

A STUDY OF FACTORS WHICH INFLUENCED A SELECTED GROUP
OF STUDENT NURSES TO CHOOSE A NURSING CAREER
AND SELECT A SPECIFIC SCHOOL OF NURSING

by

Marjorie S. O'Connell, B.S.

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APPROVED:



Miss Lucille Greggson, Associate Professor.



Dr. John Brookhart, Chairman, Graduate Council.

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M. O.

PREFACE

This study was an outgrowth of the writer's long-standing interest in the recruitment, selection, and admission of qualified applicants to schools of nursing. Public awareness of health problems, development and expansion of hospitals and health agencies, and medical, social, and technical advances have increased the demand for nurses. The broad spectrum of career opportunities for women has allowed young women to choose vocations which they believe will provide independence, financial security, job and personal satisfaction, and social status. Numerous scholarships and stipends have enabled high school graduates to seek further education or job training. Recruitment problems have become more numerous and complex.

Student nurse recruitment is of concern to all nurses but especially to nursing educators. Each year much time, effort, and money is expended on planning and implementing recruitment programs. However, few attempts have been made to determine the factors which the student nurses believe influenced their vocational choice.

This study proposed to elicit student opinions in identifying some of the factors which induce young women to enter nursing and to select a specific school of nursing.

PREPACE (CONTINUED)

It is hoped that the data will be of interest and value
to nursing educators and nursing recruiters.

M.O.

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CHAPTER I
INTRODUCTION

Introduction to the Problem

Throughout the years nursing educators have been concerned with the recruitment, selection, and admission of qualified applicants to schools of nursing. Career opportunities for women have broadened and multiplied within one generation. The enrollment of women in colleges and universities has increased forty-one per cent since 1940. (32) High school graduates of today are no longer limited to choosing between careers in teaching, nursing, and clerical or secretarial work. Increasing numbers are combining homemaking with other careers. "Modern woman is more and more considered a contributor to the life of her community as well as to her home." (32)

Nursing attracts 6 to 7 per cent of the young women who are graduated from high school each year. Annually, one third of those who enter schools of nursing withdraw. (2) "When a student who will not be able to finish nursing school is admitted, she, and the school, and society in general are all losers; nobody is the winner." (33) Nursing is a service profession and appeals to the adolescents' interest in and desire to aid society. (11) However, nursing educators and recruiters should remember that nursing must compete with other equally attractive service careers for

women.

Each year much time, effort, and money is devoted to recruiting students for careers in nursing. The recruitment program may be formal or informal. Its facets range from Career Days and Future Nurses Clubs to exhibits at Health Fairs or informal discussions between a prospective student and a registered nurse in her community. The practicing nurse, through her words and actions, may be an effective asset or an actual detriment to the recruitment program.

Manuals, handbooks, and pamphlets have been published to assist nursing recruiters in their efforts. Tests have been designed to predict the applicant's probability of scholastic success in nursing. Many schools of nursing administer the National League for Nursing Pre-Nursing and Guidance Examination to all prospective students. It has been determined that scholastic ability may be predicted accurately from these test results. (21) Personality traits which will contribute to success in nursing are more intangible. The National League for Nursing states "the paper-and-pencil tests of personality traits that have thus far been developed do not make a large enough contribution to the prediction of success in schools of nursing to justify their inclusion in a national test battery." (21) Emotional and mental maturity are ascertained primarily through references and personal interviews with prospective students. A few studies have been made of the backgrounds and factors which

motivated selected groups of students toward a nursing career but further research is needed.

Statement of the Problem

The problem presented in this study is twofold: 1) Why do young people choose a career in nursing? 2) What factors influence the choice of a specific school of nursing?

The writer proposes to provide nursing educators and recruiters with relevant data concerning the factors which influenced the 1956 freshman student nurses in Oregon to elect a career in nursing and to choose a specific school of nursing.

Purpose

If nursing in Oregon is to reach the status of a true profession it must recruit those individuals who are both desirous of becoming nurses and are mentally and physically capable of meeting the demands placed upon them. Those interested in furthering the status of nursing education must accept the responsibility for recruiting qualified applicants. Prospective students must be willing and able to complete an educational program designed to insure their technical competence and professional mindedness. Pertinent information concerning preparation for a nursing career must be available.

There have been many books and pamphlets about nursing written for use in vocational guidance. Each school of nursing

has prepared a catalog or brochure explaining its program to prospective students. Each year nurses visit local high schools to talk with interested students. Despite this emphasis on recruitment, little effort has been made to determine the factors which the student nurses believe influenced their choice of a career in nursing and their method of preparation for this career.

The need for this study was validated by three factors: 1) lack of relevant data concerning the factors which motivate students to choose a career in nursing, 2) lack of available information concerning the factors which motivate the selection of a specific school of nursing, and 3) the increasing emphasis on the recruitment and admission of qualified applicants to schools of nursing. It is hoped that the information presented will prove valuable in evaluating, planning, and implementing recruitment programs.

The broad purpose of this study was to provide relevant data concerning the factors which influenced a selected group of student nurses in their choice of a career in nursing and the method of preparation for this vocation. Four specific objectives were established as contributing to the fulfillment of the main purpose. These were:

1. To ascertain selected data pertaining to the students' home communities. It was assumed that the majority of students lived in Oregon communities of less than 25,000 population. The young women would have been graduated from public high schools whose total enrollment ranged between 500 and 1000

students.

2. To identify factors which influenced the selection of a career in nursing. These factors included length of interest in nursing, sources of knowledge about nursing, and reasons for choosing a nursing career. It was surmised that many of the young women would indicate a long-standing interest in nursing which had been stimulated by relatives or friends who were nurses. An effort was made to identify the students' greatest single source of knowledge about nursing and the secondary sources which had provided information or guidance.

3. To identify factors which influenced the choice of a specific nursing school. It was assumed that those students who had investigated more than one program in nursing might give different reasons for their final selection of a specific school than those who had sought little information.

4. To elicit recommendations for possible inclusion in future recruitment programs. An effort was made to determine the information these students felt vital but which was omitted from the current recruitment program.

Assumptions and Delimitations

For the purposes of this study it was assumed that:

1) students enrolled in Oregon schools of nursing were capable of identifying the factors which influenced their vocational choice and method of preparation for a nursing career; 2) the beliefs and opinions of these student nurses were of concern

to the nursing profession; and 3) replies to the questionnaires revealed the honest beliefs and opinions of the respondents.

The findings of this study, while suggestive, are not to be considered the basis for generalizations. The scope was limited by time, number and size of the participating schools, and paucity of related studies. The participating group was limited to those students who had enrolled in Oregon schools of nursing during September 1956. All of the respondents were young women though men may be admitted to two Oregon nursing schools.

Throughout this study the term nurse will signify members of the female sex since the participating group were young women and women predominate in nursing.

The study was made during the academic year of 1956-57 while the writer was a graduate student at the University of Oregon Medical School, Department of Nursing Education.

Procedure

After establishing the main purpose and contributory objectives, a four page questionnaire was compiled.¹ The majority of the questions were of the check-list type. Three questions required a "yes" or "no" answer and two were designed to elicit free responses concerning information or recommendations which should be incorporated into the recruitment program. Each question was evaluated on the basis of its fulfillment of the established objectives.

¹ Questionnaire is included as Appendix A, page 112.

A copy of the questionnaire, with a cover letter explaining its purpose and seeking permission for its administration, was sent to the director of nursing education at each of the seven Oregon schools of nursing. This was accompanied by a letter of approval from Miss Lucile Gregerson, thesis adviser. The director of each school graciously granted permission for administration of this questionnaire to their freshman student nurses at a mutually convenient time.

The questionnaire was administered to a total of 316 student nurses at the seven participating schools. The survey was presented during a regularly scheduled class period so all students in attendance were polled. At two schools all of the freshman students answered the questionnaire, in four schools over 90 per cent responded, and at the seventh school 55 per cent of the class were surveyed. The 316 responses represented 95 per cent of the students who enrolled in Oregon schools of nursing during September 1956.

The writer administered the questionnaire and explained the purpose of the survey at each school. Directions for answering the questions appeared on the survey but these were reviewed with each group of students before they marked the questionnaire. It was stressed that no answer should be considered "right" or "wrong" and that an effort would be made to preserve the anonymity of the participating schools. The students were encouraged to make additional comments when feasible and most did so. The young women cooperated with

seeming interest and enthusiasm.

The results from each school were tabulated separately and a master tabulation sheet was compiled.² Each question was analyzed in terms of the objective which it was designed to meet. It was noted that some questions contributed to the fulfillment of more than one objective. These were analyzed first in the area of major importance and then summarized under the other appropriate headings.

A follow-up interview with a faculty member at each of the participating schools provided background information about that school.³ A summary of the 1955 recruitment program conducted by each school was included in these data.

A review of correlated literature and related studies was made. Pertinent findings from previous studies were correlated with the data gathered from this survey.

This study has been organized into five chapters. Chapter I, Introduction, has outlined the problem, the purpose of the survey, and the procedure utilized. Chapter II, Review of the Literature, will present a survey of pertinent literature and related studies. Chapter III, Participating Schools, will include a description of the schools and a summary of the recruitment programs. Chapter IV, Findings, is devoted to an analysis and interpretation of the responses to the

²Master tabulations are included as Appendix B, page 117.

³Interview guide is included as Appendix C, page 128.

questionnaire. Chapter V, Summary, will present a summary of the study with conclusions and recommendations based on the data obtained.

CHAPTER II
REVIEW OF THE LITERATURE

Historical Review

Recruitment programs are designed to encourage intelligent, alert young women, who possess a high degree of physical and mental health, to select a nursing career. Other professions also seek young women who display these attributes.

This is an era of unlimited career opportunities for women. If nursing is to compete, it cannot be only on the basis of service. Today young women, and their parents as well, are looking for other things they consider important too. They want a career with financial security, job satisfactions and expanding horizons. They want a normal life. They want to be assured of a future and no one can deny they are entitled to that wish. (18)

Printed guides for student nurse recruiters and magazine articles on planning and implementing recruitment programs do emphasize that nursing should be portrayed as a profession which offers more than an opportunity for service to mankind. It is stressed that nursing provides financial security, the opportunity to choose employment from a variety of nursing fields, and preparation for marriage or community responsibilities. However, these same advantages may be derived from other professions open to women. Why then do students choose nursing careers?

There are two major hypotheses advanced to explain why young people choose specific vocations. The first, suggested by Doctors Eli and Sol Ginzberg, presumes that the occupational choice is based on influences begun in childhood. These influences include ethnic groups, the parents' vocations, social and economic status of the family, entertainment devices available to the child, and the parental attitude toward education. The prestige accorded a specific vocation is an outgrowth of parental and peer group attitudes. There is a positive correlation between the esteem which a child attaches to a career and her ultimate vocational choice. The child may be positively or adversely influenced toward a specific career by her relationship with her parents, relatives, and family friends. (14)

The second hypothesis is advanced by many school counselors and educators. They do not discredit the Ginzberg theory but believe childhood influences can and should be augmented or countered through education and counseling. These educators advocate the use of aptitude and interest tests, courses or units built around vocational opportunities, and individual counseling to assist the students in evaluating and correlating their interests and aptitudes. It is believed vocational counseling should be begun in the elementary grades to ensure ample time and opportunity for a wise career choice. (6,12,34)

These hypotheses are not diametrically opposed; the second might be considered supplementary to the first. Educators

who advocate the presentation of occupational information to elementary pupils actually concede that childhood experiences do influence the career choice. An historical comparison of the esteem accorded nursing and the qualifications of those who entered this vocation supports the Ginzberg theory. The current emphasis on recruitment recognizes the importance of pertinent, accurate vocational information and career counseling.

