better mental hygiene concepts and a more democratic approach be used in student-faculty relationships. (16)

In 1953, Anthony and Chambers administered the Morison Check List to the students in a small diploma school of nursing. There were 19 freshmen,

14 juniors, and 8 seniors; a total of 41 students. Some of the conclusions of their study include:

1. The Check List helped students identify and state their own specific problems.
2. Finances and Living Conditions, Social and Recreational Activities, Curriculum and School Program, and Adjustment to the School of Nursing were responsible for the most problems; Home and Family, Adjustment to Human Relations in Nursing and Morals and Religion, for the fewest.
3. Seniors were most troubled by the future, professional and educational.
4. The items checked by more than 1/3 of all the students had to do with restrictions of time and freedom.
5. There seemed to be a need for a more adequate guidance program for the students. (2)

They recommended the following curriculum changes for that particular school of nursing:

1. Opportunities be provided for students to search out and express their problems.
2. The philosophy and objectives of the school be reviewed.
3. Special consideration be given to those factors which presented major problems to the students.
4. The guidance program be reviewed for the purpose of discovering how it could be strengthened. (2)

A study done in Washington in 1958, by Margery Pollman, employed the Morison Check List to identify problems of students for implications of curriculum development. She administered the test to 102 students, (35 freshmen, 27 juniors, 40 seniors), in a three year diploma school of nursing. Her findings included:

1. Personal problems involved in maintaining good mental and physical health comprised the majority of the problems reported by freshmen. The need to develop study and communication

skills was recognized by the freshmen; the seniors, also, indicated many problems in this area.

2. The juniors reported more problems in the personal area than the seniors, but the seniors expressed more problems about health and social and recreational activities than the juniors; problems of finances and living conditions ranked high for both classes.
3. The areas of "Curriculum and School Programs" and "Adjustments to Human Relations" were the lowest in both underlined and circled. (26)

After analyzing the results of the Check List, Pollman recommended the following:

1. To develop resources within the school that would lead to an effective personnel guidance program in an attempt to help students deal with their emotional problems.
2. To explore the student's understanding of nursing as a profession (what the student expects of the profession and what the profession expects of the nurse) as a basis for vocational guidance.
3. To have an increased emphasis on ways of communication early in the program, with continued emphasis throughout the total program.
4. To emphasize the concept of positive health for the student as well as the patient.
5. To examine the meaningfulness of learning experiences to the students.
6. To investigate the scheduling of student's practice hours.
7. To examine the orientation programs for all clinical areas.
8. To examine the assignments in clinical practice in terms of learning experience for students.
9. To ascertain ways of building rapport between supervisor-student relationships.
10. To evaluate all areas in terms of adequacy of experience.
11. To examine class and practice hours in terms of balance in the students' lives. (26)

Another study employing the use of the Morison Check List was completed by Martha McCarthy in 1958. Her student population consisted of 20 third quarter freshmen (actually college sophomores) in a collegiate school of nursing in Oregon. The stated purpose was to discover the opinions of the students regarding:

1. The problems which they felt to be currently their own and were willing to admit.
2. Whether specific current problems were of serious concern to the student.
3. Whether constructive staff help was available or being received on such problems.
4. The general effectiveness of the services of the school for helping students with adjustment problems.
5. What the students considered to be the best features of such services.
6. Their suggestions for improvement of these services. (20)

Her findings indicated that:

1. The problem area of most concern was "Personal-Psychological Development"; the areas of least concern were "Home and Family" and "Finances and Living Conditions."
2. The item checked by the most students as being of greatest concern to them was "Not enough time for recreation."
3. Most of the students seemed to feel they were receiving some constructive help from the school staff, or believed they could receive such help if they would seek it.
4. The students rated their school to be "fair" in its services for helping with adjustment problems and suggested more student-faculty activities as a means of promoting better interpersonal relations in this area. (20)

In the same general area of problems and student adjustments to a nursing program, Martha Seitz from the University of Buffalo, in 1958, completed a study to determine the attitudes of student nurses toward

disciplines in their hospital school of nursing. The population for her study consisted of 158 students, (42 first year, 46 second year, and 70 third year). A questionnaire was administered to determine the feelings of the students in regard to policies, rules and regulations in their school. The questionnaires were returned by all participants and contained 52 statements divided into the four following categories:

1. Social living; included: extra-curricular activities, marriage and the counseling and guidance program.
2. Educational program, included: scholastic achievement, study hours, keeping of records and participation in school of nursing committees.
3. Professional ethics, included: behavior, dress and interpersonal relationships.
4. Health program, included: method of communication regarding clinic appointments, reporting of illness and the adequacy of the total health program. (29)

The author made the following recommendations which she indicated as curriculum changes:

1. Careful explanation of the rules and regulations during orientation.
2. Improvement in the guidance program.
3. Review of the rules and regulations resulting in changes.
4. Continuous encouragement and guidance for the 2nd and 3rd year students. (29)

There has been some research done on the problems encountered by students in specified clinical areas. An example of this would be the work done by Sister Mary Elko, in 1958, in relation to problems of students in psychiatric nursing. The purpose of her investigation was to "...determine the number and kinds of problems brought to the nursing faculty by nursing students in their clinical experience in psychiatric

nursing at one selected agency, and how the faculty dealt with these problems." (9) There were 22 faculty members in this setting, with 18 participating in the study. The faculty recorded 118 problems over a period of 30 days, using the first two weeks of each four week period in a twelve week program. The identification of the problem was by faculty observation or by student referral to a faculty member. The frequency and classification included these problem areas:

Problem Area	Number Reported
1. Interpersonal relationships	43
2. Educational requirements	22
3. Performance of nursing procedures	20
4. Adjustments to situations	14
5. Personal health	11
6. Vocational choice	7
7. Miscellaneous; (concern for a friend)	1 (9)

As a result of her analysis of the data Sister Mary formulated these conclusions:

1. Students do initiate a discussion of their problems with faculty members while they are learning psychiatric nursing.
2. In the study, problems relating to interpersonal relationships comprise 37% of the problems.
3. Faculty members reporting in this study referred few problems to others for solution.
4. The faculty members involved in this study rarely reported a felt need for assistance in their counseling of students.
5. Faculty members indicate a considerable depth of interest in students by their handling of the problems the latter present to them. (9)

A study related specifically to medical-surgical clinical practice, was completed in 1958 by Sister Marie Virgine Cantwell. She was interested in determining the use made of guidance resources by students in their initial experience in this clinical area and their satisfaction with the guidance received. The method used to gather the data was the descriptive survey, incident sheet and personal interview. There were 21 students who indicated a total of 72 problems; of these, there were 50 problems for which the student sought no guidance. Of the remaining 22 problems, it was indicated that 8 solutions were satisfactory and 14 were unsatisfactory. The following were the areas of classification:

1. "Ineffective Communication": student's inability to make herself understood; or lack of rapport. 12 problems or 17%.
2. "Heavy Assignment": large number of patients and/or extra ward duties. 16 problems or 22%.
3. "Lack of Directed Learning Experience": lack of meaningful or goal directed experience, student not advanced enough for assignment or deprived of necessary assistance. 44 problems or 61%. (6)

The reasons listed by the students for not seeking guidance were:

1. Absence of Clinical Instructor	25
2. Assistance unnecessary	14
3. Futility	<u>11</u>
Total	50 (6)

The conclusions of Cantwell's study were:

1. Students do not always recognize a situation which requires assistance from another.
2. In this situation, at this time, students appear to carry a heavy service load which has little goal directed learning.
3. Students did not seek guidance in most cases because they felt no one was available to give assistance.

4. The greater number of times when guidance was sought it was considered unsatisfactory. (6)

Another study, also using the descriptive survey and interview method, was reported by Constance L. Ferris in 1958. She was interested in determining problems of interpersonal relationships, how the problems were resolved and with what degree of satisfaction as identified by 20 students (the entire junior class) in the fourth month of their medical-surgical experience in a diploma school of nursing. Fifteen students identified 20 problems on the interpersonal data sheet, five students identified 6 additional problems in personal interviews and one student did not identify any. There were three areas of difficulty:

1. Inability to complete nursing tasks.
2. Reaction to patient's condition or behavior.
3. Failure to determine certain of the patient's needs.

The persons consulted or offering assistance with the difficulty and the expressed satisfaction of the students were illustrated by the following table:

<u>Persons consulted or offering assistance</u>	<u>Frequency</u>	<u>Frequency Student's Reaction</u>	
		<u>Helpful</u>	<u>Nonhelpful</u>
Clinical Instructor	3	1	2
Head Nurse	2	0	2
Nursing Personnel	2	1	1
Nursing Team Members	2	2	0
Physicians	2	1	1
Graduate Nurses	1	0	1
Patient	<u>1</u>	<u>1</u>	<u>0</u>
Total	13	6	7 (10)

"Nursing Personnel" was identified in the preceding table as "non-professional." Of 26 identified problems dealing with interpersonal

relationships, there were only six with which students believed they received satisfactory help. Both Ferris (10) and Cantwell (6) revealed students felt they were not receiving satisfactory help with the majority of their problems.

The results of a questionnaire study, published in 1958, indicated that: "...while it is generally agreed that most students experience adjustment difficulties in new educational surroundings there are a few problems of adjustment which are unique to nursing education." (18)

The problems most often reported by students in the study were grouped into the following categories:

1. Relationships with Faculty, Patients, Roommates and Others.
2. Grades, Achievements and Study Habits: students seemed unable to maintain former scholastic records.
3. Homesickness: referred to most frequently by 1st year students and indicated as a recurring problem by 2nd and 3rd year students.
4. Relationships with Parents and Boyfriends: parents sometimes encouraging students to leave schools of nursing to enter other fields. Whether or not to marry or to postpone marriage was a recurring problem.
5. Vocational and Educational Plans: which job to take, whether to take a job or continue with more education; a few expressed doubts on whether they should continue to prepare for a nursing profession. (18)

Summary

The review of the literature and related studies would seem to indicate very clearly that student nurses do have many problems. Research concerning the use of the Problem Check List indicates this is an acceptable tool for identifying these problems. The various studies on the use of the Check List reported in this chapter reveal considerable similarity in findings. These are depicted in Tables 3 and 4, Chapter III. To avoid becoming too discouraged by the complexities faced by the young woman embarking on a career in nursing it may be well to keep in mind this statement by Lulu Wolf:

The emphasis given to the problems of young people in the past few years and the increasing feeling of a need for guidance and counseling have developed, on the part of many people, the feeling that problems are somehow unhealthy. Without minimizing the need and desirability of guidance, it is necessary to recognize that the existence and recognition of problems is a healthy sign. (34)

Thus, it is perhaps an encouraging factor that the student is able to recognize and is willing to admit her difficulties. The identification of these difficulties can be the starting point in providing an adequate solution.

CHAPTER III

TREATMENT OF THE DATA

The Problem Check List, Form for Schools of Nursing by Laella J. Morison was completed by sophomore and senior nursing students in March, 1960 at an Oregon Collegiate School of Nursing as the basis for the data contained in this study. A supplementary questionnaire, focused on sources utilized in the solution of problems, was included. A total of 21 sophomores and 29 seniors participated. One student from each group was absent and no attempt was made to include these two in the study.

Prior to filling out the Check List, the students were advised that the purpose of the study was solely to obtain a comparison of the problems indicated by the two groups and they were assured that after accumulation of the composite figures, the forms would be destroyed. They were also advised not to sign their names since no attempt was made to identify individuals.

The average age of the sophomores was 20, range 18-25; and of the seniors, 22, range 19-27. The seniors had entered the school in September, 1956 and were scheduled to graduate September, 1960. The sophomores had entered in September, 1958 with graduation intended September, 1962. The admission policies were the same for both groups.