Primitive people believed disease was a manifestation of evil spirits. Priests and physicians were not differentiated; the witch doctor served the dual capacity of physician and tribal priest. Nursing per se was unknown. Some tribes permitted women to minister to members of their own families, a few isolated the sick from all contact, and others required the witch doctor to give rudimentary nursing care. The priest-physician was respected and feared; the position was hereditary or achieved by eliminating rival candidates. Nursing functions were incidental and no one sought to perform these duties. (29)

The earliest civilizations continued to associate medicine with religion. Ancient medical writings paid scant reference to nurses although the qualifications, preparation, and duties of midwives were delineated. Wealthy patients were brought to the temples where they were cared for by their personal slaves or the temple attendants. These attendants were males whose nursing duties were secondary to their

religious practices. The Sushrita-Samhita, an Indian document written during the fourth century B.C., described the nurse as "a man who was strong in body, attentive to the religious tenets and the physicians' needs, and kind to the patient." (29)

The ancient Greeks and Romans utilized temple attendants and slaves for nurses. Women were expected to supervise the slaves and to minister to all members of their households who were not taken to the temples. The health of the lower socio-economic classes was considered unimportant and no provision was made for the care of the indigent sick. Nursing was not dignified by recognition as a vocation and the practitioners were not prepared for their responsibilities. (29)

The advent of Christianity exerted a profound influence upon nursing. Christian principles emphasized and dignified the care of the sick. Service to humanity was deemed a penance for sin and a means of seeking God's favor. (10) Roman women of wealth and influence devoted their lives to nursing the sick poor. Pauls and Fabiola, the most famous of the early nurses, opened their homes as hospitals for the indigent sick and personally ministered to the patients. Other educated women from the upper classes were induced to devote their lives to caring for the sick poor. Nursing was an esteemed vocation, closely associated with religious tenets, whose practitioners were not bound by the rules of a religious order. The nurses did give compassionate, devoted care to the sick but their goal was primarily spiritual salvation for

themselves and their patients.

During the early Middle Ages nursing functions were performed by two classes of people. The art of bandaging, use of simple remedies, care of wounds, and home care of the sick were considered routine duties which every young woman learned. The lady of the manor was expected to care for all members of her immediate household and the soldiers, farmers, and vassals who served the feudal lord.

Members of religious orders comprised the second group who performed nursing functions. Monasteries offered protection to those who wished to dedicate their lives to meditation or Christian work, provided opportunities for learning in an era where education was limited, and established hospices for the sick poor. The hospitals were often governed by an abess of noble birth who supervised both nuns and monks. Since the mores prohibited nuns from caring for male patients, much of the nursing care was performed by monks. The religious were bound by vows of poverty, chastity and obedience. The religious orders were regarded with the greatest esteem and members were drawn from noble families. However, nursing itself was not differentiated for special acclaim. The religious themselves regarded nursing functions as one method of practicing Christian principles rather than as a separate vocation. "The hospital was an ecclesiastical, not a medical, institution. It was for care rather than cure; for the relief of the body when possible but pre-eminently for the

refreshment of the soul. (29)

The Crusades prompted the development of military nursing orders some of which are still in existence. The Knights Hospitallers and the Knights Templars established hospices as havens for pilgrims and to care for the sick and wounded. The Crusades were political and religious wars, lasting several centuries, which attracted adventurers, career soldiers, and religious persons. The length of the campaigns coupled with the location of the battlefields necessitated the establishment of hospitals and the provision of nurses to care for the sick. The orders were established to provide discipline and organization to the work. The nurses were men from all classes of society who were governed by lay and religious leaders. The majority were devout but they had chosen to demonstrate their religious fervor as soldiers rather than as monks confined to a monastery. They were untrained; they had not elected to become nurses, many were still part-time soldiers; they simply attempted to fulfill a need. (10)

The Renaissance and the Reformation wrought marked changes in nursing. The Renaissance stimulated a renewal of interest in learning, particularly the study of natural sciences, art, and literature. The spirit of the Renaissance, which emphasized materialism, individualism, and secularism, permeated social thinking. The Reformation gained impetus from dissatisfaction with the misuse of Papal authority, the power of individual church officials, and the changing social emphases.

Religious communities, influenced by their clergy, thought chiefly of charity, not of medical science or even of efficiency. They came to feel that what happened in this world was of little consequence, if one were assured of salvation in the next. The patients' comfort became a thing of minor importance and the attentions of untrained and ignorant servants were considered sufficient. (15)

"Monasticism no longer offered the sole opportunity to the best and finest characters for their aspirations toward self improvement and service to others." (8)

The decline of nursing was promoted by the confiscation of monasteries and dissolution of religious orders in Protestant countries. The care of the indigent sick was relegated to state supported institutions but public authorities were reluctant to assume the responsibility. Protestantism denounced the evils of Catholicism but offered no substitute for the social benefits derived from Catholicism. "Luther was narrow in his views on women's sphere, and his emphasis on faith rather than works as a means of salvation, offered them little inducement to take up self sacrificing careers" (8)

Sister Frank stated that care of the sick poor in Catholic countries where hospitals were staffed by the religious was continued with compassion and efficiency. (10) Other writers believed that even in these institutions the actual patient care was performed by untrained, illiterate servants who were supervised by nuns. (8,15,31) The strict rules of many orders placed the Sisters under the sole authority of the clergy who countermanded the physicians' orders, decreed the work which religious women might perform

with propriety, and limited patient care to the fulfillment of spiritual needs. "Scenes of suffering and the relief administered were alike gone through with by the Sisters as a penance which their creed compelled them to pay. Compassion for the poor and the sick was unknown or suppressed." (31)

Nursing became a vocation but one which was embraced only by those unfit or unwilling to do other work. Only the indigent sick were hospitalized; the upper and middle economic classes were cared for in their own homes by members of their own families who temporarily performed nursing functions. Institutional nurses were often mental defectives, prostitutes, alcoholics, petty criminals, or the aged and infirm. Extracts from minutes of welfare committees, hospital governing boards, and medical groups noted that "embezzling provisions, pawning patients' clothes, drunkenness, admitting disorderly people, and neglect of patients were of frequent occurrence." (10) Charles Dickens immortalized English nurses by his portrayal of Sairy Gamp in Martin Chuzzlewit. Sairy Gamp embodied all the undesirable characteristics of nurses but was a composite of her real-life contemporaries.

In France, where hospitals were operated by civil authority, supervised by the religious, and staffed by lay people, nursing was considered inferior to domestic service. Hospital conditions were appalling. The wards were damp, cold, and dirty; sanitary facilities were nonexistent; one bed was shared by several patients; nursing was neglected

but cooking was emphasized. Convalescent patients were expected to care for the acutely ill and often suffered relapses or contracted new diseases. (17) "In 1819 the French Bureau of Administration of Public Charity conceived the idea of replacing hired nurses with soldiers' orphans and widows who were public charges. This plan was approved but never actually implemented." (31)

Nursing in America closely paralleled European conditions. The colonists enacted laws and established institutions patterned after European counterparts. The indigent sick, the mentally ill, and the criminal were often incarcerated in the same building. "Methodical attendance on the sick, under the influence of Christian or humane sentiments, was nowhere attempted in America except by nuns. Little was done outside the Catholic Church until the formation of the Nurse Society in Philadelphia in 1839 by Friends." (31)

The mid-nineteenth century marked the reawakening of social consciousness and the beginning of social reforms. These reforms were not limited to nursing but included mental hospitals, prisons, and welfare agencies. Social and economic changes influenced nursing. Florence Nightingale was the founder of modern nursing but her philosophy would have been unheeded and her work negated in an earlier period. (37)

The training and organization of lay Protestant nurses had sporadic beginnings before Florence Nightingale made her contribution, but with her powerful personality, her vision, and her organizing ability she took hold of the movement,

placed it on a powerful foundation of organization, sound educational principles, high ethics, and inspired it with an enthusiasm which gave to it an impetus under which it is still progressing. At her death nursing was a profession, administered by women and offering them administrative and educational opportunities, formerly unthinkable. (18)

"It was Florence Nightingale who first insisted that nursing was an art. Up till her day it had been looked upon generally as a form of manual labor, regardless of how low or lofty the motive might be that prompted the service." (8)

The Crimean War demonstrated the absolute need for an organized, educated nursing group. Growing public concern over the quality of nursing care in English municipal hospitals plus the great esteem accorded Florence Nightingale enabled her to implement her plans for a school of nursing designed to educate genteel ladies in the art and science of nursing. Miss Nightingale's design for a school of nursing revolutionized current concepts of nurses and nursing. She proposed to educate mature women from England's upper classes who would not be bound by religious vows. These women would be intelligent, literate, and of the highest moral caliber. They would be prepared through lectures, clinics, demonstrations, and supervised practice to give intelligent, compassionate nursing care. Florence Nightingale proved that nursing could be a secular career divorced from sentimental ideas of martyrdom, penance, and charity. The Nightingale nurses proved that ladies could be educated to care for the sick without losing

their feminine attributes. (8)

Students at the Nightingale school were recruited through personal appeals from Miss Nightingale to the daughters of her friends and by newspaper advertisements. The applicants were primarily women over twenty-five years of age who did not plan to marry and who wished to devote their lives to service. Public opinion concerning the propriety of ladies seeking employment outside their homes gradually changed. The growth of the school was slow but the applicants were eager to accept a challenge which promised opportunities for service plus financial security and independence. (37)

Graduates from the Nightingale school of nursing were in great demand to organize and superintend schools in England and America. The first American schools of nursing, patterned after the Nightingale plan, were established in 1873 at Bellevue Hospital in New York, New Haven Hospital in New Haven, Connecticut, and Massachusetts General Hospital in Boston. (15) Applicants were recruited from newspaper advertisements, magazine articles, and personal appeals. Economic and social changes wrought by the Civil War and the movement toward emancipation of women enabled young women to seek employment outside their homes.