The senior class, on admission, included a total of 43 students, 11 of whom withdrew during the freshman year and three during the clinical period. In the sophomore class, a total of 46 were originally admitted; 19 withdrew as freshmen while five withdrew during the clinical period.

The Problem Check List was chosen as the instrument for gathering data because of the ease of administration and scoring, the availability of printed forms, the standardization of the test, and because it is designed to reveal student problems. The supplement questionnaire was intended to reveal who was of most help to the students in solving their problems and in adjusting to the school of nursing and what suggestions the students had for the improvement of guidance services in their school. The directions for completing the Check List instruct the student to, "Read the list slowly, pause at each item, and if it suggests something which is troubling you, 'underline' it.... Go through the whole list, underlining the items which suggest troubles (difficulties, worries) of concern to you. After completing the first step, look back over the items you have underlined and 'circle the numbers' in front of the items which are of 'most concern' to you." (Appendix A) In tabulating the responses of the two groups, the problems underlined were listed separately from the problems circled.

The Chi-square technique was used in comparing the results of the students' answers because it offers a statistical evaluation of differences. (See Appendix C for formula.) A z score was obtained to compare any category with fewer than five responses for either group. (See Appendix C for formula.)

The data presented from the tabulations of the Check List and questionnaire are intended to supplement the growing body of statistics on problems faced by student nurses.

As indicated in Table 1 there were a greater number of problems underlined per student by the sophomores than by the seniors. The areas

TABLE 1

CHI-SQUARE AND FREQUENCY OF PROBLEMS BY AREA IN THE MORISON
PROBLEM CHECK LIST UNDERLINED AND CIRCLED BY 21 SOPHOMORES
AND 29 SENIORS IN AN OREGON COLLEGIATE SCHOOL OF NURSING

General Area	Underlined		X ² (c)	Circled		X ²
	Soph. (a) N:21	Sr. (b) N:29		Soph. N:21	Sr. N:29	
Health and Physical Development	75	112	.32	21	19	3.30
Finances and Living Conditions	67	107	1.00	21	12	10.85***
Social and Recreational Activities	99	101	5.39*	28	12	8.40***
Social-Psychological Relations	88	84	6.76**	25	23	.02
Personal-Psychological Relations	116	105	11.80***	40	28	1.59
Courtship, Sex and Marriage	53	68		15	24	.68
Home and Family	46	52	1.05	15	10	2.30
Morals and Religion	31	52		12	20	
Adjustment to School of Nursing	106	80	19.78***	33	5	17.35***
The Future: Professional and Educational	75	97	.21	20	16	2.64
Curriculum and School Program	66	102	.58	22	5	24.01***
Adjustment to Human Relationships in Nursing	30	61	3.26	8	2	
Adjustment to Administration of Nursing Care	46	61		12	4	
Total:	898	1082		272	180	
Mean:	42.76	37.31		12.95	6.21	
Range:	84-10	72-7		44-2	30-0	

* significant at .05 level

** significant at .02 level

*** significant at .01 level

(a) Soph. = Sophomore Students

(b) Sr. = Senior Students

(c) X² = Chi-square

of significant difference between the two groups were: "Social and Recreational Activities," "Social-Psychological Relations," "Personal-Psychological Relations," and "Adjustment to School of Nursing." In all four of these areas the differences resulted from the sophomores marking a proportionately greater number of problems than the seniors. This indicates that the sophomores felt they had a greater number of problems in these areas. In the other nine areas, no significant differences were found.

In the problems circled there were also four areas of significant difference: "Social and Recreational Activities," "Finances and Living Conditions," "Adjustment to School of Nursing," and "Curriculum and School Program." Differences in two areas, ("Social and Recreational Activities," and Adjustments to School of Nursing"), were found in both the circled and underlined categories. The differences in the circled problems were again caused by a proportionately greater number of problems identified by the sophomore group.

Table 2 shows the rank order of the underlined and circled problems in all 13 areas for both groups of students. In arranging this table, the general areas were listed in the same order as in the Check List. The area checked by the most students received a rank of "1"; the area with the second largest number of checks, a rank of "2," continuing in this way to the area having the fewest checks, a rank of "13." In the case of duplicate numbers the average rank was given.

The correlation (formula in Appendix C) between the sophomores and seniors in the underlined problems was .657 (P. .05), (25) while for

TABLE 2

RANK ORDER OF PROBLEM AREA* IN THE MORISON PROBLEM CHECK LIST
 UNDERLINED AND CIRCLED BY 21 SOPHOMORE AND 29 SENIOR
 STUDENTS IN AN OREGON COLLEGIATE SCHOOL OF NURSING

General Area	Sophomores (N:21)		Seniors (N:29)	
	Under- lined	Circled	Under- lined	Circled
Health and Physical Development	5.5	6.5	1	5
Finances and Living Conditions	7	6.5	2	7.5
Social and Recreational Activities	3	3	5	7.5
Social-Psychological Relations	4	4	7	3
Personal-Psychological Relations	1	1	3	1
Courtship, Sex, and Marriage	9	9.5	9	2
Home and Family	10.5	9.5	12.5	9
Morals and Religion	12	11.5	12.5	4
Adjustment to School of Nursing	2	2	8	10.5
Future: Professional and Educational	5.5	8	6	6
Curriculum and School Program	8	5	4	10.5
Adjustment to Human Relationships in Nursing	13	13	10.5	13
Adjustment to Administration of Nursing Care	10.5	11.5	10.5	12

Rank order correlations:

Sophomore underlined with sophomore circled	= .948	P. .01
Senior underlined with senior circled	= .277	P. NS
Senior underlined with senior circled (omitting 6 who did not circle any)	= .346	P. NS
Sophomore underlined with senior underlined	= .657	P. .05
Sophomore circled with senior circled	= .330	P. NS

*Ranked from 1 (highest frequency), to 13 (lowest frequency)

the circled problems between the sophomores and seniors it was .330 (P. NE) (25). This reveals a fairly close agreement in the rank orders given by the two groups for the problems underlined, but low agreement in the rank orders given for the problems circled.

An interesting factor is evident in analyzing the ranks given to the problems underlined in relation to ones circled. Since a problem must first be underlined before it can be circled, it could be assumed that the greatest frequency of problems circled would be closely related to the greatest frequency of problems underlined. Such was the case in the sophomore group; a rank order correlation of .948 was obtained in comparing the underlined and circled categories, an almost perfect correlation; however, in the senior group, this same correlation was only .277, indicating no relationship. It was reasoned this discrepancy might be due to the fact that six of the 29 seniors circled no problems. Another correlation was done deleting these six; this proved to be only .346 (still very low relationship), which does not account for the variation.

As defined in the Check List, the items underlined are of "concern" to the individual, while those circled are of "most concern." (24) It may be assumed that for seniors in this study, the areas having the greatest occurrence of "concern" are not the same areas as those having the greatest occurrence of "most concern." In only four areas, (The Future: Professional and Educational, Adjustment to School of Nursing, Personal-Psychological Relations, and Social-Psychological Relations), is there relatively close agreement between rank circled and rank underlined for the seniors.

Table 3 is a tabulation of the rank order of the problems underlined in this study and the problems underlined in the studies done by Morison (23), McCarthy (20) and Pollman (26).

Because a stated purpose of this study is to compare the beginning and advanced student nurse, the rank order of the freshmen and senior group only were used from the Pollman and Morison studies. The study done by McCarthy included freshmen students exclusively.

Table 4 indicates the rank order correlations between the four studies. (See Appendix C for formula and table used to establish critical values.)

Table 4 lists the rank order correlations of this study and the studies done by Morison (23), Pollman (26) and McCarthy (20).

The rank order of this study has a close relationship to the rank order found by Morison (23) and McCarthy (20) but no relationship to the rank order found by Pollman. (26) There is also agreement between the findings of McCarthy (20) and Morison (23) but no agreement between either McCarthy (20) or Morison (23) with Pollman. (26)

A relationship was also found between the freshmen and senior group in the Morison (23) study, and between the sophomore and senior group in this study, but not between the freshmen and senior group in the Pollman (26) study.

Tables 5 through 17 are tabulations showing the percent of sophomores and seniors marking each of the 28 items in all 13 areas of the Check List. Attention is drawn to the differences and similarities between the student groups for the area as a whole, Chi-square or z score and rank order obtained. Any individual item circled by 20 percent

TABLE 3

RANK ORDER OF UNDERLINED PROBLEMS BY AREA IN THE
MORISON CHECK LIST OF THIS AND OTHER STUDIES

General Area	N =	Darm		Morison		Pollman		McCarthy
		Sr. (a)	Soph. (b)	Sr. Fresh. (c)	Sr. Fresh.	Fresh.	Fresh.	
		29	21	110	212	40	35	20
<hr/>								
Health and Physical Development	1		5.5	6	4	2	4	5
Finances and Living Conditions	2		7	3	7	3	1	12
Social and Recreational Activities	5		3	1	1	1	5	2
Social-Psychological Relations	7		4	7	8.5	10	9	9
Personal-Psychological Relations	3		1	4	3	9	6	1
Courtship, Sex, and Marriage	9		9	11	11	13	3	10
Home and Family	12.5		10.5	12.5	12.5	4	8	13
Morals and Religion	12.5		12	12.5	12.5	7	2	8
Adjustment to School of Nursing	8		2	10	2	5	10	3
Future: Professional and Educational	6		5.5	2	8.5	8	7	7
Curriculum and School Program	4		8	5	5	12	13	6
Adjustment to Human Relationships in Nursing	10.5		13	8.5	10	6	11	11
Adjustment to Administration of Nursing Care	10.5		10.5	8.5	6	11	12	4

(a) Sr. = Senior Students

(b) Soph. = Sophomore Students

(c) Fresh. = Freshmen Students

TABLE 4

RANK ORDER CORRELATIONS OF PROBLEM AREAS OF THIS STUDY WITH
OTHER STUDIES USING THE MORISON PROBLEM CHECK LIST

Studies	Rank Order Correlation
Darm Soph.-McCarthy Fresh.	.648*
Darm Soph.-Pollman Fresh.	.088
Darm Soph.-Morison Fresh.	.768**
McCarthy Fresh.-Pollman Fresh.	.176
Pollman Fresh.-Morison Fresh.	.162
Morison Fresh.-McCarthy Fresh.	.830**
Darm Sr.-Darm Fresh.	.657*
Pollman Sr.-Pollman Fresh.	.374
Morison Sr.-Morison Fresh.	.621*
Darm Sr.-Pollman Sr.	.234
Pollman Sr.-Morison Sr.	.234
Morison Sr.-Darm Sr.	.791**
* significant at .05 level	
** significant at .01 level	

or more in either group is noted. Comparisons are made between individual items underlined by 20 percent or more in either group. The problems checked by one third or more in each group are indicated. The items not marked by any student in the total group are also indicated.

For ease in figuring percents, a table is prepared showing the existing percent for any given number of students marking an item. To convert the percentage shown to actual frequency, see Appendix D for this table.

The area of Health and Physical Development ranked 5.5 for the sophomores in the underlined problems and 6.5 in the circled problems. For the seniors it was ranked 1 in those underlined and 5 in those circled. The Chi-square for the area as a whole was .32 for underlined, and 3.30 for circled, indicating no difference between the seniors and sophomores.

The only item showing a significant difference between the two groups was "Not enough sleep," with a Chi-square of 4.71. This item was circled by 21 percent of the seniors and underlined by 69 percent, revealing concern by a majority of this group. This is one of the few items in the Check List where the difference between the groups was caused by a proportionately larger number of checks by the seniors.

The items marked by one third or more of the sophomores include: "Tiring very easily," "Being overweight," "Not enough sleep" and "Not getting enough outdoor air and sunshine." Twenty-nine percent of the seniors also circled "Tiring very easily." For the seniors the items marked by one third or more were: "Not enough sleep" and "Not getting enough outdoor air and sunshine."

TABLE 5

PERCENT OF 21 SOPHOMORES AND 29 SENIORS IN AN OREGON COLLEGIATE SCHOOL OF NURSING WHO UNDERLINED AND CIRCLED EACH ITEM IN AREA 1, HEALTH AND PHYSICAL DEVELOPMENT, OF THE MORISON PROBLEM CHECK LIST

No.	Item	Underlined		χ^2 (c)	Circled	
		Soph. (a) N:21	Sr. (b) N:29		Soph. N:21	Sr. N:29
1	Tiring very easily	48	31	1.42	29	3
2	Being underweight	0	3		0	0
3	Being overweight	43	21	2.85	19	10
4	Not enough sleep	38	69	4.71*	5	21
53	Not getting enough exercise	24	28	.09	5	0
54	Not getting enough outdoor air and sunshine	62	69	.27	19	0
55	Threatened with a serious ailment	0	0		0	0
56	Afraid I may need an operation	0	0		0	0
105	Afraid I may contract disease	0	0		0	0
106	Poor posture	14	10		5	0
107	Poor complexion	5	24		0	10
108	Not very attractive physically	10	3		0	3
157	Being clumsy and awkward	19	7		5	0
158	Being too short	0	3		0	0
159	Being too tall	5	3		0	0
160	Having weak eyes	5	10		0	0
209	Having frequent sore throat	14	3		0	0
210	Having frequent colds	14	14		5	3
211	Nose or sinus trouble	10	7		0	0
212	Speech handicap (stammering, etc.)	0	3		0	0
261	Having poor teeth	10	10		5	0
262	Having poor hearing	0	0		0	0
263	Tired feet	5	21		0	0
264	Frequent headaches	0	7		0	3
313	Having menstrual disorders	14	24		5	10
314	Having digestive troubles	10	3		0	0
315	Not getting enough to eat	0	0		0	0
316	Not eating a well-balanced diet	10	10		0	0
Mean:		3.57	3.86		1	.66
Range:		8-0	12-0		3-0	5-0

* significant at .05 level

- (a) Soph. = Sophomore Students
 (b) Sr. = Senior Students
 (c) χ^2 = Chi-square

There was agreement between the groups in their expressed concern for: "Tiring very easily," "Being overweight," "Not getting enough exercise," "Not getting enough outdoor air and sunshine," "Poor complexion," "Tired feet," and "Having menstrual disorders."

There were four items not marked by the total group: "Threatened with a serious ailment," "Afraid I may need an operation," "Afraid I may contract disease," and "Having poor hearing."

The area, Finances and Living Conditions, had a sophomore rank of 7 for underlined, 6.5 for circled and a senior rank of 2 for underlined and 7.5 for circled. The Chi-square for underlined was 1.00 indicating no significant difference between the groups, while for the circled problems it was 10.85, a difference significant at the .01 level.

There were three individual items in this area with significant differences: "Family worried about finances," "No regular source of income," and "Tiring of same meals all the time." In one of these, "No regular source of income," the difference is due to a greater than expected frequency from the senior group while the differences in the other two were caused by a greater frequency in the sophomore group.

One third or more of the sophomores indicated concern for: "Family worried about finances," "Disliking financial dependence on family," and "Tiring of same meals all the time." The items of concern to one third or more of the seniors were: "Too little money for clothes," "Disliking financial dependence on family," and "No regular source of income."

There was agreement between the groups in their concern for: "Not enough suitable clothes to wear," "Too little money for clothes," "Managing my finances poorly," "Going in debt for nursing expenses,"

TABLE 6

PERCENT OF 21 SOPHOMORES AND 29 SENIORS IN AN OREGON COLLEGIATE SCHOOL OF NURSING WHO UNDERLINED AND CIRCLED EACH ITEM IN AREA 2, FINANCES AND LIVING CONDITIONS, OF THE MORISON PROBLEM CHECK LIST

No.	Item	Underlined		I ² (c)	Circled	
		Soph. (a) N:21	Sr. (b) N:29		Soph. N:21	Sr. N:29
5	Not enough suitable clothes to wear	24	21	.69	0	3
6	Too little money for clothes	14	34		5	3
7	Having less spending money than others	14	14		10	0
8	Managing my finances poorly	24	3		10	0
57	Going in debt for nursing expenses	14	28		5	14
58	Missing previous regular salary	10	10		0	0
59	Going through nursing on too little money	5	14		0	0
60	Doubting that nursing is worth the financial sacrifices	5	3		0	0
109	Needing money for education beyond nursing course	5	3		5	0
110	Having to watch every penny I spend	19	21	.20	5	0
111	Family worried about finances	38	7 (z)	2.71 (d)	14	0
112	Disliking financial dependence on family	33	55	2.34	10	7
161	No regular source of income	5	55 (z)	3.72	0	10
162	Too little money for recreation	10	17		5	0
163	Having financial dependents	0	0		0	0
164	Too many financial problems	14	0		14	0
213	Living quarters unsatisfactory	10	3		0	0
214	Lacking privacy in living quarters	0	0		0	0
215	Living with unsatisfactory room-mates	0	0		0	0
216	Noise in home interfering with sleep	0	7		0	0
265	Infrequent all-night or late permits	0	0		0	0
266	Not fitting into the group with which I live	5	3		0	3
267	Living conditions don't provide "home" environment	0	17		0	0

(concluded on next page)

TABLE 6 (concluded)

No.	Item	Underlined		$\chi^2(c)$	Circled	
		Soph. (a) N:21	Sr. (b) N:29		Soph. N:21	Sr. N:29
268	Not getting along with the House Mother	0	0		0	0
317	Tiring of same meals all the time	62	28	5.89*	19	0
318	Not being trusted outside Nurses' Home	5	0		0	0
319	Inadequate discipline in Nurses' Home	0	0		0	0
320	Too much discipline in Nurses' Home	5	24		0	0
	Means:	3.19	3.69		1	.41
	Range:	8-0	8-0		5-0	4-0

* Chi-square significant at .02 level

' z score significant at .003 level

" z score significant at .006 level

(a) Soph. = Sophomore Students

(b) Sr. = Senior Students

(c) χ^2 = Chi-square

(d) z = z score

"Having to watch every penny I spend," "Disliking financial dependence on family," and "Too much discipline in Nurses' Home."

The five items not marked by the combined group in this area were: "Having financial dependents," "Lacking privacy in living quarters," "Living with unsatisfactory roommates," "Infrequent all-night or late permits," "Not getting along with the House Mother," and "Inadequate discipline in Nurses' Home."

In the area, Social and Recreational Activities, there was a significant difference between the seniors and sophomores in both the problems underlined and those circled. The Chi-square was 5.39, significant at the .05 level, for underlined and 8.40, significant at the .01 level for the circled. This area had an underlined and circled rank order of 3 for the sophomores; while the seniors ranked it 5 for underlined and 7.5 for circled.

The individual items showing significant differences were: "Not enough time for recreation," and "Too little chance to read what I like," the sophomores having a greater than expected frequency.

The items showing similarity of concern were: "Lacking a place to entertain friends," "Too little social life," "Unskilled in conversation," "Not enough time for myself," "Desiring more cooperation among students," "Too little time for sports," "Too little chance to enjoy art or music," "Unable to lead a well-rounded life," and "Too little chance to do what I want to do."

One third or more of the sophomores checked: "Not enough time for recreation," "Too little chance to enjoy art or music," and "Too little

TABLE 7

PERCENT OF 21 SOPHOMORES AND 29 SENIORS IN AN OREGON COLLEGIATE SCHOOL OF NURSING WHO UNDERLINED AND CIRCLED EACH ITEM IN AREA 3, SOCIAL AND RECREATIONAL ACTIVITIES, OF THE MORISON PROBLEM CHECK LIST

No.	Item	Underlined		x2(c)	Circled	
		Soph. (a) N:21	Sr. (b) N:29		Soph. N:21	Sr. N:29
9	Not enough time for recreation	48	14	(z)2.63 ¹ (d)	10	0
10	Lacking a place to entertain friends	14	38		0	3
11	Wanting to learn how to entertain	14	14		5	0
12	Being ill at ease at social affairs	19	14		5	7
61	Boring days off	5	24		5	0
62	Too little social life	24	14		10	3
63	Awkward in meeting people	19	7		0	3
64	Unskilled in conversation	24	10		10	3
113	Missing former social life	14	3		0	0
114	Slow in getting acquainted with people	14	10		0	0
115	Nothing interesting to do in spare time	0	14		0	0
116	Not enjoying many things others enjoy	10	7		0	3
165	Unsure of social etiquette	19	10		5	3
166	Wanting to learn how to dance	5	7		0	0
167	Not knowing what to do on a date	14	0		5	0
168	Feeling my personal appearance is unsatisfactory	19	10		5	3
217	Not enough time for myself	5	21		0	3
218	Too much social life	0	3		0	0
219	Failing to have fun in school activities	14	7		5	0
220	Desiring more cooperation among students	10	31		5	3
269	Too little time for sports	29	14		10	0
270	Too little chance to enjoy art or music	33	17	1.73	14	0
271	Too little chance to listen to the radio	5	0		0	0
272	Too little chance to go to shows	19	0		10	0

(concluded on next page)

TABLE 7 (concluded)

No.	Item	Underlined		χ^2 (c)	Circled	
		Soph. (a) N:21	Sr. (b) N:29		Soph. N:21	Sr. N:29
312	Unable to lead a well-rounded life	29	7		11	0
313	Too little chance to do what I want to do	11	21		10	3
314	Too little chance to read what I like	43	17	3.96*	10	0
315	Having no hobby	10	11		0	0
	Mean:	4.71	3.48		1.33	.41
	Range:	11-0	7-0		5-0	3-0

† z score significant at .01 level

* Chi-square significant at .05 level

- (a) Soph. = Sophomore Students
 (b) Sr. = Senior Students
 (c) χ^2 = Chi-square
 (d) z = z score

chance to read what I like." There was only one problem checked by one third or more of the seniors, it was, "Lacking a place to entertain friends."

There were no items in this area not checked by at least one in either group.

The rank order for underlined and circled problems for the sophomore group in this area, Social Psychological Relations, was 4; for the senior group it was underlined 7 and circled 3. The Chi-square for circled was .02 denoting very close agreement, while for underlined it was 6.76 a difference significant at the .01 level.

There was no single item in this area where a significant difference was found.

The items of similar concern to the two groups were: "Feeling inferior," "Hurting people's feelings," "Wanting a more pleasing personality," "Speaking or acting before I think," "Talk shop too much," and "Tend to complain too much."

The items marked by one third or more of the sophomores include: "Wanting a more pleasing personality," "Speaking or acting before I think," and "Tend to complain too much." There was only one item in this area marked by one third or more of the seniors, "Tend to complain too much."

Twenty-nine percent of the sophomores circled "Tend to complain too much." This is interesting to note since in this study the sophomores consistently marked a proportionately greater number of problems.

There were no items in this area not checked by at least one student in either group.