Nursing provided an opportunity to aid humanity, it was one of the few professions open to women, and it offered independence and economic security. To women of the lower socio-economic classes nursing meant an improvement in position, less menial labor, and a higher income. Women from the middle and upper socio-economic classes were able to leave home and participate in public life. (36)

The demand for nurses so exceeded the supply that hospitals everywhere sought to establish schools. "In 1883 there were thirty-five schools of nursing located principally in the Atlantic states and in cities throughout the West and on the Pacific Coast. In 1920 there were 3000 schools of nursing, many in small private and special hospitals where it was impossible to give adequate training or experience." (15)

The period of rapid growth in the number of nursing schools was followed by a period of self-evaluation and standard setting. Many of the smaller schools closed but those which remained attempted to improve their curriculums and to seek applicants who were mentally and emotionally qualified for nursing education. The National League of Nursing Education compiled and published A Curriculum Guide for Schools of Nursing in 1917 which was revised in 1927 and 1937. This was a suggested guide for the improvement of curriculums in nursing schools but was not mandatory. State accrediting agencies were established to approve and up-grade schools of nursing located within that state. An approved school met the legal minimum standards established by that state and its graduates were allowed to write the licensure examination. (18)

Plans for national accreditation of nursing schools were formulated by the Committee on the Grading of Nursing Schools in 1925. The first report of this committee was

published as Nurses, Patients, and Pocketbooks by May Burgess in 1928. (5) The standards recommended by this committee and subsequent national accrediting groups were primarily qualitative rather than quantitative and were designed to up-grade both the curriculums and the admission standards of the schools. The national groups lack legal sanctions but have been a potent influence on nursing education. Temporary and full accreditation of nursing schools is now accorded by the National League for Nursing.

Many of the factors which first influenced students to choose nursing careers are prevalent today. World War II increased public awareness of the health needs of the nation and the world. Nursing was a means by which women could demonstrate their patriotism and become a part of the war effort. The Cadet Nurse Corps appealed to the adolescents' desire for glamour, satisfied their patriotic enthusiasm, provided inexpensive vocational preparation, and paid them during the educational period. (18)

Today nursing is still an inexpensive method of attaining post-high school preparation for a professional career which provides economic security and independence. The demand for nurses exceeds the supply so employment opportunities are manifold.

Some few students may choose nursing because they believe the close association with patients and doctors will enhance their marriage chances. Others may select nursing to satisfy their mothers' wishes or to be with friends. However, the great majority of young women choose nursing because they want to care for people; to promote the mental,

physical, and social well-being of mankind. (36)

Nursing as we know it today is a relatively young profession. A hundred years ago there was no marked difference between the nursing care available to the well-to-do and that available to the poor; between nursing service for the city dweller and nursing service for the isolated farmer; between good nursing and no nursing. (13)

Nursing in its broadest sense may be defined as an art and a science which involves the whole patient--body, mind, and spirit; promotes his spiritual, mental, and physical health by teaching and by example; stresses health education and health preservation, as well as ministrations to the sick; involves the care of the patients' environment--social and spiritual as well as physical; and gives health service to the family and community as well as to the individual. (10)

If this modern definition of nursing is to be achieved, renewed emphasis must be placed on the recruitment and admission of intelligent, healthy, mature young women to nursing schools which have sound educational programs.

Related Studies

The 1955 Clearing House for Studies in Nursing, published by the American Nurses Association listed five studies which might provide data relevant to factors which influenced students to choose a nursing career or select a specific nursing school. These were: 1) Motivation of Students Toward Nursing as a Career, a research project written by Harriet Kandler, Director of Nurses, Boston Psychopathic Hospital; 2) A Study of the Motivations and Feelings of Selected Groups of Student Nurses at the

University of Colorado toward Nursing as a Vocation, a Master's thesis written by Dorothy Evelyn Maxson at the University of Colorado; 3) A Study of Factors Which Had the Greatest Influence in Inducing Students to Choose Wesley Memorial Hospital of Nursing as Their School, a special project prepared by the public relations department of Wesley Memorial Hospital, Chicago, Illinois; 4) An Analysis of Factors Which Influenced 360 Students in Their Choice of a Nursing Program, a Master's thesis by Sister Creighton accepted by Catholic University of America; and 5) A Study of the Influence of Selected Factors upon the Decision of Seattle High School Senior Girls Concerning Nursing as a Career, a Master's thesis written by Mary Elizabeth Flowers for the University of Washington. (1) An effort was made to review all these studies but the ones written by Miss Kandler and Miss Maxson were unavailable. The public relations department at Wesley Memorial Hospital reported their project was outdated and had no value. Miss Flowers' and Sister Creighton's theses were obtained. These were augmented by data supplied from a study of the vocational plans of Minnesota high school senior students prepared by Dr. Ralph Berdie and published as After High School--What? in 1954. (4)

A capsule summary of the available related studies has been included to augment this survey.

Miss Flowers' thesis, A Study of the Influence of

Selected Factors upon the Decision of Seattle High School Senior Girls Concerning Nursing as a Career, proposed to reveal factors which influenced young women to select or reject a nursing career. Data were obtained through interviews with high school counselors and nurse recruiters and from questionnaires administered to 845 senior students. The responses represented 51 per cent of the young women graduated from Seattle high schools in 1951.

(Miss Flowers reported that) sixty-six, 8 per cent, of the young women surveyed had chosen a nursing career. There was a positive correlation between the prestige accorded nursing and its selection as a vocation.

Eighty per cent of those who chose a nursing career had made their selection before the senior year in high school. Two-thirds of those who wished to enter nursing indicated they hoped to attend collegiate schools. Thirty-six per cent had a grade-point average between 2.0 and 3.0.

The desire to help others and the wish to enter a service profession were the major reasons advanced for choosing a nursing career. Those students who did not wish to become nurses stated they had rejected this vocation because they were more interested in other careers, could not tolerate illness and suffering, or believed the physical and mental demands of nursing were too stringent.

Miss Flowers' study did not indicate how many students actually applied to or were accepted by schools of nursing.(9)

Sister Creighton prepared a Master's thesis, accepted by Catholic University of America, entitled An Analysis of Factors Which Influenced 360 Students in Their Choice of a Nursing Program. She prepared a questionnaire which was administered to 290 freshman students enrolled in Catholic diploma schools of nursing and to ninety freshman students attending Catholic collegiate schools located in Midwestern cities.

Sister Creighton stated there are two major hypotheses advanced to explain why more students do not attend college. The first contends that high school graduates would enter colleges if more financial assistance were available. The second group believes that cultural and ethnic influences discourage students from attending college.

The student nurses were asked whether they would select a collegiate or a diploma nursing school if unlimited scholarships were available for both programs. Seventy-eight per cent stated they would choose a diploma school. However, 13 per cent of these indicated they were not familiar with collegiate programs so had little basis for their choice.

The family backgrounds of the collegiate students differed markedly from those of the noncollegiate group. Thirty-six per cent of those who chose a collegiate nursing school reported their fathers had attended college. Only 17 per cent of the young women who chose diploma schools stated their fathers had attended college. Fifty per cent

of the collegiate as contrasted to 24 per cent of the diploma group reported an annual family income in excess of 4000 dollars. Seventy-two per cent of the collegiate but only 54 per cent of the diploma students stated their siblings had attended or were attending college.

Most of the collegiate students indicated they believed a college education would best prepare them for a nursing career. Those who selected a diploma program explained their choice in terms of cost even though the majority had indicated that financial assistance would not alter their decision.

Sister Creighton concluded that the large majority of students who stated they would choose a diploma program even if college scholarships were available probably did so because of three reasons: 1) lack of sufficient information about the collegiate program, 2) cultural and ethnic influences which discouraged college attendance, and 3) economic factors represented by indirect costs of the collegiate program and delayed earning power. (7)

In 1950, Dr. Ralph Berdie of the University of Minnesota began an extensive survey of the vocational plans of 25,000 Minnesota high school senior students. His findings were published in a book, After High School--What? in 1954.

Thirteen thousand five hundred sixteen senior girls answered a questionnaire designed to elicit information concerning their family backgrounds and vocational choices.

The responses were divided into three groups; 1) the metropolitan group composed of students who lived in cities of over 30,000 population, 2) the nonfarm group composed of young women who lived in towns of less than 30,000 population, and 3) the farm group.

Eight hundred fifty-seven, 6 per cent, of the senior girls indicated they had chosen a nursing career. The young women who planned to enter nursing schools occupied a cultural position midway between those who intended to enter college and those who planned to seek employment immediately after graduation. The fathers of those who chose nursing were primarily skilled tradesmen. The modal parental education was completion of elementary school plus "some" secondary school. Their families read more books, subscribed to more magazines, and belonged to more civic organizations than did the families of those students who did not want post-high school education. The farm students who selected nursing careers more closely resembled their counterparts who planned to enter college than did either the nonfarm or metropolitan groups.

Eighty-three per cent of those who chose a nursing career regarded their plans primarily from a vocational standpoint. These students considered nursing as a vocation which would provide them with a liberal education and enable them to be financially independent.

One-half of the students had prepared for admission to

a nursing school by electing the college preparatory courses in high school. Less than 10 per cent had selected their high school courses on the advice of a counselor and only 4 per cent indicated they had consulted a teacher. What little guidance the young women did remember was provided by parents and relatives.

Forty per cent of those who planned to enter nursing schools indicated they would attend college if finances permitted. There was no indication of how many intended to enter collegiate nursing programs.

Dr. Berdie's study indicated the students' vocational choice but did not reveal how many were able to fulfill these plans. (4)

CHAPTER III
PARTICIPATING SCHOOLS

Description of the Schools

This study was limited to the freshman students who enrolled in Oregon schools of nursing during September 1956. A copy of the questionnaire and a cover letter explaining its purpose and seeking permission for its administration was sent to the director of nursing education at each school. This was accompanied by a letter of approval from Miss Lucile Gregerson, thesis adviser. Each director of nursing education courteously granted permission for the students to participate. Three hundred sixteen young women, 95 per cent of all the freshman students in Oregon schools of nursing, were polled.

Two schools of nursing, which utilize the clinical facilities of Portland hospitals, were omitted from the study. These two collegiate nursing programs are actually located in Washington even though the students do obtain clinical experience at Oregon hospitals. Graduates from these schools may apply for registration by examination in either Washington or Oregon but they are not considered students in or graduates from an Oregon nursing school.

There are seven Oregon schools of nursing. Six are located in Portland and one in Eugene. Three schools offer a four year collegiate program while four have a three year diploma program. None of the schools discriminates against members of any race or creed. Some will accept male applicants but the majority limit their enrollment to female students. All of the schools are approved by the Oregon State Board of Nurse Registration and Examination. Five schools meet the more stringent standards of the National League for Nursing and have been accorded full national accreditation. One school, which is temporarily accredited, plans to seek full accreditation. One has no form of national accreditation.

The total enrollment in each school ranges between fifty and one hundred eighty-four students. The average total enrollment is approximately 120 students with diploma programs having the three largest student bodies. Prospective applicants must be at least seventeen years old and should be no more than thirty-five. One school does not accept applicants over thirty years of age, five accept students up to thirty-five years old, and one school has no maximum age limit.

Six of the nursing schools admit one class in September of each year. All ^{of} these students are considered to be enrolled in the school of nursing even though students at the two collegiate schools are actually registered for non-nursing courses. One school admits a class twice each year. This collegiate program is the only school which neither selects

nor admits applicants until they have successfully completed a five quarter pre-nursing program. This pre-nursing program may be taken at any accredited college chosen by the student.

Six of the Oregon schools are operated under ecclesiastical auspices. One collegiate and two diploma programs are conducted by Catholic groups and one collegiate and two diploma programs are sponsored by Protestant groups. The one secular school of nursing is a collegiate program.