TABLE 8

PERCENT OF 21 SOPHOMORES AND 29 SENIORS IN AN OREGON COLLEGIATE SCHOOL OF NURSING WHO UNDERLINED AND CIRCLED EACH ITEM IN AREA 4, SOCIAL-PSYCHOLOGICAL RELATIONS, OF THE MORISON PROBLEM CHECK LIST

No.	Item	Underlined		$\chi^2(c)$	Circled	
		Soph. (a) N:21	Sr. (b) N:29		Soph. N:21	Sr. N:29
13	Shyness	14	17		14	3
14	Being slow in making friends	14	10		5	0
15	No real friends in school of nursing	14	0		5	0
16	Feelings too easily hurt	19	21		5	17
65	Unpopular	10	7		5	3
66	Being made fun of	5	0		0	0
67	Being talked about	10	0		0	0
68	Feeling inferior	29	14		10	3
117	Hurting people's feelings	24	7		5	3
118	Being watched by other people	14	10		0	0
119	Being left out of things	14	14		5	3
120	Being criticized by others	10	7		5	3
169	Being snubbed	5	0		0	0
170	Being called "high-hat"	5	7		0	0
171	Losing friends	5	0		0	0
172	Not getting along with other people	14	3		5	3
221	Disliking certain persons	14	24		0	3
222	Being disliked by certain persons	5	10		0	3
223	Getting into arguments	10	3		0	0
224	Being jealous	19	7		0	0
273	Wanting a more pleasing personality	33	21	1.01	10	10
274	Too easily led by other people	5	3		0	0
275	Picking the wrong kind of friends	5	0		5	0
276	Speaking or acting before I think	43	24	1.96	10	7
325	Talk too much about personal affairs	5	10		0	3
326	Talk shop too much	10	31		5	3
327	Tend to complain too much	57	34	2.45	29	7
328	Being too gullible	10	3		0	0
Mean:		4.19	2.90		1.19	.79
Range:		16-0	9-0		4-0	4-0

- (a) Soph. = Sophomore Students
 (b) Sr. = Senior Students
 (c) χ^2 = Chi-square

The area, Personal-Psychological Relations, was given a rank of 1 by the sophomores in both circled and underlined, and a rank of 3 by the seniors in underlined; 1 in circled. The Chi-square for the circled was 1.59 disclosing similar concern for the two groups, but the Chi-square for the underlined was 11.80 revealing a difference between the two groups significant at the .01 level.

As in the last area there were no individual items showing significant differences between the seniors and sophomores.

On only one item, "Taking things too seriously," was there concern indicated by one third or more of the seniors. There were a total of eight problems checked by one third or more of the sophomores. These were: "Nervousness," "Moodiness, having the 'blues,'" "Daydreaming," "Forgetting things," "Stubbornness," "Laziness," "Afraid of making mistakes," and "Lacking self-confidence."

The two groups agreed in their concern for: "Too self-centered," "Taking things too seriously," "Nervousness," "Getting excited," "Moodiness, having the 'blues,'" "Too easily discouraged," "Worrying about unimportant things," "Daydreaming," "Forgetting things," "Stubbornness," "Laziness," "Afraid of making mistakes," "Lacking self-confidence," and "Having no one to tell my troubles to."

Two items, "Stubbornness and lacking self-confidence," were circled by more than 20 percent of the sophomores.

There were two items left unmarked: "Afraid when left alone" and "Can't see the value of things I do."

TABLE 9

PERCENT OF 21 SOPHOMORES AND 29 SENIORS IN AN OREGON COLLEGIATE SCHOOL OF NURSING WHO UNDERLINED AND CIRCLED EACH ITEM IN AREA 5, PERSONAL-PSYCHOLOGICAL RELATIONS, OF THE MORISON PROBLEM CHECK LIST

No.	Item	Underlined		$\chi^2(c)$	Circled	
		Soph. (a) N:21	Sr. (b) N:29		Soph. Sr. N:21 N:29	
17	Too self-centered	24	7		14	0
18	Taking things too seriously	24	38	1.03	10	10
19	Nervousness	33	28	.03	10	10
20	Getting excited	24	14		5	0
69	Moodiness, having the "blues"	33	48	1.12	0	10
70	Not having any fun	5	0		5	0
71	Failing to get ahead	5	0		5	0
72	Sometimes wishing I'd never been born	19	3		0	0
121	Not doing anything well	10	0		5	0
122	Too easily discouraged	24	14		0	0
123	Unhappy too much of the time	14	7		10	3
124	Worrying about unimportant things	19	24		5	7
173	Daydreaming	33	17	1.73	0	0
174	Forgetting things	33	14		10	0
175	Afraid when left alone	0	0		0	0
176	Not taking things seriously enough	5	10		5	0
225	Losing my temper	10	17		0	0
226	Stubbornness	38	24	1.12	24	10
227	Carelessness	14	0		10	0
228	Laziness	33	14		14	3
277	Afraid of making mistakes	43	24	1.96	19	10
278	Can't make up my mind about things	10	14		0	7
279	Lacking self-confidence	48	24	2.99	29	14
280	Can't see the value of things I do	0	0		0	0
329	Too many personal problems	10	10		0	0
330	Feeling that nobody understands me	14	0		0	0
331	Having no one to tell my troubles to	24	7		14	3
332	Afraid of a "nervous breakdown"	5	3		0	3
Means:		5.52	3.62		1.91	.97
Range:		12-0	13-0		7-0	8-0

- (a) Soph. = Sophomore Students
 (b) Sr. = Senior Students
 (c) χ^2 = Chi-square

The category, Courtship, Sex and Marriage, had a sophomore rank of 9 for underlined and 9.5 for circled. The seniors ranked it 9 for underlined and 2 for circled. A Chi-square was not established for the underlined problems, (the mean and the expected frequencies were very close); in the case of the circled problems the Chi-square was .68 establishing very close relationship between the concern of the two student groups.

There was one item, "Not mixing well with opposite sex," with a significant difference between the groups.

The groups agreed in their concern for the following: "Too few dates," "Wondering if I'll find a suitable mate," "Wondering if I'll ever get married," and "Absence of boy friend."

One third or more sophomores indicated concern for: "Not mixing well with opposite sex," and "Wondering if I'll find a suitable mate." There were no items marked by one third or more of the seniors.

There were five items receiving no checks: "Going steady," "Insufficient knowledge about sex matters," "Competition in a love affair," and "Venereal disease."

Area 7 in the Check List, Home and Family, had a Chi-square of 1.05 for the underlined problems and 2.30 for the circled problems, disclosing no significant difference between the sophomores and seniors. The rank order in this area for sophomores was 10.5 underlined and 9.5 circled. For the seniors it was 12.5 underlined and 9 circled.

There were no separate items marked by one third or more of the students in either group. Also no items revealed significant differences between the groups.

TABLE 10

PERCENT OF 21 SOPHOMORES AND 29 SENIORS IN AN OREGON COLLEGIATE SCHOOL
OF NURSING WHO UNDERLINED AND CIRCLED EACH ITEM IN AREA 6, COURTSHIP,
SEX, AND MARRIAGE, OF THE MORISON PROBLEM CHECK LIST

No.	Item	Underlined		x2(c)	Circled	
		Soph. (a) N:21	Sr. (b) N:29		Soph. N:21	Sr. N:29
21	Not mixing well with opposite sex	33	3	(z)2.84 ¹ (d)	5	3
22	Not enough time for dates	0	3		0	0
23	"Going steady"	0	0		0	0
24	Being in love with someone I can't marry	5	3		0	3
73	Too few dates	29	14		10	7
74	Uninterested in opposite sex	5	0		0	0
75	Embarrassed in discussions of sex	0	3		0	0
76	Wondering if I'll find a suitable mate	48	28	2.12	5	3
125	Disturbed by ideas of sexual acts	5	7		0	0
126	Insufficient knowledge about sex matters	0	0		0	0
127	Wondering if I'll ever get married	29	21	.41	14	3
128	Afraid of losing the one I love	10	3		0	0
177	Going with a person my family won't accept	5	7		5	3
178	Being in love	5	7		0	0
179	Deciding whether I'm in love	10	14		5	7
180	Afraid of close contact with opposite sex	14	0		0	0
229	Breaking up a love affair	0	21		0	7
230	Choice of continuing training or marrying	10	0		10	0
231	Thinking too much about sex matters	0	0		0	0
232	Competition in a love affair	0	0		0	0
281	Putting off marriage	14	17		5	7
282	Engagement	0	3		0	0

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TABLE 10 (concluded)

No.	Item	Underlined		χ^2 (c)	Circled	
		Soph.(a) N:21	Sr.(b) N:29		Soph. N:21	Sr. N:29
283	Absence of boy friend	14	31		0	14
284	Religious differences preventing marriage	0	7		0	7
333	Wanting love and affection	10	14		10	3
334	Disappointed in a love affair	0	14		0	3
335	Petting and necking	10	21		5	10
336	Venereal disease	0	0		0	0
	Mean:	2.52	2.34		.71	.83
	Range:	7-0	8-0		3-0	5-0

* z score significant at .006 level

- (a) Soph. = Sophomore Students
 (b) Sr. = Senior Students
 (c) χ^2 = Chi-square
 (d) z = z score

TABLE 11

PERCENT OF 21 SOPHOMORES AND 29 SENIORS IN AN OREGON COLLEGIATE SCHOOL
OF NURSING WHO UNDERLINED AND CIRCLED EACH ITEM IN AREA 7,
HOME AND FAMILY, OF THE MORISON PROBLEM CHECK LIST

No.	Item	Underlined		χ^2 (c)	Circled	
		Soph. (a) N:21	Sr. (b) N:29		Soph. N:21	Sr. N:29
25	Being criticized by my parents	24	0		5	0
26	Mother	14	7		5	7
27	Father	5	3		5	3
28	Parents sacrificing too much for me	24	14		5	3
77	Parents separated or divorced	0	7		0	0
78	Death in the family	0	3		0	0
79	Father not living	5	10		0	0
80	Mother not living	5	3		0	0
129	Friends not welcomed at home	0	3		0	0
130	Home life unhappy	0	3		0	0
131	Family quarrels	10	14		0	3
132	Feeling I don't really have a home	0	7		0	0
181	Heavy home responsibilities	0	0		0	0
182	Sickness in the family	5	7		5	3
183	Parents expecting too much of me	14	7		5	0
184	Too dependent on my family	5	10		0	0
233	Not telling my parents everything	10	14		10	0
234	Parents not trusting me	5	0		5	0
235	Being treated like a child at home	10	10		0	0
236	Being an only child	10	7		0	3
285	Clash of opinions between me and parents	19	10		5	3
286	Having been "spoiled" at home	19	3		14	0
287	Not getting along with brother or sister	5	3		0	0
288	Not getting along with a step-parent	0	3		0	3
337	Getting home too seldom	24	14		5	0
338	Living too close to home	10	3		5	3
339	Wishing I had a better family background	0	0		0	0
340	Afraid of someone in the family	0	10		0	0
Means:		2.19	1.79		.72	.34
Range:		7-0	9-0		5-0	3-0

- (a) Soph. = Sophomore Students
 (b) Sr. = Senior Students
 (c) χ^2 = Chi-square

Two problems, "Parents sacrificing too much for me," and "Getting home too seldom," were of similar concern to the sophomores and seniors.

No student marked, "Heavy home responsibilities," or "Wishing I had a better family background."

Morals and Religion was given a rank order of 12 for underlined problems and 11.5 for circled problems by the sophomores. The seniors rank was 12.5 for underlined and 4 for circled. In spite of the relatively high difference in rank order of the circled problems, the means for the two groups were very close, (.57, sophomores; .69, seniors). The expected and obtained frequencies were very close in both the underlined and circled problems so a Chi-square was not computed.

There was one item showing a significant difference between the two groups: "Can't forget some mistakes I've made." A proportionately larger number of seniors checked this item.

There were no problems marked by one third or more sophomores; the only problem marked by one third or more seniors was: "Can't forget some mistakes I've made."

The two groups agreed on: "Confused on some moral questions," and "Trying to break off a bad habit."

There were 8 problems marked by no one: "Belonging to a minority religious group," "Belonging to a minority racial group," "Disillusioned in religious ideals," "Being forced to go to church," "Failing to see relation of religion to life," "Rejecting earlier religious beliefs," "Getting a bad reputation," and "Disliking church services."

TABLE 12

PERCENT OF 21 SOPHOMORES AND 29 SENIORS IN AN OREGON COLLEGIATE SCHOOL
OF NURSING WHO UNDERLINED AND CIRCLED EACH ITEM IN AREA 8,
MORALS AND RELIGION, OF THE MORISON PROBLEM CHECK LIST

No.	Item	Underlined		$\chi^2(c)$	Circled	
		Soph. (a) N:21	Sr. (b) N:29		Soph. N:21	Sr. N:29
29	Belonging to a minority religious group	0	0		0	0
30	Belonging to a minority racial group	0	0		0	0
31	Affected by racial or religious prejudice	0	3		0	3
32	Bothered by the vulgarity of hospital talk	5	3		0	3
81	Learning undesirable habits	5	14		0	0
82	Disillusioned in religious ideals	0	0		0	0
83	Confused in my religious beliefs	10	3		5	3
84	Confused on some moral questions	24	14		0	3
133	Missing spiritual elements in my present life	5	3		5	0
134	Wanting more chances for religious worship	5	0		0	0
135	Failing to go to church	14	3		0	0
136	Science conflicting with religion	0	3		0	3
185	Being forced to go to church	0	0		0	0
186	Failing to see relation of religion to life	0	0		0	0
187	Rejecting earlier religious beliefs	0	0		0	0
188	Doubting value of worship and prayer	0	3		0	0
237	Having a guilty conscience	14	10		5	7
238	Yielding to temptations	14	17		10	7
239	Getting a bad reputation	0	0		0	0
240	Can't forget some mistakes I've made	10	38	(z)2.25'(d)	0	10
289	Too little chance to develop my own religion	0	7		0	3
290	Disliking church services	0	0		0	0

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TABLE 12 (concluded)

No.	Item	Underlined		χ^2 (c)	Circled	
		Soph. (a) N:21	Sr. (b) N:29		Soph. N:21	Sr. N:29
291	Lessened fervor in religious practices	5	7		5	0
292	Losing faith in religion	0	7		0	3
341	Moral code weakening	10	7		5	7
342	Sometimes being dishonest	10	7		10	0
343	Drinking	5	3		5	0
344	Trying to break off a bad habit	14	24		10	14
	Mean:	1.48	1.79		.57	.69
	Range:	8-0	7-0		5-0	6-0

* z score significant at .03 level

- (a) Soph. = Sophomore Students
 (b) Sr. = Senior Students
 (c) χ^2 = Chi-square
 (d) z = z score

Adjustment to School of Nursing, the ninth area in the Check List, revealed significant differences in the sophomore and senior groups in both the underlined and circled problems. The Chi-square for underlined was 19.78, for circled, 17.35. The rank orders were sophomores; 2 for both underlined and circled, seniors; 8 underlined and 10.5 circled. In both cases the differences were due to a large number of students in the sophomore group checking the problems in this area. It could be expected that beginning students would have more concern with these problems than the more advanced students.

The items marked by one third or more sophomores were: "Unable to concentrate well," "Poor memory," "Worrying about examinations," "Fear failure in school of nursing," "Unable to express myself in words," "Afraid to speak up in class discussions," and "Don't know how to study effectively." The only item marked by one third or more seniors was: "Afraid to speak up in class discussions."

The problems of significant difference between the groups were: "Unable to concentrate well," "Weak in logical reasoning," "Poor memory," "Worrying about examinations," "Fear failure in school of nursing," and "Don't know how to study effectively."

There was agreement between the groups in their concern for: "Getting low grades," "Unable to express myself in words," "Too easily distracted during classes," "Afraid to speak up in class discussions," and "Slow in reading."

The problem, "Unable to concentrate well," was circled by 29 percent of the sophomores.

TABLE 13

PERCENT OF 21 SOPHOMORES AND 29 SENIORS IN AN OREGON COLLEGIATE SCHOOL OF NURSING WHO UNDERLINED AND CIRCLED EACH ITEM IN AREA 9, ADJUSTMENT TO SCHOOL OF NURSING, OF THE MORISON PROBLEM CHECK LIST

No.	Item	Underlined		x ² (c)	Circled	
		Soph. (a) N:21	Sr. (b) N:29		Soph. N:21	Sr. N:29
33	Feeling lost in school of nursing	10	3		0	0
34	Purpose in going through nursing not clear	10	14		0	0
35	Dislike of nursing	0	3		0	0
36	Being a nurse on insistence of family	0	0		0	0
85	Unable to concentrate well	62	14 (z)3.55	(d)29	3	
86	Weak in logical reasoning	29	3 (z)2.51		5	0
87	Poor memory	43	10 (z)2.65		10	0
88	Worrying about examinations	62	28 5.89*		19	3
137	Not fundamentally interested in books	5	10		0	0
138	Having too many subjects at one time	0	0		0	0
139	Getting low grades	29	7		19	0
140	Fear failure in school of nursing	43	7 (z)3.03		14	0
189	Unable to express myself in words	33	28 .03		14	0
190	Afraid to speak up in class discussions	38	34 .07		5	3
191	Wanting to change to another school	0	0		0	0
192	Unable to get scientific subjects	0	3		0	3
241	Too easily distracted during classes	14	21		0	0
242	Absent from classes too often	0	0		0	0
243	Tardy for classes too often	0	3		0	0
244	Wanting to leave nursing	10	0		5	0
293	Not smart enough in scholastic ways	14	3		5	0
294	Trouble in outlining or note- taking	14	17		5	0
295	Weak in writing	5	17		5	0

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TABLE 13 (concluded)

No.	Item	Underlined		X ² (c)	Circled	
		Soph. (a) N:21	Sr. (b) N:29		Soph. N:21	Sr. N:29
296	Slow in catching on to theory	14	17		0	0
345	Can't get lessons in the time I have for study	0	0		0	0
346	Slow in reading	24	17	.33	0	0
347	Unable to obtain reference readings in library	10	3		5	0
348	Don't know how to study effectively	38	10 (z)2.34'		19	3
	Means:	7.90	2.76		1.57	.17
	Ranges:	13-0	8-0		6-0	3-0

* Chi-square significant at .02 level

' z score significant at .03 level

'' z score significant at .003 level

(a) Soph. = Sophomore Students

(b) Sr. = Senior Students

(c) X² = Chi-square

(d) z = z score

There were five problems not marked by either group: "Being a nurse on the insistence of family," "Having too many subjects at one time," "Wanting to change to another school," "Absent from classes too often," and "Can't get lessons in the time I have for study."

The Future: Professional and Educational, the tenth category in the Check List, is an area of no significant difference between the sophomores and seniors in either the problems underlined or those circled. The Chi-square for underlined was .21, while for circled it was 2.64. The rank order given this area by Sophomores was 5.5 underlined and 8 circled. The seniors rank order was 6 for both underlined and circled.

One third or more sophomores indicated concern for: "Wanting to get out of school and on my own," "Wondering if I'll be successful in life," "Afraid I'll never become an 'R. N.,'" and "Afraid I'll not be adequately prepared for nursing." One third or more seniors indicated concern for: "Wanting to get out of school and on my own."

There was a significant difference between the two student groups in "Afraid I'll never become an 'R. N.,'" There was also a difference in the two groups on the item, "Trying to combine marriage and a career," but a test of significance could not be done because no one in the sophomore group underlined this; 28 percent of the seniors underlined it.

Areas of similar concern to the two groups were: "Needing encouragement to continue in nursing," "Needing to know my professional abilities," "Wanting to get out of school and on my own," "Wondering if I'll be successful in life," "Not able to decide what nursing field to enter," "Need information about future fields of nursing," "Afraid I'll not be adequately prepared for nursing," and "Afraid I will lack experience in some fields of nursing."

TABLE 14

PERCENT OF 21 SOPHOMORES AND 29 SENIORS IN AN OREGON COLLEGIATE SCHOOL OF NURSING WHO UNDERLINED AND CIRCLED EACH ITEM IN AREA 10, THE FUTURE: PROFESSIONAL AND EDUCATIONAL, OF THE MORISON PROBLEM CHECK LIST

No.	Item	Underlined		x2(c)	Circled	
		Soph. (a) N:21	Sr. (b) N:29		Soph. N:21	Sr. N:29
37	Family opposing my professional choice	5	0		0	0
38	Needing encouragement to continue in nursing	24	7		5	0
39	Needing to know my professional abilities	29	21	.45	10	0
40	Not knowing what kind of person I want to be	5	3		5	0
89	Needing to plan ahead for the future	5	14		0	10
90	Doubting the wisdom of future plans	0	3		0	0
91	Wanting to get out of school and on my own	67	48	1.67	10	7
92	Wondering if I'll be successful in life	48	28	2.12	10	0
141	Not physically fit to practice nursing	0	0		0	0
142	Dread leaving school and starting on my own	0	0		0	0
143	Wanting advice on steps after leaving school	5	21		5	0
144	Doubt ability to take part in professional organizations	5	3		5	0
193	Afraid I'll never become an "R. N."	48	7	(z)3.32'(d)	10	0
194	Being told I'll fail in practice as an "R. N."	0	3		0	0
195	Doubting happiness as an "R. N."	0	0		0	0
196	Doubting economic value of "R. N." degree	0	7		0	0
245	Not knowing what I really want	10	10		10	3
246	Not able to decide what nursing field to enter	14	21		5	7
247	Need information about future fields of nursing	10	28		0	7
248	Need education beyond nursing course	0	3		0	0

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TABLE 14 (concluded)

No.	Item	Underlined		χ^2 (c)	Circled	
		Soph. (a) N:21	Sr. (b) N:29		Soph. N:21	Sr. N:29
297	Afraid I'll not be adequately prepared for nursing	38	14		14	7
298	Afraid of unemployment after graduation	0	0		0	0
299	Trying to combine marriage and a career	0	28		0	7
300	Concerned about entering military service	10	7		10	0
349	Fear I won't get a good recommendation from school	10	7		0	0
350	Afraid I will lack experience in some fields of nursing	19	28		5	0
351	Don't know how to apply for a position	0	17		0	7
352	Doubt ability to handle a good position	10	7		0	0
	Mean:	3.57	3.34		.95	.55
	Range:	9-0	7-0		5-0	3-0

* z score significant at .003 level

- (a) Soph. = Sophomore Students
 (b) Sr. = Senior Students
 (c) χ^2 = Chi-square
 (d) z = z score

No one in either group indicated concern for: "Not physically fit to practice nursing," "Dread leaving school and starting on my own," "Doubting happiness as an 'R. N.,'" and "Afraid of unemployment after graduation."

Curriculum and School Program was given a rank by the sophomores of 8 in underlined problems and 5 in circled problems. The seniors ranked this area 4 in underlined and 10.5 in circled. The Chi-square for the underlined problems was .56 denoting close agreement, while for the circled problems a Chi-square of 24.01 was obtained denoting a significant difference between the groups.

There was only one item marked by one third or more sophomores: "Dull classes." The items marked by one third or more seniors were: "Dull classes," and "Inability to remain awake in classes."

There was agreement between the two groups in their concern for: "School too indifferent to student's problems," "Dull classes," "Instructors lacking personality," "Too few books in library," "Grades unfair as measures of ability," and "Inability to remain awake in classes."

On only one item was there a significant difference between the groups: "Too much repetition of some topics." "Instructors lacking grasp of subject matter" was marked by 31 percent of the seniors but by none of the sophomores so a test of significance could not be done.

No one in either group checked: "Classes too large," "Courses too unrelated to each other," or "No suitable place to study in school."