The facilities available for clinical instruction range in size from a hospital of 275 beds to one with 450 beds. One diploma and one collegiate school utilize the same clinical facilities. One diploma school shares its clinical facilities with a Washington collegiate program. All the schools utilize the same psychiatric nursing affiliation. A tuberculosis nursing affiliation is open to students from three Oregon collegiate schools, two Oregon diploma schools, and one Washington collegiate program. One collegiate school provides theoretical and clinical experience preparatory for first level positions in public health nursing for all its students. Another collegiate school provides an elective clinical experience in public health nursing but plans to enlarge its program so that all students will be prepared for first level public health nursing positions.

The total cost of a diploma program ranges from 300 to 600 dollars depending upon the school selected. Nonresident

students who choose a diploma program do not pay out-of-state tuition. The total cost of a collegiate program ranges from 1200 to 3700 dollars. Two sectarian collegiate schools do not assess nonresident tuition but out-of-state students at the state-supported secular school must pay an additional fee.

Student personnel policies are established by the individual school. One school admits married students and does not prohibit or restrict marriage after enrollment. None of the diploma schools will admit married applicants but some permit students to marry during the last six months of the senior year. Two schools consider the applications of married, widowed, or divorced students on an individual basis.

Policies concerning social privileges, sick leave and vacation allowances, student health provisions, work schedules, and student government are numerous, varied, and beyond the scope of this study. Prospective students may secure this information from the individual school.

Applicants for admission to all Oregon schools of nursing must have been graduated from an accredited high school. Students who are graduated from nonaccredited secondary schools may fulfill this requirement by successfully completing the high school equivalency test or by enrolling for additional courses at an accredited educational institution. In rare instances, nursing schools may admit candidates graduated from nonaccredited secondary schools provided these young women meet all other entrance requirements. If these students

demonstrate scholastic ability, the nursing school may petition the State Board of Nurse Registration and Examination for clarification of the students' status to qualify them for registration upon completion of the course.

It is recommended that prospective student nurses plan their high school program to include four Carnegie units in English, one unit in chemistry, one unit in biology or physics, and two units in mathematics. The applicants should have earned a grade-point average of at least 2.5.

Recruitment Programs

The annual expenditure in Oregon for recruitment of student nurses is unknown. However, available information concerning the qualifications of the nursing representatives, the time spent in secondary school visitations, and the printed materials supplied indicates that considerable funds are required. High school visitations are only one facet of the total program. Secondary measures include exhibits at Health Fairs, teas and panel discussions, spot announcements on radio or television, newspaper and magazine articles, posters, billboards, and placards. Many of these recruitment methods are not sponsored or financed by the Oregon schools of nursing either as a group or individually. It is important for each group who contributes toward nurse recruitment to analyze the effectiveness of the method utilized in terms of time and money expended.

A summary of the 1955 recruitment program, provided by a faculty member at each school of nursing, has been included so that the reader might correlate this information with the students' responses reported in Chapter IV.

In 1955 each nursing school devoted from two to nine weeks to student recruitment. The average school allotted seven weeks to high school visitations. One nursing school extended its program to include panel discussions at eleven churches and seven concerts by the student choir.

The number of secondary schools visited ranged between twenty and ninety-three but the average nursing recruiter contacted sixty-six schools. Some of the smaller high schools held joint Career Days so the nursing representatives actually contacted students from more schools than these statistics would indicate.

The recruiters were usually faculty members but students and general duty nurses did have limited participation. At most schools the director or assistant director of nursing education assumed the major responsibility. At one school the social director, who was a nurse, visited some high schools and acted as a resource person when the student choir performed or student nurses held panel discussions for church groups. Two schools were represented by clinical instructors. One school selected a general duty nurse, who was a recent graduate from that school, to contact some of the high schools. One collegiate school did not utilize a nursing recruiter from

its own faculty. The college itself was represented by a male faculty member who had no connection with the department of nursing which shared the nursing recruiter from a diploma school.

One collegiate school had a unique recruitment program. The Oregon high schools were divided into two groups based on their total enrollment. Secondary schools which had more than fifty senior students were visited by a nursing counselor who is an assistant professor in the department of nursing education. Visitations to high schools with less than fifty senior students were made by representatives from the nearest college which was part of the state system of higher education. This school selected and admitted students after they had completed a pre-nursing program.

Student nurses played a minor role in the recruitment program. Four schools reported that student nurses never participated in high school visitations. Three schools indicated that students accompanied the nursing representative to high schools in the immediate vicinity. One school utilized performances of the student choir and student sponsored programs for church groups as recruitment devices.

There was little variation in the methods utilized by nursing representatives. Each recruiter attempted to represent the nursing profession and a specific school of nursing. Each attempted to portray nursing as a desirable vocation which requires the highest personal and academic qualifications but offers rich rewards in terms of service to mankind,

employment opportunities in a variety of nursing fields, a broad educational background, financial security, and independence. Special emphasis was placed on high school preparatory courses and sources of information about specific nursing schools. In some instances, a film or slides were shown. Pamphlets, school catalogs, and brochures were distributed. The prospective students were encouraged to ask questions and time was allotted for small group discussions with individual recruiters.

High school seniors who wrote letters of application to specific nursing schools were requested to present an academic transcript, personal references, and a health certificate. They were encouraged to visit the school of nursing for a personal conference with the director of nursing education and a tour of the premises. One school conducted pre-nursing sessions designed to acquaint applicants with the students, the faculty, and the educational program. A psychometric battery or the National League for Nursing Pre-Nursing and Guidance Examination were administered all applicants at each school. Each school had an admissions committee which evaluated all the available data provided by each candidate and selected those applicants believed most qualified.

CHAPTER IV

FINDINGS

The primary purpose of this study was to determine factors which influenced the 1956 Oregon freshman student nurses to choose a career in nursing and to select a specific school of nursing. Four objectives were established as guides toward the fulfillment of this purpose. These objectives were: 1) to ascertain selected data pertaining to the students' home communities; 2) to identify factors which influenced the selection of a nursing career; 3) to identify factors which influenced the choice of a specific nursing school; and 4) to elicit recommendations for possible inclusion in future recruitment programs.

A combination check-list and free response type questionnaire was devised to ascertain the desired information. Each question was analyzed in terms of the objective which it was designed to fulfill. It was noted that some questions contributed to the fulfillment of more than one objective. These were analyzed first in the area of major importance and then summarized under the other appropriate headings.

Prior to administering this questionnaire six hypotheses were formulated. It was presumed that:

1. The majority of the students would be residents of Oregon who lived in towns of less than 25,000 population.

They would have been graduated from public high schools whose total enrollment ranged between 500 and 1000 students.

2. The majority of these young women would indicate a long-standing interest in nursing which had been stimulated by relatives or family friends who were nurses.

3. Relatives and friends would prove to be the greatest sources of information about nursing.

4. Students who belonged to a Future Nurses Club would have gained most of their information about nursing through the club's activities.

5. The students' chief reasons for choosing nursing as a career would have a positive correlation with their descriptions of what nursing meant to them.

6. Those students who had investigated more than one program in nursing would indicate different reasons for their selection of a specific school than those who had sought little information.

The questionnaire was administered to a total of 316 freshman student nurses at the seven participation schools. The survey was presented during a regularly scheduled class period so all students attending were polled. At two schools all the freshman class answered the questionnaire, in four schools over 90 per cent responded, and at the seventh school 55 per cent of the class were surveyed. The responses

represented almost 95 per cent of the 334 freshman students who enrolled in Oregon schools of nursing during September 1956. This sampling was deemed large enough to provide the necessary data and to reflect accurately the opinions of all the freshman students in Oregon schools of nursing.

Table Number I shows the total freshman enrollment at each of the schools, the number of questionnaires administered and answered, and the per cent of the enrollment polled.

TABLE I
NUMBER OF QUESTIONNAIRES GIVEN, NUMBER ANSWERED, PER CENT OF ENROLLMENT POLLED IN FRESHMAN CLASSES AT OREGON SCHOOLS OF NURSING

Oregon Nursing Schools	Total Freshman Enrollment	Number of Questionnaires Given	Number of Questionnaires Answered	Per Cent of Enrollment Polled
A	75	71	71	97.7
B	34	32	32	94.1
C	20	11	11	55.0
D	40	39	39	97.5
E	59	59	59	100.0
F	77	77	77	100.0
G	29	27	27	93.1
Total:	334	316	316	94.6

The purpose of this chapter is to present and interpret the findings of the survey. The findings and interpretations are discussed under four sections: 1) data pertaining to the

area of residence, 2) factors influencing the choice of a nursing career, 3) factors influencing the selection of a nursing school, and 4) recommendations for recruitment programs.

Data Pertaining to the Area of Residence

Two hundred thirty-eight, or 75 per cent, of the students were residents of Oregon while seventy-eight young women were nonresidents. Nonresident students were enrolled in each of the schools but their distribution ranged from 6 per cent of the freshman class at School B to 45 per cent at School C. It should be noted that the data obtained at School C represented only eleven responses or one-half of the freshman class. Findings based on these responses might not reveal the actual ratio of resident to nonresident students at this school. The data obtained from the other six schools might be regarded as more reliable since both the total enrollment and the per cent of responses were greater. The out-of-state enrollment at School B was disproportionately smaller than the nonresident enrollment at each of the other schools.

Seventy-six, or 97 per cent, of the nonresident students were enrolled in Portland schools of nursing. School B, located in a city over one hundred miles south of Portland, had enrolled only two nonresident students in the freshman class.

One of these students stated that she had lived in the city where School B is located until two years ago and had returned to be near her friends and relatives. School B is operated under the auspices of a religious order but this would not appear to be a deterring factor to prospective out-of-state students. Two Portland schools, also operated by religious orders, have nonresident enrollments which equal 20 per cent and 28 per cent of their freshman classes. It might be presumed that even though School B is situated in the third largest city in Oregon its location may contribute to the paucity of nonresident students.

The other six schools are located in a metropolitan area adjacent to the state of Washington so prospective nonresident students may be more cognizant of them. The three Oregon collegiate schools of nursing are located in Portland. An out-of-state student who wishes to enroll in an Oregon collegiate program must choose a school situated in Portland.

Table Number II compares the number of resident and nonresident students enrolled in each of the participating schools.

TABLE II
COMPARISON OF FRESHMAN STUDENTS IN OREGON
SCHOOLS OF NURSING ON THE BASIS OF OREGON
RESIDENCY

Nursing Schools	Students	Current Residency of Students in Oregon Schools of Nursing			
		Resident		Nonresident	
		Number	Per Cent	Number	Per Cent
A	71	54	70.1	17	29.9
B	32	30	93.7	2	6.3
C	11	6	54.5	5	45.5
D	39	28	71.8	11	28.2
E	59	46	79.1	13	20.9
F	77	52	67.5	25	32.5
G	27	22	81.5	5	18.5
Total:	316	238	75.3	78	24.7

Almost 76 per cent of the students polled were enrolled in diploma schools of nursing while 24 per cent chose a collegiate school. The ratio of one collegiate student to three diploma students was higher than the national average. The 1956 Facts About Nursing reported that only 14 per cent of all freshman nursing students were enrolled in collegiate

schools. (21)

The ratio between collegiate and diploma students was not altered significantly when the group was divided on the basis of Oregon residency. Seventy-six per cent of the resident students and 73 per cent of the nonresidents were enrolled in diploma schools. Approximately 24 per cent of the resident students and 27 per cent of the nonresidents were enrolled in collegiate programs. It might be concluded that factors other than Oregon residency influenced these students to select a specific type of nursing program.