TABLE 15

PERCENT OF 21 SOPHOMORES AND 29 SENIORS IN AN OREGON COLLEGIATE SCHOOL OF NURSING WHO UNDERLINED AND CIRCLED EACH ITEM IN AREA 11, CURRICULUM AND SCHOOL PROGRAM, OF THE MORISON PROBLEM CHECK LIST

No.	Item	Underlined		x ² (c)	Circled	
		Soph. (a) N:21	Sr. (b) N:29		Soph. N:21	Sr. N:29
41	School too indifferent to student's problems	5	21		0	0
42	Dull classes	48	72	3.17	10	7
43	Director of Nurses lacks understanding of students	0	3		0	0
44	Instructors lacking personality	29	31	.88	10	3
93	Inadequate high school training	5	0		0	0
94	Nursing textbooks hard to understand	5	0		0	0
95	Too few books in the library	24	3		14	0
96	Instructors lacking grasp of subject matter	0	31		0	0
145	Classes too large	0	0		0	0
146	Too few chances to express ideas or opinions	10	3		0	0
147	Instructors lacking interest in students	0	7		0	0
148	Having an unfair instructor	14	7		0	0
197	Being without a counselor	14	3		10	0
198	Instructors partial to some students	19	14		10	0
199	Grades unfair as measures of ability	5	21		5	3
200	Not getting adequate education for present nursing	14	0		5	0
249	Courses too unrelated to each other	0	0		0	0
250	Too much repetition of some topics	5	31	(z)2.29 ¹ (d)	5	0
251	Tests often unfair	19	3		5	0
252	Assigned study periods unsatisfactory	5	3		0	0
301	Instructors lacking understanding of students	14	7		10	0
302	Too much work required in some courses	24	0		5	0

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TABLE 15 (concluded)

No.	Item	Underlined		$\chi^2(c)$	Circled	
		Soph. (a) N:21	Sr. (b) N:29		Soph. N:21	Sr. N:29
303	Hard to study in living quarters	19	17		5	0
304	No suitable place to study in school	0	0		0	0
353	Too tired from nursing duties to study	10	10		5	0
354	Classrooms improperly ventilated and lighted	5	10		0	0
355	Inability to remain awake in classes	24	41	1.68	10	3
356	Instructors too theoretical	0	10		0	0
	Mean:	3.14	3.52		1.05	.17
	Range:	7-0	9-0		4-0	1-0

¹ z score significant at .03 level

- (a) Soph. = Sophomore Students
 (b) Sr. = Senior Students
 (c) χ^2 = Chi-square
 (d) z = z score

There was no significant difference found between the sophomores and seniors in the underlined or circled problems in the area Adjustment to Human Relationships in Nursing. The rank given this area by the sophomores was 13 in both underlined and circled. The rank given by the seniors was 10.5 in underlined and 13 in circled.

One third or more of the sophomores marked: "Can't seem to please some supervisors." One third or more of the seniors indicated concern for: "Annoyed by supervision." These two items were the only ones showing significant differences between the groups. Two other items having a difference where a test of significance could not be done were: "Dislike caring for demanding patients" underlined by 24 percent of the seniors and none of the sophomores and "Too many people passing the buck" underlined by none of the sophomores and 28 percent of the seniors.

There was agreement in the concern of both groups for "Supervisors poor managers."

The items left unchecked were: "Dissatisfied in present department," "Having difficulty in following doctor's orders," "Unable to please the doctors," "Can't deal with the patient's friends and visitors," "Dislike caring for male patients," "Can't acquire a professional vocabulary," "Get too friendly with subordinates," and "Feel dominated by nurse attendants."

There was no significant difference between the sophomores and seniors in the area, Adjustments to Administration of Nursing Care. This area had a rank order of 10.5 for the underlined problems for both groups. In the circled problems, it had a rank of 11.5 for sophomores and 12 for seniors.

TABLE 16

PERCENT OF 21 SOPHOMORES AND 29 SENIORS IN AN OREGON COLLEGIATE SCHOOL OF NURSING WHO UNDERLINED AND CIRCLED EACH ITEM IN AREA 12, ADJUSTMENT TO HUMAN RELATIONSHIPS IN NURSING, OF THE MORISON PROBLEM CHECK LIST

No.	Item	Underlined		x ² (c)	Circled	
		Soph. (a) N:21	Sr. (b) N:29		Soph. N:21	Sr. N:29
45	Annoyed by supervision	5	48	(z)3.32 ¹ (d)	5	3
46	Can't seem to please some supervisors	48	3	(s)3.72 ¹	10	0
47	Supervisors poor managers	14	21		5	0
48	Supervisors not trusting us enough	5	7		0	0
97	Supervisors don't understand our educational needs	0	3		0	0
98	Supervisors expecting too much of us	10	0		0	0
99	Supervisors too friendly	0	10		0	0
100	Dissatisfied in present department	0	0		0	0
149	Having difficulty in following doctor's orders	0	0		0	0
150	Unable to please the doctors	0	0		0	0
151	Trouble in figuring out what the doctor wants	10	3		5	0
152	Maintaining loyalty to the doctor	0	3		0	0
201	Discouraged by pessimism of "R. N.'s"	5	3		0	0
202	Afraid of some of the doctors	14	14		0	3
203	Afraid the patients won't like me	5	0		0	0
204	Can't deal with the patient's friends and visitors	0	0		0	0
253	Dislike caring for demanding patients	0	24		0	0
254	Dislike caring for patients with certain diseases	10	7		5	0
255	Dislike caring for male patients	0	0		0	0
256	Can't be firm with patients	10	3		0	0
305	Prefer working alone to working with other students	0	10		0	0
306	Depend too much on others for assistance	5	7		5	0
307	Too willing to "cover-up" for co-workers	0	3		0	0

(concluded on next page)

TABLE 16 (concluded)

No.	Item	Underlined		X ² (c)	Circled	
		Soph. (a) N:21	Sr. (b) N:29		Soph. N:21	Sr. N:29
308	Too many people "passing the buck"	0	28		0	0
357	Can't acquire a professional vocabulary	0	0		0	0
358	Get too friendly with subordinates	0	0		0	0
359	Unable to direct subordinate workers	5	3		5	0
360	Feel dominated by nurse attendants	0	0		0	0
	Mean:	1.43	2.10		.38	.07
	Range:	4-0	6-0		2-0	1-0

* z score significant at .003 level

-
- (a) Soph. = Sophomore Students
 (b) Sr. = Senior Students
 (c) X² = Chi-square
 (d) z = z score

TABLE 17

PERCENT OF 21 SOPHOMORES AND 29 SENIORS IN AN OREGON COLLEGIATE SCHOOL OF NURSING WHO UNDERLINED AND CIRCLED EACH ITEM IN AREA 13, ADJUSTMENTS TO ADMINISTRATION OF NURSING CARE, OF THE MORISON PROBLEM CHECK LIST

No.	Item	Underlined		x2(c)	Circled	
		Soph. (a) N:21	Sr. (b) N:29		Soph. N:21	Sr. N:29
49	Failing to organize my work well	33	10	(z)2.01 (d)	14	3
50	Unable to perform procedures effectively	10	7		0	3
51	Lacking the aptitude for procedures	0	0		0	0
52	Can't carry out nursing practice as taught in theory	0	0		0	0
101	Working too long hours	0	3		0	0
102	Off-duty time not scheduled so one can plan for it	0	0		0	0
103	Nursing care assignments unevenly distributed	33	17	1.73	10	0
104	Nursing care assignments not clear	14	3		5	0
153	Unable to handle embarrassing situations	10	7		0	0
154	Not observant enough in bedside care	19	7		14	0
155	Needing to cultivate a well modulated voice	0	10		0	3
156	Finding it hard to be dignified on duty	0	7		0	0
205	Afraid of becoming a "hardboiled" nurse	10	14		0	0
206	Afraid of causing pain when giving treatments	5	0		0	0
207	Afraid to administer medicines	0	0		0	0
208	Can't take unpleasant odors or sights	0	0		0	0
257	Routines in some departments hard to learn	0	0		0	0
258	Failure of departments to orient students	0	21		0	0
259	Nursing care checked to unreasonable degree	5	10		0	0
260	Too little credit given for good nursing care	19	45	(z)1.90 (d)	5	3

(concluded on next page)

TABLE 17 (concluded)

No.	Item	Underlined		X ² (c)	Circled	
		Soph. (a) N:21	Sr. (b) N:29		Soph. N:21	Sr. N:29
309	Seniority rule carried too far	5	7		0	0
310	Too difficult for students to get doctor's care	0	0		0	0
311	Rule against accepting patient's gifts unfair	0	0		0	0
312	Rule against accepting patient's invitations unfair	0	0		0	0
361	Hospital insisting on routine at any price	0	10		0	0
362	Can't get used to constant hurry	14	0		0	0
363	Too little chance to know the patient as a "whole"	43	31	.74	10	0
364	Disillusioned in nursing ideals	0	0		0	0
	Means:	2.19	2.10		.57	.14
	Range:	5-0	6-0		3-0	2-0

' z score significant at .05 level

" z score significant at .06 level

- (a) Soph. = Sophomore Students
 (b) Sr. = Senior Students
 (c) X² = Chi-square
 (d) z = z score

There were three items marked by one third or more sophomores:

"Failing to organize my work well," "Nursing care assignments not clear," and "Too little chance to know the patient as a 'whole.'" There was one item marked by one third or more seniors: "Too little credit given for good nursing care."

Two items, "Failing to organize my work well" and "Too little credit given for good nursing care," disclosed a significant difference between the groups.

There was agreement between the groups in their concern for: "Nursing care assignments unevenly distributed" and "Too little chance to know the patient as a 'whole.'"

The unmarked problems were: "Lacking the aptitude for procedures," "Can't carry out nursing practice as taught in theory," "Off-duty time not scheduled so one can plan for it," "Afraid to administer medicines," "Can't take unpleasant odors or sights," "Routines in some departments hard to learn," "Too difficult for students to get doctor's care," "Rule against accepting patient's gifts unfair," "Rule against accepting patient's invitations unfair," and "Disillusioned in nursing ideals."

The responses to the summarizing questions of the Morison Problem Check List revealed both groups felt the Check List had transmitted a clear picture of their problems. Most of the students indicated they enjoyed completing the test. In the individual comments, the most frequently expressed thought was that the identification of the various problems helped the student cope with the problems successfully. To quote some of the comments verbatim:

It always makes a person feel good to "get his problems off his chest," every once in a while.

The questions were point-blank. They pin-pointed my problems and made me able to understand myself a little more.

I didn't realize other people knew such problems existed. I feel better now that I have expressed myself.

There were three students from each group who did not feel the Check List was worth while completing. They felt their problems were such that nothing could be done about them, so why bother discovering what they were. Two typical comments quoted verbatim were:

Just gives me more time to think about things there is nothing can be done about.

I can't see what it has accomplished!

Forty-three percent of the sophomores but only seventeen percent of the seniors indicated they would like to talk over their problems if an opportunity were offered to do so. This revealed a significant difference between the two, (Chi-square 3.96, significant at .05 level).

The students named, "Dean" or "Member of the faculty" most frequently as the person with whom they would like to have these talks.

Question 2 of the summarizing statements in the Check List, "How would you summarize your chief problems in your own words? Write a brief summary.", was answered by most of the seniors as concern for the future or concern over finances. Some of the typical comments quoted verbatim were:

Getting very impatient to get out of school and start earning some money. Beginning to complain too much about lack of money for clothes and the things "working girls" my age already have.

Tired of dependence on parents and having to "pinch pennies" for four years. Not enough time for outdoor sports and activities because the necessity to work extra.

TABLE 18

PERCENT OF 21 SOPHOMORE AND 29 SENIOR STUDENTS IN AN OREGON
COLLEGIATE SCHOOL OF NURSING WHO RESPONDED TO SUMMARIZING
QUESTIONS OF THE MORISON PROBLEM CHECK LIST

		Sophomores N:21	Seniors N:29
1.	Does the Check List give a well- rounded picture of your problems?	yes 100 no 0 omit 0	86 0 14
2.*			
3.	Have you enjoyed filling out the List?	yes 95 no 5 omit 0	86 14 0
4.	Whether you have or have not en- joyed filling out the List, do you think it has been worthwhile doing?	yes 86 no 14 omit 0	87 10 3
5a.	If the opportunity were offered, would you like to talk over any of these problems with someone on the nursing faculty?	yes 43 no 48 omit 9	17 73 10
5b.	Do you know the particular person(s) with whom you would like to have these talks?	yes* 45** specific names 36**	80** 40**
* Number 2 is discussed separately			
** Based on number who said yes in 5a			

After I'm married I think it will be hard to keep a strong interest in school.

In summarization: At this time one of my biggest problems is choice of a nursing field after I am finished here--I have enjoyed most of my rotations and affiliations and received good evaluations from the majority, but am unsure of a final decision and my success in it as a chosen field. I will also regret leaving my home school and its security.

Most of my classmates are engaged or married. This is a problem to me also because I am not engaged or serious with any boy. Someday I, too, want a husband and family and wonder if I shall ever find an acceptable man for husband and father. Right now I feel that I'm being left behind!

I lack confidence in myself and my ability to function as a nurse. I am frequently unsure of myself in procedures, ill @ ease c̄ patients & worry excessively about ever being a good nurse.

Having earned wages before entering Nursing I felt independent and did not have to rely on financial support from parents. While in Nursing I have not been able to work enough off duty time to pay my way. It means that sacrifices must be made at home.

Most of the sophomore's statements to the question "How would you summarize your chief problem in your own words? Write a brief summary." centered around difficulties with classes or clinical time and personality problems. The following statements are quoted verbatim:

I feel as a child I was too domineering (stubborn because of being spoiled et lack of discipline) I while at home became accustomed to reliance on parents shoulders for expenses etc. any consequently when on my own lack self-confidence along with the thought that I am never quite sure that is right.

Much of my problem appears in lacking self confidence--many of the students saying much that is above my head--(mostly those that have worked for quite awhile in the hospital--I know it takes a long time to learn all of these things and I worry too much about them. As the classes--it seems as though we have so much home work and tests that you don't have much time to do anything else.

I would say my chief problem is the fact that my life doesn't seem to be my own. I dislike very much the copious amount of homework we get. I want time to think, enjoy music, art, friends, reading--and my floor work. I have a constant depressive feeling, even

when I am out on my days off, that I have Book Reviews, Study guides, and an exam on Monday.

Maybe my problems stem from the fact that I haven't found myself as a person yet; I'm sure that is the reason. I feel like I am in grade school again and constantly plan what I will do upon graduation. I can't wait to be more independent.

Mainly, I am afraid other people will not like me. I care what other people think. Next, I am afraid that something will happen and I will not get to be an R. N. As a nurse, I am not fast enough in getting my work done. It seems I am always rushing myself and the patient when working on the floor.

All through my previous school years I was top in the class. Since I've been in nursing I am at the bottom. I just can't understand what is wrong with me. I study, but nothing seems to be retained. The answer to that I suppose would be not knowing how to study. I've lost a great deal of my self-confidence because of my low grades and at times I feel I will never get to the top because the instructors have me designated an "average" student--not giving me credit.

In addition to the Check List, a supplementary sheet containing four questions was also completed by the 21 sophomores and 29 seniors participating in this study. Tables 19, 20, and 21 are tabulations of the first three questions. The fourth question is discussed by quoting the suggestions made by the students for improving the guidance services of their school.

In responding to the first question of who was the most help to the student in their adjustment to the school of nursing, the two groups indicated agreement. "Family" or "Other student" was checked by 76 percent of the sophomores and 84 percent of the seniors. "Faculty" or "Nursing Personnel" was checked by 19 percent of the sophomores and 10 percent of the seniors. "Friend" was written in by one sophomore, while "Patients" was indicated by one senior and "Sheer perseverance" by another of the seniors.

TABLE 19

PERCENT OF 21 SOPHOMORE AND 29 SENIOR STUDENTS
IN AN OREGON COLLEGIATE SCHOOL OF NURSING
RESPONDING TO SUPPLEMENT QUESTION 1

Question	Sophomore N:21	Senior N:29
Of the following who was the most help to you in your adjustment to the school of nursing?		
a) Family	38	31
b) Clergyman	0	0
c) Other student	38	53
d) Faculty	19	7
e) Nursing personnel	0	3
f) Other, (indicate title)*		
*Friend	5	0
*Patients	0	3
*Sheer perseverance	0	3
Total	100	100

* "Friend," "Patients," and "Sheer perseverance" were written in by different students.

In replying to supplement question 2, asking the student to indicate in rank order three persons who helped them most since they had been in the school of nursing and listing personnel by name, the sophomores displayed more uniformity than did the seniors. Of the 63 possible responses, 12 students identified the "Dean" as having been helpful, 11 designated the "Clinical Instructor," and 8 indicated "Roommate."

Among the seniors, the responses were more scattered. There were 87 possible choices for this group; 14 students checked "Roommate," 11 "Friend," 10 "Family," 10 "Educational Director," 8 "Nursing Arts Instructor," and 7 "Clinical Instructor."

Table 21 is a tabulation in percentages showing the responses given by the sophomore and senior students to the question, "Do you feel that help with your problems is available a) always, b) usually, c) occasionally or d) never." There were four seniors or 14 percent and eight sophomores or 38 percent, who checked "always." Thirteen seniors or 45 percent and seven sophomores or 33 percent checked "usually." Eleven seniors (38 percent) and six sophomores (29 percent) marked "occasionally," and only one senior indicated help was "never" available. This reveals the students in both groups believe they could obtain help with their problems most of the time.

The last question completed by the student nurses, "What suggestions could you make to improve the guidance services of your school?", invoked a plea for more privacy for problems discussed with members of the faculty by the seniors. Thirty-four percent gave this suggestion. The following statements are quoted verbatim with no attempt at editing:

TABLE 21

PERCENT OF 21 SOPHOMORE AND 29 SENIOR STUDENTS
IN AN OREGON COLLEGIATE SCHOOL OF NURSING
RESPONDING TO SUPPLEMENT QUESTION 3

Question	Sophomore N:21	Senior N:29
Do you feel that help with your problems is available:		
a) Always	38	24
b) Usually	33	45
c) Occasionally	29	38
d) Never	0	3
Total	100	100

More privacy and the assurance that the conversation isn't passed around to every member of faculty or acquaintances.

Often when confidence is given to Clinical Instructors, they seem to find it necessary to tell the entire faculty your problem.

If the student could discuss her problems with one of the above and know it would be kept in confidence.

I just don't know of anyone I'd tell anything to besides my best friend, and my fiancé.

Don't force students to have "conferences" with "advisors" against their will--make it entirely voluntary.

I think it is hopeless with the persons presently in charge as the school is run by dictatorship rather than democracy.

I have no suggestions to make since during the last year our guidance services have changed from almost total discipline to little discipline.

The type of people employed on the staff are not the type of person, most students would go to for guidance (sp) need a younger and more understanding person.

That when told something in confidence as in a prvt. conference that they keep it that way!

I would rather pay a psychiatrist's fee than sit and talk to anyone around here. The only interest is purely clinical, not personal and most of the faculty are only too eager to not keep one's confidence.

I think step () are now being taken with our new dean.

Being able to confide in a specific faculty member and be assured that the conversation will be kept with strict confidence. At the present, telling a faculty member or health advisor in confidence some personal matter and the next day the entire faculty knows about it. You feel they must discuss all personal problems in open conferences. As a result, many problems are never expressed.

They have improved remarkably over the past year.

Dean and faculty should take more interest in and express concern for student's problem.

I believe that if a question is asked of any of the faculty, if at all possible, they or someone else should give an adequate and satisfying answer. Sometimes one does not get an adequate answer and is given the feeling that he might as well forget about asking anyone else about it also.

I really don't know except that what you confidentially tell one person seems to travel and then the whole school knows your problem. I think they should respect your confidence.

Closer contact with student.

Being able to place even a little confidence and trust in instructors, Educational Director, Supervisors, H N's etc.

Try to have the faculty be friends instead of instructors, more personal interest.

When a person talks over a problem to a faculty member it shouldn't go any further.

- 1) Letting the student choose (sp) own advisor
- 2) more objectivity and confidence of silence on part of the advisor.

The suggestions for improved guidance services from the sophomores centered around personal interest and encouragement from the faculty members. The following statements are quoted verbatim:

I think with more or better management of student body officers (stim. enthusiasm in student body) we would have better school spirit or stamina.

I feel it is adequate.

A more personal interest in each student by the guidance instructor.

In my case, I can't seem to trust anyone enough to tell them my most personal problems which are a part of myself. I feel it is enough that I recognize these problems and attempt to straighten them out. Sometimes I am able to talk to someone and I have found that it helps (this was a clinical instructor) very rare.

I can't think of any.

Closer unity of the school, and activities in which the students and faculty can participate.

I think the faculty could make a student feel more acceptable and more willing to talk by not making the student feel she is taking up valuable time.

Hiring a special counselor to help the girls solve their own problems.

Giving students a chance to state their opinions and problems without being told they are just complaining.

I feel that more persons should want to talk to their immediate clinicals instead of the dean, clergy, etc., as they are usually the person most closely associated with any problem (especially nursing) and know the individuals better. I feel that we tend to steer away from persons who could help us most. I don't know the reasons for this unless it is general feelings due to personality.

More understanding from some instructors.

Encouragement is needed; social guidance toward the line of extracurricular activities is much needed.

Guidance periods. Making known that instructors are available for guidance--more encouragement on their parts.

If some of the instructors would stop thinking of student nurses having to spend all of their waking hours on nursing they could offer better advice and guidance.

I feel if we really need guidance we'll find it ourselves--I don't think you need to improve ours here.

Have sessions where everyone can take part.

Instructors could give us the impression that they care a little more and are interested in us as individuals.

CHAPTER IV

SUMMARY, CONCLUSIONS AND SUGGESTIONS FOR FURTHER STUDY

Summary

A group of 50 students, comprised of 21 sophomores and 29 seniors, enrolled in an Oregon collegiate school of nursing completed the Problem Check List-Form for Schools of Nursing and a supplement questionnaire in March, 1960. The investigator was present when the tests were administered during a regular class period; students were assured that they would in no way be identified with their responses.

The purpose of the test was to provide information for use in making a comparison of the problems expressed by the two groups and was limited to those current problems the students recognized and were willing to admit.

The research tool used, the Problem Check List-Form for Schools of Nursing, is divided into 13 categories containing 28 problems each and is arranged in a manner which does not permit easy identification of the categories. In addition, the Check List asks students five summarizing questions.

A supplemental questionnaire was also completed. This contained four questions; three relative to solving problems encountered in the school of nursing, the fourth requested student suggestions for improving guidance at the school.

All 50 students completed the Check List and supplement. Among seniors, the underlined problem frequency was highest in the category, "Health and Physical Development," followed sequentially by "Finances and Living Conditions," "Personal-Psychological Relations," and "Curriculum and School Program." The lowest number of problems occurred in "Home and Family," and "Morals and Religion."

The sophomores underlined the greatest number of problems in "Personal-Psychological Relations," followed by "Adjustment to School of Nursing," "Social and Recreational Activities," and "Social-Psychological Relations." Their lowest classification was "Adjustment to Human Relationships in Nursing," with the next lowest being "Morals and Religion."

In response to the question of whether they would like to discuss their problems with some member of the faculty, 43 percent (9 actual number) of the sophomores answered in the affirmative as compared to only 17 percent (5 actual number) of the seniors. Of these, four of the sophomores could identify the person with whom they would like to discuss their problems and four of the seniors could do so.

The sophomores underlined a total of 898 problems and circled a total of 272 as being particularly troublesome. The sophomore mean was 43 underlined and 13 circled. The seniors underlined 1082 problems and circled 180 for a mean of 37 and 6 respectively.

Among the seniors the individual problems underlined by 50 percent or more were: (Numbers correspond to numbers in Check List.)