Table Number III shows the distribution of resident and nonresident students between diploma and collegiate nursing programs.

TABLE III
DISTRIBUTION OF RESIDENT AND NONRESIDENT FRESHMAN
STUDENTS IN COLLEGIATE AND DIPLOMA NURSING PROGRAMS

Type of Program	Distribution					
	Resident		Nonresident		Combined	
	Number	Per Cent	Number	Per Cent	Number	Per Cent
diploma	182	76.5	57	73.1	239	75.6
collegiate	56	23.5	21	26.9	77	24.4
Total:	238	100.0	78	100.0	316	100.0

In 1956 the Oregon schools of nursing attracted non-resident students from ten states, the territory of Alaska, and the Philippines. Sixty-four per cent of these students lived in Washington. The majority stated they were residents of Vancouver or the surrounding area. The proximity of Portland plus the absence of Washington schools in this area may have influenced these young women to choose an Oregon school of nursing.

Ten students stated that they lived in Idaho. These young women all resided within fifty miles of an Idaho school of nursing. Proximity could not be considered a major factor in their selection of a nursing school.

Three of the students were residents of Alaska. Since there are no schools of nursing in Alaska these young women had to choose a school located away from home. Proximity of the school might be an important factor in their choice but their conception of proximity would have to encompass all the northwestern portion of the United States. It could be presumed that other factors contributed to their ultimate decision.

One student lived in Illinois. She stated that she had formerly lived in Oregon and had returned to be near her friends and relatives.

One student lived in Nevada. Nevada has one collegiate

program in nursing, opened during the past year, but there are no diploma schools. This student preferred to enter a diploma program so necessarily chose an out-of-state school.

The young woman who was a resident of the Philippines stated that she immigrated to the United States for the express purpose of enrolling in an Oregon school of nursing. She indicated that she would return to the Philippines upon completing her education. This young lady believed that the Oregon schools of nursing had higher scholastic standards than those in her country.

Table IV shows the origin and distribution of those students who were not residents of Oregon.

TABLE IV

COMPARISON OF RESIDENCY OF FRESHMAN STUDENTS IN OREGON
SCHOOLS OF NURSING WHO ARE NONRESIDENTS OF OREGON

State Territory or Nation	Nonresident Students	
	Number	Per Cent
Washington	50	64.1
Idaho	10	12.8
California	6	7.7
Alaska	3	3.8
Montana	2	2.5
Nevada	1	1.3
North Dakota	1	1.3
Utah	1	1.3
Colorado	1	1.3
Minnesota	1	1.3
Illinois	1	1.3
Philippines	1	1.3
Total:	78	100.0

The Oregon State Board of Health estimated the 1956 population of Oregon to be 1,734,650 persons. (24) Current figures published by the Oregon State Board of Census revealed that there were one hundred ninety towns of less than 5000 population, twenty-three towns whose population ranged between 5000, and 25,000, two cities with a population between 25,000 and 75,000, and one city whose population exceeded 100,000. (25) Approximately one-third of the total population of Oregon is concentrated in the cities of Portland, Salem, and Eugene. Two-thirds of the population is distributed among rural areas, villages, and towns of less than 25,000 population.

The students were asked to indicate the approximate population of their home communities. It was noted that no one school had enrolled a preponderance of students from communities of a specific size. Resident and nonresident students from small towns and large cities had matriculated at each school. There was no indication of a correlation between the population of the home community and the choice of a diploma or collegiate program.

Table Number V denotes the students' responses regarding the population of their home communities. Sixty-two per cent of the young women lived in towns of less than 25,000 population. Ninety-seven of these students lived in communities of less than 5000 population while ninety-eight lived in

towns with a population between 5000 and 25,000. There was no significant difference between the per cent of resident and nonresident students who lived in communities of less than 5000 population. Eight per cent more out-of-state students lived in towns of 5000 to 25,000 population than did resident students.

Fifty-nine, 19 per cent, of the students lived in cities of 25,000 to 75,000 population. Twenty of these young women were not residents of Oregon. The majority stated that they lived in Vancouver Washington. Salem and Eugene are the only Oregon cities whose population fell within this range. Thirty-nine students stated they lived in Oregon cities of this size so these young women might be presumed residents of Salem or Eugene. If this is true then these two cities provided 16 per cent of all the resident students who enrolled in Oregon schools of nursing during 1956. This 16 per cent has increased importance when it is realized that the combined population of Salem and Eugene is slightly less than 90,000 persons. One-sixth of all the resident students lived in cities which comprised only one-nineteenth of the state's population. The ratio of freshman students in these cities was 4.3 per 10,000 population. The state-wide ratio was 1.4 freshman student nurses per 10,000 population. The students may not have indicated the population

of their home communities correctly; the recruitment program in these cities may have been extremely effective; extraneous factors may have influenced an exceptionally large number of students from Salem and Eugene to elect a nursing career this year; data obtained over a period of several years might correlate with the state-wide norm.

Dr. Berdie's 1950 study of 13,513 Minnesota high school senior girls revealed that 7 per cent of the students from towns of less than 30,000 population planned to enter nursing while only 5 per cent of the students in metropolitan areas selected a nursing career. He suggested that this percentage difference might be due to cultural influences rather than to a basic interest in nursing. (4) Dr. Berdie's study indicated the students' plans but did not reveal how many were actually accepted by schools of nursing. This survey made no attempt to ascertain cultural differences in the students' backgrounds so there was no basis for comparison with Dr. Berdie's emphasis on the relationship between the socio-economic background and the career choice.

The Oregon State Department of Education reported that 7742 young women were graduated from Oregon high schools in 1956. Five thousand five hundred nine of these students lived in towns of less than 25,000 population while 2233 resided in larger cities.⁴ Two hundred thirty-eight, 3.0 per

⁴Correspondence from Mr. Rex Putnam, Oregon State Department of Education, February 17, 1957.

cent, of all the female secondary school graduates entered Oregon nursing schools. Only 2.5 per cent of the young women who lived in towns of less than 25,000 population chose nursing careers and selected Oregon schools. Four and three tenths per cent of the female high school graduates residing in cities of over 25,000 population enrolled in Oregon schools of nursing.

The distribution of the students' responses relative to the population of their home communities are shown in Table V.

TABLE V
DISTRIBUTION OF RESIDENT AND NONRESIDENT FRESHMAN
STUDENTS RELATIVE TO POPULATION OF HOME COMMUNITY

Population of Home Community	Distribution of Freshman Students in Oregon Schools of Nursing					
	Resident		Nonresident		Combined	
	Number	Percent	Number	Percent	Number	Percent
less than 5000	72	30.3	25	32.1	97	30.6
5000 to 25,000	69	28.9	29	37.2	98	31.0
25,000 to 75,000	39	16.4	20	25.6	59	18.6
over 100,000	56	24.4	4	5.1	62	19.8
Total:	236	100.0	78	100.0	316	100.0

It was presumed that the majority of students would state that they were graduated from public high schools whose total enrollment ranged between 500 and 1000 pupils.

It was believed that the trend toward union high schools would result in a proportionately larger high school enrollment than the population would indicate.

Two hundred sixty-five, 84 per cent, of the students were graduated from public high schools. Forty-seven students were graduated from parochial high schools and four from private schools. Parochial schools were defined as any high school operated under the auspices of a Catholic or a Protestant church group. Private schools were differentiated from parochial schools by the absence of ecclesiasticism.

All but one of the students who were graduated from parochial high schools had enrolled in a Catholic school of nursing. The single exception was graduated from a Protestant high school and had entered a Lutheran school of nursing. Alumnae of public high schools had enrolled in each nursing school.

Nineteen students were graduated from public high schools with an enrollment of less than 200, seventy-one were graduated from public schools whose enrollment ranged between 200 and 500, and seventy were graduated from public high schools whose enrollment ranged between 500 and 1000 students. One hundred five young women were graduated from public secondary schools whose total enrollment exceeded 1000 students.

Twenty-one, 45 per cent, of the young women who were

graduated from parochial high schools reported that the total enrollment in these schools was less than 200 students. Fourteen alumnae of parochial schools indicated the enrollment ranged between 200 and 500 while twelve students had matriculated at parochial schools whose enrollment exceeded 500 but was less than 1000. It should be noted that all but one of these parochial schools were operated under Roman Catholic auspices and were limited to female students. It would be expected that the total enrollment would be proportionately smaller than the size of the community when the school was limited to members of one sex.

Only four students stated that they were graduated from private secondary schools. One young lady, an Oregon resident, had matriculated at a school of less than 200 students. The other three respondents were graduated from private schools whose enrollment ranged between 200 and 500 students. One of these lived in the Philippines, one in Utah, and one, the daughter of foreign missionaries, had attended school outside the United States.

There was no correlation between the enrollment of the high school and the selection of a collegiate or diploma program in nursing. Graduates from large and small secondary schools had matriculated at each school of nursing.

The responses disproved the assumption that the majority of the young women were graduated from public high schools whose total enrollment ranged between 500 and 1000 students.

It was true that the majority were graduated from public secondary schools. The majority of those attending a public school were alumnae of institutions with a student body exceeding 1000. A plurality of all the respondents were graduated from public high schools whose enrollment exceeded 1000 students. More students were graduated from parochial than from public schools whose enrollment was less than 200. Eighty-eight respondents were graduated from secondary schools with a student body between 200 and 500 while eighty-two young women were graduated from schools whose enrollment exceeded 500 but was less than 1000 students.

Table Number VI denotes the distribution of the students' responses based on the enrollment of the public, parochial, or private high school from which they were graduated.

TABLE VI
 DISTRIBUTION OF FRESHMAN STUDENTS RELATIVE TO THE TYPE AND ENROLLMENT
 OF THE HIGH SCHOOLS FROM WHICH THEY WERE GRADUATED

Enrollment of High School	Distribution of Responses							
	Public		Parochial		Private		Combined	
	Number	Per Cent	Number	Per Cent	Number	Per Cent	Number	Per Cent
less than 200	19	7.2	21	44.7	1	25.0	41	12.9
200 to 500	71	26.8	14	29.7	3	75.0	88	28.0
500 to 1000	70	26.4	12	25.6			82	25.9
over 1000	105	39.6					105	33.2
Total:	265	100.0	47	100.0	4	100.0	316	100.0

Factors Influencing the Choice of a Nursing Career

One's vocational choice may be motivated by a single pre-eminent factor or a combination of lesser elements which cohere to form the final decision. These subjective and objective forces may be so intertwined that the individual is unaware of all the factors which influenced her selection of a career. This study limited the factors contributing to the choice of a nursing career to origin of interest in nursing, length of interest, and sources of knowledge about nursing. The respondents were asked to describe what nursing meant to them and to indicate their chief reason for choosing a nursing career.

Fifty-seven per cent of the students stated that they had been interested in a nursing career for more than four years. Twenty-three per cent had been interested from two to four years and 13 per cent from one to two years. Only 6 per cent indicated an interest aroused within the past year.

Table Number VII denotes the number of years the students had been interested in a nursing career.