- 42. Dull classes (72%)
- 54. Not getting enough outdoor air and sunshine (69%)
- 4. Not enough sleep (69%)

112. Disliking financial dependence on family (55%)

161. No regular source of income (55%)

The items underlined by 50 percent or more in the sophomore group were: (Numbers correspond to numbers in Check List.)

91. Wanting to get out of school and on my own (67%)

54. Not getting enough outdoor air and sunshine (62%)

85. Unable to concentrate well (62%)

88. Worrying about examinations (62%)

317. Tiring of same meals all the time (62%)

327. Tend to complain too much (57%)

The individual items indicating a significant difference between the two groups were: (Numbers correspond to numbers in Check List.)

Seniors having a proportionately higher number:

4. Not enough sleep

161. No regular source of income

240. Can't forget some mistakes I've made

250. Too much repetition of some topics

45. Annoyed by supervision

260. Too little credit given for good nursing care

Sophomores having a proportionately higher number:

317. Tiring of same meals all the time

111. Family worried about finances

323. Too little chance to read what I like

9. Not enough time for recreation

- 21. Not mixing well with opposite sex
- 85. Unable to concentrate well
- 86. Weak in logical reasoning
- 87. Poor memory
- 88. Worrying about examinations
- 140. Fear failure in school of nursing
- 348. Don't know how to study effectively
- 46. Can't seem to please some supervisors
- 49. Failing to organize my work well

The areas of significant differences between the two groups were:

Underlined problems:

- 1. Social and Recreational Activities
- 2. Social-Psychological Relations
- 3. Personal-Psychological Relations
- 4. Adjustment to School of Nursing

Circled problems:

- 1. Social and Recreational Activities
- 2. Finances and Living Conditions
- 3. Adjustment to School of Nursing
- 4. Curriculum and School Program

The significant differences in both the underlined and circled problems were accounted for by a greater than expected frequency in the sophomore group.

There were 57 problems not checked by any student. See Appendix E for this list.

There was a high correlation between the problems circled and those underlined in the sophomore group (.948), however, the same correlation

for the senior group was very low, (.277). The rank order correlations between this study and four other studies indicated agreement among three of the studies.

In answering the summarizing questions, 100 percent of the sophomores felt that the completed list gave a good picture of their problems, while 86 percent of the seniors shared this viewpoint.

The individual summary of chief problems indicated that among sophomores, 57 percent were troubled by personal problems, while 28 percent were experiencing difficulties related to nursing grades and the school. For the seniors, a total of 34 percent were worried about the future and 27 percent about finances.

Eighty-six percent of the sophomores and eighty-seven percent of the seniors felt that completing the Check List had been worth while.

The answers to the query requiring identification of the person most helpful to the student in adjusting to the school of nursing revealed that 81 percent of the sophomores and 90 percent of the seniors depended on other than the faculty or hospital personnel.

When the question was more specific, asking which persons connected with the school of nursing had been most helpful in solving problems and listing eight by title, the selection was scattered with no clear majority for any one person.

In reply to the question, "Do you feel that help with your problems is available, (a) always, (b) usually, (c) occasionally, (d) never," 71 percent of the sophomores and 59 percent of the seniors checked the "always" or "usually" category.

In response to the request for suggestions to improve the guidance services of the school, twelve sophomores had no suggestions, seven indicated faculty encouragement and interest, and two felt the need of a guidance program and counselor. Eight seniors had no suggestions, ten felt that problems discussed with staff members should be kept in confidence and the balance of the replies were scattered.

Conclusions

The hypothesis that there would be measurable differences between the two student groups in this study was found to be true in four of the thirteen areas in the Morison Problem Check List for the underlined problems. There were also four of the thirteen areas revealing significant differences between the two in the circled problems.

In view of the purpose of this study, to compare the problems indicated by the two groups completing the Morison Problem Check List, it can be stated that:

1. The sophomores were concerned with problems of personality, they lacked self-confidence in their academic ability and in "social graces"; while the concern of most seniors centered around financial matters and their own health needs, they also indicated boredom as a major problem.
2. More sophomores (43%) than seniors (17%) would be willing to discuss their problems with some member of the faculty.
3. There was concern in both groups for problems not related specifically to a nursing school environment. It would seem that most of the students participating in this study would have

indicated similar problems in any educational setting and most of the difficulties of a personal nature would be of concern in any given situation, educational or not. It would appear that the major differences found between the two groups were caused by their respective placement in the school. This can not be validated, however, without further study.

A majority of both groups felt completing the Morison Problem Check List was of value in helping them identify and state their problems.

The responses to the supplement questionnaire revealed:

1. A majority in both groups (seniors 90%; sophomores 81%) depended on persons outside the school personnel for help in adjusting to the school of nursing.
2. Both groups thought help with their problems was available most of the time.
3. The seniors were disillusioned by the faculty's lack of confidential handling of problems; the sophomores wanted the faculty to show more interest and encouragement.

Suggestions for Further Study

The Morison Problem Check List could be used for one of the following:

1. To compare results of the Check List with scholastic standing and personality evaluation to determine if any relationships exist between them. This could be done on a group or individual basis.

2. To compare student nurses' problems with those of other college girls of the same age enrolled in some other discipline.
3. To administer to a group of students without identifying individuals, subsequently test the same group identifying each one. Compare the results of the two tests to determine if the identification of individuals made a difference. This could be used to establish the worth of the Check List as a counseling tool.
4. To repeat the test on the Sophomore group of this study before they graduate in 1962; this might identify if their problems existed because of the nature of the group or because of their placement in the school.

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APPENDIX B

SAMPLE OF THE SUPPLEMENT QUESTIONNAIRE

When you have completed the check list, please answer the following four items:

1. Of the following, who was the most help to you in your adjustment to the school of nursing? (check one)

a) Family _____

b) Clergyman _____

c) Other student _____

d) Faculty _____

e) Nursing service personnel _____

f) Other, indicate title) _____

2. Indicate in the order of rank (1, 2, & 3) the three persons who have helped you the most in solving your problems since you have been in the school of nursing.

a) Dean of College of Nursing _____

b) Educational Director _____

c) Faculty Adviser _____

d) Clergyman _____

e) Clinical Instructor _____

f) Nursing Arts Instructor _____

g) Supervisor _____

h) Head Nurse _____

i) Roommate _____

j) Other, (indicate title) _____

3. Do you feel that help with your problems is available:

a) Always _____

b) Usually _____

c) Occasionally _____

d) Never _____

4. What suggestions could you make to improve the guidance services of your school? (If you need more space, use other side of page.)
- _____
- _____

APPENDIX C

FORMULAS AND TABLES USED TO ESTABLISH CRITICAL VALUES FOR
RANK ORDER CORRELATIONS, CHI-SQUARE AND Z SCORE

Rank Order Correlations

Formula:

$$r' = 1 - \frac{6 \sum D^2}{n(n^2 - 1)} \quad (8)$$

TABLE 22

ABRIDGED TABLE TAKEN FROM OLDS (25) USED
TO ESTABLISH CRITICAL VALUES FOR RANK
ORDER CORRELATIONS IN THIS STUDY

Number of cases:	Critical Values of Spearman Rank Order Coefficient of Correlation			
13	.74	.67	.57	.47
P/	.01	.02	.05	.10
Two-tail tests				

(25)

Chi-square

Formula:

$$\chi^2 = \sum \frac{(f_a - f_o)^2}{f_o} \quad (8)$$

$$\chi^2 = \frac{n(ad - bc)^2}{(a+b)(c+d)(a+c)(b+d)} \quad (8)$$

$$\chi^2 = \frac{n(ad - bc)^2}{(a+b)(c+d)(a+c)(b+d)} \quad \text{official correction}$$

TABLE 23

ABRIDGED TABLE TAKEN FROM DIAMOND (8) TO ESTABLISH
CRITICAL VALUES FOR CHI-SQUARE IN THIS STUDY

Table to establish critical values:

Critical Values of χ^2				
P df	.10	.05	.02	.01
1	2.706	3.841	5.412	6.635

(8)

Z SCORE

Formula:

$$z = \frac{P_1 - P_2}{S_{P_1 - P_2}}$$

TABLE 24

ABRIDGED TABLE TAKEN FROM DIAMOND (8) TO ESTABLISH
CRITICAL VALUES FOR Z SCORE IN THIS STUDY

Table used to establish critical values:

The Normal Probability Area

Percent of area in the smaller portion
(i.e., in one tail) cut off by $-z$,
a deviation expressed in standard units.

$-z$	%
1.90	2.9
2.00	2.3
2.10	1.8
2.20	1.4
2.30	1.1
2.40	0.8
2.50	0.6
2.75	0.3
3.00	0.135

(8)

APPENDIX D

TABLE USED TO TRANSPOSE STUDENT FREQUENCY
TO PERCENT IN THIS STUDY

Student Frequency	Percent of Sophomore Students N:21	Percent of Senior Students N:29
1	5	3
2	10	7
3	14	10
4	19	14
5	24	17
6	29	21
7	33	24
8	38	28
9	43	31
10	48	34
11	52	38
12	57	41
13	62	45
14	67	48
15	71	52
16	76	55
17	81	59
18	86	62
19	90	66
20	95	69
21	100	72
22		76
23		79
24		83
25		86
26		90
27		93
28		97
29		100

APPENDIX E

ITEMS IN THE MORISON PROBLEM CHECK LIST NOT MARKED
BY ANY OF THE 21 SOPHOMORE OR 29 SENIOR STUDENTS
IN AN OREGON COLLEGIATE SCHOOL OF NURSING

Numbers correspond to numbers in the Check List

- 55. Threatened with a serious ailment
- 56. Afraid I may need an operation
- 105. Afraid I may contract disease
- 262. Having poor hearing
- 163. Having financial dependents
- 214. Lacking privacy in living quarters
- 215. Living with unsatisfactory roommates
- 265. Infrequent all-night or late permits
- 268. Not getting along with the House Mother
- 319. Inadequate discipline in Nurses' Home
- 175. Afraid when left alone
- 280. Can't see the value of things I do
- 23. "Going steady"
- 126. Insufficient knowledge about sex matters
- 231. Thinking too much about sex matters
- 232. Competition in a love affair
- 336. Venereal disease
- 181. Heavy home responsibilities
- 339. Wishing I had a better family background
- 29. Belonging to a minority religious group
- 30. Belonging to a minority racial group

- 82. Disillusioned in religious ideals
- 185. Being forced to go to church
- 186. Failing to see relation of religion to life
- 187. Rejecting earlier religious beliefs
- 239. Getting a bad reputation
- 290. Disliking church services
- 36. Being a nurse on insistence of family
- 138. Having too many subjects at one time
- 191. Wanting to change to another school
- 242. Absent from classes too often
- 345. Can't get lessons in the time I have for study
- 141. Not physically fit to practice nursing
- 142. Dread leaving school and starting on my own
- 195. Doubting happiness as an "R. N."
- 298. Afraid of unemployment after graduation
- 145. Classes too large
- 249. Courses too unrelated to each other
- 304. No suitable place to study in school
- 100. Dissatisfied in present department
- 149. Having difficulty in following doctor's orders
- 150. Unable to please the doctors
- 204. Can't deal with the patient's friends and visitors
- 255. Dislike caring for male patients
- 357. Can't acquire a professional vocabulary
- 358. Get too friendly with subordinates
- 360. Feel dominated by nurse attendants

- 51. Lacking aptitude for procedures
- 52. Can't carry out nursing practice as taught in theory
- 102. Off-duty time not scheduled so one can plan for it
- 207. Afraid to administer medicines
- 208. Can't take unpleasant odors or sights
- 257. Routines in some departments hard to learn
- 310. Too difficult for students to get doctor's care
- 311. Rule against accepting patient's gifts unfair
- 312. Rule against accepting patient's invitations unfair
- 364. Disillusioned in nursing ideals

Typed by
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