TABLE VII
 COMPARISON OF THE STUDENTS' RESPONSES REGARDING HOW
 LONG THEY HAD BEEN INTERESTED IN A NURSING CAREER

Length of Interest	Responses of Freshmen Students in Oregon Schools of Nursing	
	Number	Per Cent
period of less than one year	21	6.7
between one and two years	43	13.6
between two and four years	72	22.8
more than four years	180	56.9
Total:	316	100.0

The length of the interest in nursing was correlated with the factor which first stimulated this concern. It might be presumed that those students with a long-standing interest in nursing would indicate different stimuli than those whose interest had developed more recently.

Nurse friends and relatives had provided the greatest impetus for the most students. Approximately 40 per cent of all the students attributed their interest in nursing to this source. The stimulus of nurse friends and relatives was not altered by the student's length of interest in nursing. Those who had made their career choice within the past two years stated their nurse friends were former classmates and older sisters. Those with a long-standing interest in nursing reported their desire had been stimulated by family friends or older relatives.

Eleven per cent of the students stated they had always wanted to be nurses and did not know what prompted their desire. Children have a limited conception of career opportunities and may be influenced by persons or facilities within their immediate environments. Young children may report that they want to become nurses but have no conception of what nursing is or what nurses do. Many change their plans but those who do enter nursing might not be able to identify how their interest was aroused.

Fourteen per cent of all students believed their desire to enter nursing was stimulated by employment in a hospital

or doctor's office. Twenty-three per cent of these young women had been interested in nursing less than two years. Some stated they had had a tenuous interest in nursing which was crystallized through their work. Only 13 per cent of those interested in nursing more than two years attributed their career choice to work experience. Few students who selected a nursing career more than two years ago were old enough to be working in hospitals or clinics at that time.

Seven per cent of all the students traced their interest in nursing to Career Day programs. The influence of nursing representatives was not dependant upon the student's length of interest in nursing. Career Day programs are limited to high school students. Those young women who had been interested in nursing more than four years and attributed this interest to nursing recruiters must have attended college or worked prior to entering a nursing school.

Seven per cent of the respondents believed their interest in nursing had been stimulated by illness in their immediate families. Some reported that their own hospitalization for minor disease entities had prompted their career choice. There was no correlation between this stimulus and the student's length of interest.

Twelve per cent of the students who had been interested in nursing from two to four years believed high school and college counselors had motivated them. These young women attributed their career choice to vocational counseling and

an investigation of career opportunities. Counselors exerted minimal influence on those interested in nursing less than two years or more than four.

Many of the students who had developed a recent interest in nursing indicated that nursing was an alternate vocational choice or was secondary to another career. One young woman was unable to become a doctor so chose nursing. One stated that nursing would qualify her for a stewardess position with a non-scheduled airline. Two regarded nursing as a form of preparation for marriage which required less time and money than college. Six students stated that they intended to become foreign missionaries and nursing would be an adjunct to this work. Three were primarily interested in science but did not wish to teach so decided upon nursing.

The correlation between length and source of interest was limited. Table Number VII correlates the length of the students' interest in nursing with the factor which stimulated this concern.

TABLE VIII
COMPARISON BETWEEN THE LENGTH OF INTEREST IN NURSING AND
THE FACTOR WHICH FIRST STIMULATED THIS INTEREST

First Factor that Stimulated Interest in a Nursing Career	Distribution of Responses of Freshman Students							
	Length of Interest in Nursing				Length of Interest in Nursing			
	Less than 1 yr.		1 to 2 years		2 to 4 years		Over 4 years	
	Number	Per Cent	Number	Per Cent	Number	Per Cent	Number	Per Cent
Friends or relatives who were nurses	9	42.9	17	39.3	29	40.3	78	43.3
work in hospital or doctor's office	4	19.0	11	25.5	13	16.7	17	9.5
interview with nurses at Career Day	1	4.8	2	4.6	5	6.9	15	8.3
tests and discussions with counselor	1	4.8	3	6.9	9	12.5	6	3.3
other	6	28.5	10	23.2	17	23.6	64	35.6
Total:	21	100.0	43	100.0	72	100.0	160	100.0

The students were asked to indicate with whom they had discussed their interest in nursing. Possible responses were suggested and they were encouraged to enumerate others. The number of responses was not limited.

Ninety-one per cent of the students had discussed their interest with their parents or relatives. It might be presumed that the student's career choice would be of prime concern to her parents. Most of the students were at least partially dependent upon their families for financial support. It might be expected that parental opinion and guidance would be sought when the vocational choice necessitated advanced education. Twenty-nine students did not indicate they had consulted their families. Four of these were older than most freshman students and had worked several years before entering nursing.

Fifty-eight per cent of the students reported they had discussed their interest in nursing with a high school counselor. There was no indication of the amount or type of guidance extended by the counselor but these young women had utilized available counseling resources. This is in sharp contrast to the findings reported in a 1956 survey of 164 young women enrolled in Portland area high schools. One hundred fifteen of these students were interested in nursing careers but only 35 per cent had discussed this interest with a counselor. (22) The high school students may have had a more tenuous interest in nursing or have planned to consult

their counselor at a future date.

It might be expected that counselors could interpret the results of aptitude tests, provide vocational information, and assist the student to plan her course of study in high school. Even though a majority of the respondents had consulted their counselors, many still recommended that nursing recruiters specify high school courses which would prepare them for nursing. These young women may have disregarded their counselors' suggestions or believed the counselors lacked needed information.

Fifty-one per cent of the students had discussed their interest in nursing with a registered nurse who lived in the community. These nurses had no official status in the recruitment program but their contributions should not be underestimated. It should be assumed the students were influenced in their career choice and selection of a nursing school. If the nurses are to exercise their influence properly they must provide pertinent, accurate information. They must be considered an integral part of the recruitment program and effort should be made to inform them of the advances in nursing education.

The family doctor was consulted by 35 per cent of the students. These physicians assumed a unique role in nursing recruitment. Their concept of nurses and nursing functions was based on their professional relationships with nurses. Physicians may be an asset or a detriment to the recruitment

program but they will continue to influence it. It might be presumed that the doctors mentioned in this study exerted a positive influence. Physicians who wish to enhance nursing recruitment must be aware of modern concepts in nursing. Nursing recruiters and educators should recognize the doctors' influence and ensure its positive effect.

Only 29 per cent of the students had discussed their interest in nursing with a nursing representative on Career Day. Nursing representatives may speak to a large group of students and have limited time for individual consultations. The students may have a more personal relationship with a nurse in the community. The nursing representative visits the high school for a few hours once each year. The nurse who lives in the community may be consulted more frequently and with greater leisure. The nursing recruiter may arouse or stimulate an interest in nursing which is sustained by extrinsic forces. Students who did not discuss their interest in nursing with the recruiter may have omitted a source of knowledge and guidance. Fifty per cent of the students recommended that nursing recruiters provide specific information about high school courses, scholastic requirements in nursing, or student personnel policies. The nursing representatives might have supplied this information had the students consulted them.

Fourteen per cent of the students discussed nursing with college counselors. Twenty-four per cent of all the students

were enrolled in collegiate schools but several young women who elected diploma programs had attended college. All of the students at School G had consulted their college counselor.. School G does not admit students until they have completed a pre-nursing course. All these young women have a pre-nursing adviser or counselor who assists them in planning and implementing the pre-nursing program.

Nineteen students had consulted their minister or priest about a nursing career. Some of these planned to become foreign missionaries; others wished to enter a nursing school operated by members of another religious group. Several reported deep religious convictions which prompted them to discuss any vocational choice with their minister.

Eight students indicated they had discussed nursing with their friends but did not specify who these friends were. It might be assumed that most students discussed possible career choices with their peer group.

Table Number IX indicates the individuals from whom the students sought information or guidance concerning their vocational interest in nursing.

TABLE IX
 INDIVIDUALS WITH WHOM THE FRESHMAN STUDENTS
 DISCUSSED THEIR INTEREST IN NURSING

Individuals with Whom Interest in Nursing Discussed	Distribution of Responses	
	Number	Per Cent
Possible Number and Per Cent	316	100.0
parents or relatives	287	90.8
high school counselors	182	57.6
nurses in the community	161	50.9
family doctor	109	34.5
nurses at Career Days	93	29.4
college counselors	45	14.2
ministers or priests	19	6.0
friends	8	2.5

An effort was made to identify those sources which the students believed had provided the most information about nursing. The responses were varied and no one reply was mentioned by a majority of the students. The four sources mentioned most frequently were friends, parents and relatives, Career Days, and reading material.

Twenty-six per cent of the students stated their friends had provided the most information about nursing. Thirteen per cent had gained the most knowledge from their relatives. Friends and relatives exerted the most influence on the students' vocational choice. Friends and relatives were indicated as the prime stimuli of interest in nursing; they were consulted most frequently about nursing; and they provided the most information for the largest number of students. There was no indication of how qualified these friends and relatives were to present accurate, pertinent information. It might be presumed that many were nurses but this would not assure accurate data.

Eighteen per cent of the respondents believed they had gained their cognition of nursing from Career Day. Career Day was an impotent stimulus toward a nursing career but it was a major source of information for students who were already interested in nursing. However, Career Days were of prime benefit to less than one-fifth of all the students and ranked far beneath the combination of friends and relatives as a major source of information.

Seventeen per cent of the students had gained the most information from reading material. This included catalogs, brochures, pamphlets, articles, and books about nursing and nursing schools. Some of this material may have been provided by nursing representatives on Career Day but the students attributed their knowledge to the printed matter rather than to the persons who provided it.

The other major sources of information were counselors, Future Nurses Clubs, employment, the family doctor, and the radio or newspapers. These sources were indicated by a total of 27 per cent of the respondents.

Forty-four young women attended high schools which had a Future Nurses Club but only forty were members. The actual number and location of the Future Nurses Clubs in Oregon are not known.⁵ Forty-five per cent of the students who belonged to a Future Nurses Club had derived the majority of their knowledge about nursing from the club's activities. Only one student stated the club had been of no benefit. The findings disproved the prior assumption that the majority of students who belonged to Future Nurses Clubs would indicate this affiliation as their major source of information about nursing.

Twelve per cent of the young women had obtained the

⁵Minutes of August 1956 meeting, Committee on Careers, Oregon League for Nursing.

most information about nursing from high school or college counselors. Some stated that the counselors themselves had not provided the information but had assisted in accumulating and evaluating data and correlating these with the students' interests and abilities. Others believed the counselors had been most helpful in planning a course of study preparatory for nursing.

Table Number X denotes the distribution of responses relative to the major source of information about nursing.

TABLE X
MAJOR SOURCE OF INFORMATION ABOUT A NURSING CAREER

Major Source of Information	Distribution of Responses	
	Number	Per Cent
friends	81	25.6
Career Days	56	17.8
reading	53	16.8
parents or relatives	41	13.0
high school counselors	23	7.3
Future Nurses Clubs	18	5.7
college counselors	14	4.4
employment	11	3.5
teachers	9	2.8
family doctor	8	2.5
radio or newspapers	2	.6
Total:	316	100.0

The selection of a specific vocation from related careers may be based on one predominant factor. If this factor can be identified it should be emphasized in the recruitment program. In an effort to determine the predominant factor which leads students to select a nursing career the young women were requested to specify the major reason for their vocational choice. The three reasons indicated most frequently were the satisfactions derived from working with people, the belief that the respondent was best fitted for a nursing career, and the desire to enter a service profession.

One hundred nineteen, 38 per cent, of the young women replied that they enjoyed working with people. The human element in nursing appealed to them. Their concept of working with people emphasized care of the patient rather than companionship with fellow employees.

Twenty-five per cent believed they were best fitted for a nursing career. These students had investigated related career opportunities, evaluated their aptitudes and interests, and chosen nursing. Many had worked in hospitals or doctors' offices to validate their choice. As a group these young women portrayed greater knowledge about nursing and schools of nursing. They made fewer recommendations for future recruitment programs and often praised the efforts of nursing representatives.

Approximately 24 per cent of the young women had chosen

nursing because it was a service career. The ability and the opportunity to aid humanity was of prime concern. Six other students regarded nursing as a method of serving God and their church. They, too, believed nursing was a service but the goal of their service was God through humanity rather than man himself. This desire to aid humanity and serve God corresponds to the psychoanalytical picture of the young adult who shows an intellectual understanding of and an interest in society but who in actuality is preoccupied with her own personality. This young person may have a sincere desire to promote social welfare but she unconsciously hopes to solve her own problems or satisfy her own needs through serving others. (11) ?

Ten per cent of the students advanced other reasons for choosing a nursing career. Fourteen students believed nursing combined job security with opportunities for travel. Eleven indicated nursing offered distinct employment advantages for women. They stated women do not compete with men for executive positions, nursing offers employment and financial security after mid-life, marriage may be combined with part-time work, and the profession offers employment in many fields.

Five students chose a nursing career because it offered vocational preparation for less expenditure of time and money than college. One student was thwarted in her desire to become a doctor and one believed nursing provided a

wider variety of knowledge than related vocations. One young lady had no major reason for her career choice.

Table Number XI specifies what the students believed to be their prime reasons for choosing a nursing career.

TABLE XI

MAIN REASON FOR CHOOSING A NURSING CAREER AS INDICATED
BY FRESHMAN STUDENTS IN OREGON SCHOOLS OF NURSING

Main Reason for Choosing Nursing	Distribution of responses	
	Number	Per Cent
enjoy working with people	119	37.7
best fitted for career	80	25.3
service profession	75	23.8
travel opportunities better	14	4.4
better job opportunities	11	3.5
less time and money than college	5	1.6
nurse friends or relatives	1	.3
Other:		
service to God and church	6	1.9
preparation for marriage	2	.6
no money for medical school	1	.3
no chief reason	1	.3
greater variety of knowledge	1	.3
Total:	316	100.0

Five possible definitions of nursing were presented and the students were asked to choose the one which best described what nursing meant to them. The responses were correlated with the reasons given for choosing a nursing career.

Sixty-nine per cent of the students described nursing as the prevention of illness and care of the sick. Twenty per

cent believed nursing was an opportunity to work with people. Seven per cent regarded nursing as an asset to marriage and 4 per cent believed it to be a career which would ensure their livelihood. One student described nursing as an opportunity to belong to a professional group.

There was a limited correlation between the students' reasons for choosing nursing and their definition of what nursing meant to them. Sixty-two per cent of the students chose nursing either because they enjoyed working with people or because they wished to enter a service profession. Eighty-nine per cent of the young women defined nursing as the prevention of illness and care of the sick or an opportunity to work with people. Their choice and description of nursing reflected a basic interest in humanity. They believed personal and job satisfaction would be derived from assisting others.

Eleven students chose nursing because they believed it offered better employment opportunities than other vocations. Twelve young women defined nursing as a career which would ensure their livelihood. Those who made their career choice on a material basis tended to define this choice in material terms.

Twenty-four students described nursing as an asset to marriage. Two students had chosen nursing because it would prepare them for marriage. It might be presumed that these young women were interested primarily in marriage and

secondarily in nursing. Nursing does encompass a body of knowledge applicable to marriage and homemaking but these students might have found other methods of preparation which were more pertinent.

Table Number XII indicates the students' descriptions of what nursing meant to them.

TABLE XII
DESCRIPTIONS OF WHAT NURSING MEANT TO THE FRESHMAN
STUDENTS ENROLLED IN OREGON SCHOOLS OF NURSING

Best Description of What Nursing Meant to the Students	Distribution of Responses	
	Number	Per Cent
prevention of illness & care of sick	217	68.7
opportunity to work with people	62	19.6
asset to marriage	24	7.6
a career to insure livelihood	12	3.8
belonging to a professional group	1	.3
Total:	316	100.0

Factors Influencing the Selection of a Nursing School

Young women who wish to enter an Oregon school of nursing may choose a collegiate or a diploma program, a Protestant, Catholic or secular school, a school located in a large metropolitan area or one situated in a smaller city. None of the Oregon schools discriminates against members of any race or creed. All of the schools meet the standards established by the Oregon State Board of Nurse Registration

and Examination and are legally approved. Five schools have been accorded full accreditation by the National League for Nursing. One school has been granted temporary accreditation. Each of the schools attempts to recruit, select, and admit qualified applicants. What factors influence a student to choose a specific school of nursing? On what basis does she make her final selection?

Six of the participating schools are operated under ecclesiastical auspices. Three are sponsored by Catholic groups and three by Protestant. Two Catholic schools and two Protestant schools offer diploma programs in nursing. One Catholic and one Protestant school have collegiate programs. The one secular school of nursing is a collegiate program.

Ninety-one per cent of all the students were enrolled in a school of nursing operated by a religious group. Nine per cent of the students were enrolled at the secular school. This was the only Oregon school which admitted a class twice each year. The students who participated in this study represented one-half of the total annual freshman enrollment at the secular school.

One hundred fifty-nine students chose a Protestant school of nursing. Eleven of those who chose a Protestant school elected a collegiate program. None of these young women was Catholic.

One hundred thirty young women selected a Catholic school of nursing. Thirty-nine were enrolled in a collegiate program. Over three times more students chose a Catholic collegiate program than selected a Protestant one. Eleven of the thirty-nine students who chose a Catholic collegiate school were Protestant.

Table Number XIII indicates the distribution of freshman students enrolled in collegiate and diploma programs at Catholic, Protestant, and secular Oregon schools of nursing.

TABLE XLIII

DISTRIBUTION OF STUDENTS ENROLLED IN DIPLOMA AND COLLEGIATE PROGRAMS
AT PROTESTANT, CATHOLIC, AND SECULAR OREGON SCHOOLS OF NURSING

Type of Program	Distribution							
	Protestant		Catholic		Secular		Combined	
	Number	Per Cent	Number	Per Cent	Number	Per Cent	Number	Per Cent
diploma	148	93.1	91	70.0	0	.0	239	75.6
collegiate	11	6.9	39	30.0	27*	100.0	77	24.4
Ratio to Total Respondents:	159	50.3	130	41.1	27	8.6	316	100.0

*Represents the half of the freshman class who participated in this study.

The students were asked if they were members of the religious faith which operated the school of nursing where they were enrolled. Fifty-five per cent of the students who attended a Catholic school of nursing were Catholic. Twenty-five per cent of those who chose a Protestant school of nursing had selected one sponsored by members of their faith. At only two schools did a preponderance of students indicate they were members of the religious faith which operated the school. Catholic students did tend to choose a Catholic school of nursing though some had selected other schools. Protestant students of many faiths had enrolled in each school of nursing. It might be concluded that the majority of the students did not base their choice solely upon the religious auspices of the nursing school.

Eighty-eight per cent of the students reported that they had investigated more than one school of nursing before making a final selection. The number of schools investigated ranged from two to over ten but each student sought information from an average of four schools before making a decision.

The methods chosen to acquire information about schools of nursing were varied. Some students based their selection on the data provided by catalogs or conferences with the directors of nursing education. Others had worked at the hospital where the school was located, attended a pre-nursing session, visited the school, or discussed the program with

student nurses or recent graduates.

Table Number XIV discloses the methods most frequently utilized to obtain information about schools of nursing.

Eighty-three per cent of the students had read catalogs or brochures prepared by schools of nursing. Sixty-eight per cent had visited several schools but only 59 per cent had consulted the directors of nursing education. Fifty-three per cent had talked with student nurses and 34 per cent had consulted recent graduates of various schools. Nine per cent had worked at a hospital which operated a school of nursing. Most of these students ultimately selected this school even though they had sought information about others. Two per cent had attended a nursing preview session. Only one school offers nursing preview sessions; these were attended by seven students who have since enrolled.

Eight students indicated they had used other means to gain information about nursing schools. Four had written to the National League for Nursing to obtain the accreditation status of the Oregon schools. Three had consulted teachers or counselors and one had interviewed physicians who were staff members at hospital schools of nursing.

TABLE XIV
METHODS UTILIZED TO ACQUIRE INFORMATION
ABOUT SCHOOLS OF NURSING

Methods Utilized Possible Number and Per Cent	Distribution of Responses	
	Number	Per Cent
	316	100.0
catalog from school	261	82.5
visited school	211	66.7
conference with director of school	185	58.5
consulted student nurse	166	52.5
consulted recent graduate of school	106	33.5
employment at hospital	27	8.5
attended nursing preview session	7	2.2
National League for Nursing	4	1.3
teacher or counselor	3	.9
physicians	1	.3

The respondents were asked why they had chosen a collegiate or a diploma nursing program. The majority of collegiate students based their decision on the belief that the quality of instruction and experience was superior and that a college degree would ensure more rapid advancement in nursing. The majority of those enrolled in a diploma program chose this method of preparation because it demanded less time and money than college.

Thirty-one per cent of those who selected a collegiate program believed the quality of instruction and experience was superior. Some indicated the collegiate program they had chosen offered clinical experience in public health nursing which was not available to diploma students. Others believed the instructors at collegiate schools would be better qualified.

Twelve per cent of the students believed that they could gain a broader educational background and derive benefit from non-nursing courses. Several students indicated the non-nursing courses would enhance their effectiveness as nurses and members of the community. Two students wished to experience the social and academic opportunities of college before entering nursing.

Thirty per cent of the collegiate students believed a college degree would assure more rapid promotion in nursing. Theoretically these young women were misinformed but in actual practice they were correct. Both diploma and

collegiate programs propose to prepare students for first level positions in nursing. These first level positions include general duty, private duty, and office nursing. A few collegiate programs prepare students for first level positions in public health nursing. No basic nursing program assumes that its graduates are prepared for administrative, supervisory, or teaching posts. It is believed that promotions should be based on individual merit, work experience, and additional academic preparation. Graduates from collegiate programs are warned against accepting other than first level positions without prior experience and preparation. In actual practice many collegiate graduates will be offered administrative or teaching positions despite their lack of preparation. The graduates from collegiate programs may be promoted more rapidly than those from diploma programs.

Seventeen per cent of the students stated that a college degree was of personal importance. These young women may have desired a broader educational background or the degree may provide social and academic prestige.

Two students stated they wished to be foreign missionaries and a college degree was a prerequisite. Three students, who also wished to be foreign missionaries, had entered diploma schools of nursing because their collegiate program had not fulfilled the pre-nursing requirements. These young women intended to return to college upon

graduation from nursing.

Three students had chosen a nursing career after entering college so selected a collegiate program. One student selected a collegiate program because it enabled her to be financially independent while attending school.

Table Number XV indicates the reasons why students selected a collegiate program in nursing.

TABLE XV
DISTRIBUTION OF RESPONSES RELATIVE TO REASON FOR CHOOSING
A COLLEGIATE PROGRAM IN NURSING

Major Reason for Choosing a Collegiate Program	Distribution of Responses	
	Number	Per Cent
instruction and experience superior	24	31.1
more rapid promotions	23	29.9
degree has personal importance	13	16.9
broader educational background	9	11.7
decided on nursing in college	3	3.9
wished to experience college life	2	2.6
degree needed for missionary field	2	2.6
could combine work with college	1	1.3
Total:	77	100.0

Forty-seven per cent of those who chose a diploma school of nursing based their decision on monetary factors. The total cost of a diploma program in nursing ranges from 300 to 600 dollars depending on the school selected. The cost of a collegiate program ranges from 1200 to 3700

dollars. (22) The students who attributed their choice of a diploma program to monetary factors were either unwilling or unable to expend the additional funds. Many stated that had the less expensive diploma program not been available they could not have entered nursing. Others had received scholarships which enabled them to attend diploma schools. Still others stated they were members of large families and the money available for post-high school education had to be divided among several children. A few believed the advantages of a collegiate program were insufficient to offset the higher cost.

Twenty-three per cent of those who selected a diploma school based their decision on a time element. The diploma program requires three years of preparation while the collegiate course demands four years. These young women did not wish to be deprived of earning power during the additional year. Some replied that if at some future date they wished to earn a college degree they would be assured of employment while attending school or would know in which field of nursing they wished to specialize.

Fifteen per cent of those who chose a diploma school indicated that collegiate programs prepare nurse specialists. These students were misinformed or unaware of the stated purpose of collegiate programs. No basic collegiate program prepares specialists for any field

of nursing. It is true that recent graduates from collegiate programs may accept administrative or teaching positions but this does not mean they were prepared for these posts. It would appear that the diploma and collegiate programs should be explained more explicitly to eradicate these misconceptions. Friends and relatives might prove to be the prime sources of this erroneous information since so many students indicated these persons as their major source of information about nursing. Lay people or nurses who were not cognizant of the purpose of basic collegiate and diploma programs in nursing could have unwittingly provided misinformation.

Twenty-two, 9 per cent, of the students enrolled in diploma schools of nursing believed that a collegiate program was actually superior. Some of these young women stated they would receive more intensive preparation for bedside nursing at a diploma school of nursing. Others indicated collegiate programs compressed too many learning experiences into too short a period of time.

Nine students specified other reasons for choosing a diploma program. One believed the academic requirements were less stringent. Two simply stated they had attended college but chose a diploma school. Two wanted to confirm their vocational choice and believed the collegiate program would unnecessarily postpone this

validation. Two students did not attempt to evaluate the relative merits of diploma and collegiate programs but stated they were not interested in attending college. Two indicated the collegiate program had never been explained to them so they had not considered it.

Table Number XVI denotes the reasons why students selected a diploma program in nursing.

TABLE XVI
DISTRIBUTION OF RESPONSES RELATIVE TO REASONS FOR CHOOSING
A DIPLOMA PROGRAM IN NURSING

Major Reason for Choosing a Diploma Program	Distribution of Responses	
	Number	Per Cent
less money	111	46.5
less time	55	23.0
collegiate program for specializing	36	15.1
college no advantage	22	9.2
diploma program superior	6	2.6
no explanation of collegiate program	2	.8
have had college	2	.8
did not want degree	2	.8
wanted to be sure liked nursing	2	.8
academic requirements less	1	.4
Total:	239	100.0

The students were asked to indicate their primary reason for choosing a specific school of nursing. The responses of students who had investigated more than one school of nursing were tabulated separately from those

who had not because it was presumed the former group might give different reasons for their final decision.

Table Number XVII denotes the students' reasons for choosing a specific school of nursing. Column I indicates the responses from students who had sought information about more than one school. Column II shows the responses from students who investigated only one school. Column III denotes the number and per cent of all the students who indicated each response.

Two hundred seventy-nine students had investigated more than one nursing school. Seventy per cent of these chose the school which they believed was best suited to their needs and interests. This might be considered a broad and vague response. The students indicated they had evaluated both the diploma and collegiate programs and sought data from several schools before selecting the one which they believed would best fulfill their individual needs and interests. Some specified that their investigation had included such facets as cost, location of the school, student personnel policies, and accreditation status. Others indicated their information was more superficial but they believed it sufficient for a wise selection.

Ten per cent investigated several schools but chose one primarily because it was recommended by friends or relatives. The recommendations had been made by staff

physicians, nurse friends or relatives currently employed by the hospital, former classmates or relatives who were students at the school, and lay people who had been patients in the hospital. The accuracy of information presented by people who had little or no contact with the school might be questioned. However, it is imperative to recognize that these people did exert a major influence upon the students' decision.

Six per cent evaluated data from several schools but chose one primarily because it was operated by members of their religious faith. Five more students selected a school because it emphasized spiritual values even though they were not members of the faith which operated that school. All these students believed religious values were an integral part of nursing. The majority stated that religious instruction, chapel, and Christian fellowship would enrich their personal lives and increase their effectiveness as nurses. Many believed a sectarian school of nursing would emphasize both spiritual and physical patient care.

Proximity of the school proved to be the deciding factor for five per cent of the students who had investigated more than one school of nursing. The location of the school was of prime importance to a relatively small number of students but it was significant that one-half of all the students who indicated this reason

for their choice were enrolled at School B.

Twenty students who had sought information about more than one school of nursing based their final selection on other factors. Nine stated the accreditation status of the school was of prime importance. Six had been employed at the hospital where the school was located. One had been impressed by the nursing care which she had observed while hospitalized. Three believed the desire to be with their friends had been the deciding factor. Two students stated their decision was based on a multitude of factors no one of which was dominate.

Thirty-seven students had based their decision on the information provided by one school of nursing. Ten young women selected the school which had been recommended by friends and relatives. Seven believed they had chosen the school best suited to their needs and interests though they had no basis for comparison.

Eight young women had chosen schools operated by members of their religious faith. Two selected an ecclesiastical school because of the religious emphasis though they were not members of that faith.

Five students indicated they had chosen their school because it was located close to home. One nonresident student had chosen an Oregon school because her best friend had enrolled here.

Two students indicated their choice had been based

on the school's accreditation. One of these revealed that she had a false conception of accreditation. When she stated she had chosen the Oregon school of nursing which had the highest accreditation but was actually enrolled in a temporarily accredited school.

One student chose the school of nursing sponsored by the hospital where she had been employed. One based her choice on the opinions she had formed as a patient in the hospital.

A majority of all the students stated they had chosen the school of nursing which they believed best suited to their individual needs and interests. The recommendations of friends and relatives, indicated by 12 per cent of all the students, was the second major reason for choosing a specific school. Approximately 25 per cent of the students indicated their decision had been based on other factors.

Preparation for a nursing career demands at least three years of time, money, and effort. In selecting a specific school the student chooses the quality and quantity of her preparation for nursing and her mode of living during the preparatory period. It might be presumed that the prospective student would select one school only after careful evaluation and comparison of information provided by several qualified resource persons representing the nursing profession and schools of nursing.

The findings did confirm the hypothesis that students who had investigated more than one nursing school would indicate different reasons for their ultimate selection than those who had sought little information. The majority of those who had evaluated several schools did choose the school which they believed best suited to their needs. No single response was indicated by a majority of the students who had limited their investigation to one nursing school. The largest number in this group had depended upon the recommendations of friends and relatives.

Some of the responses indicated by both groups revealed reasons which might be considered superficial or questionable. The proximity of the school to the student's home does not guarantee the quality of the nursing education program. Recommendations of friends and relatives are of little value unless these persons are qualified to provide accurate information. Accreditation is a meaningless criterion unless the student has a true concept of the term. Hospitalization seldom affords the patient the opportunity or the ability to judge the school of nursing. Those who choose a school primarily to be with their friends actually deferred their decision to these friends. One might question how a student can be positive one school is best when she has no basis for comparison.

It might be concluded that at least one-third of the students did not indicate their choice of a specific nursing

school was based on careful consideration or evaluation of how this decision would affect them. This contention is supported by the number and type of recommendations professed for future recruitment programs. Those young women who indicated more superficial reasons for choosing a school of nursing made the most recommendations. Their suggestions revealed their lack of knowledge about nursing and nursing schools.

Table Number XVII indicates the reasons advanced for choosing a specific school of nursing. The first column shows the responses from those students who had sought information from more than one school of nursing, the second column presents the responses from students who had investigated only one school, and the third column denotes the total number of students who indicated each reason.

TABLE XVII
 MAJOR REASON FOR CHOOSING A SPECIFIC SCHOOL OF NURSING

	Distribution of Responses					
	Column I		Column II		Column III	
	Number	Per Cent	Number	Per Cent	Number	Per Cent
best suited to individual need	136	70.1	7	18.9	203	64.9
recommended by friends or relatives	27	9.8	10	27.0	37	11.7
church sponsored	17	6.1	8	21.7	25	7.9
proximity	14	5.0	5	13.5	19	6.0
accreditation status	9	3.2	2	5.4	11	3.5
religious emphasis	5	1.8	2	5.4	7	2.2
prior employment at hospital	6	3.2	1	2.7	7	2.2
to be with friends	2	.7	1	2.7	3	1.0
hospitalization	1	.4	1	2.7	2	.6
no major reason	2	.7	0	.0	2	.6
Total:	279	100.0	37	100.0	316	100.0

Recommendations for Recruitment Programs

The students were asked to presume that they had been chosen to assist in planning and implementing a recruitment program. They were requested to formulate recommendations, based on their felt needs and interests, which might enrich or augment the current program. It was suggested that the recommendations might reveal areas where their own knowledge of nursing or nursing schools was deficient.

Fifty-seven, 18 per cent, of the students made no recommendations. They stated they had received adequate information about nursing careers and schools of nursing. Several praised the efforts of nursing recruiters and high school counselors. These young women stated they had attended Career Day conferences, studied catalogs and brochures prepared by nursing schools, talked with nurses in their communities and visited several schools. Some of them reported they had learned much of value during orientation week but this information was not essential prior to their enrollment.

Two hundred fifty-nine students did make suggestions for future recruitment programs. Some of these young women made recommendations which are already incorporated into the present program. Others requested information which could have been garnered from studying catalogs or visiting schools of nursing. Many of these students reported they

had investigated several nursing schools but still lacked information concerning total cost of the program, dormitory facilities, and student personnel policies. It might be presumed that they did not utilize available resources, did not recognize their lack of information until later, or did not recall that the information had been presented.

A few students made suggestions which were applicable to their particular school of nursing rather than to recruitment in general. An effort to preserve the anonymity of the participating schools precluded enumeration of these recommendations.

It was noted that the majority of students from each school made at least one recommendation. There was a slight variance in the type of suggestions offered by students in diploma schools from those made by collegiate students. A proportionately higher number of diploma students suggested that high school preparatory courses be emphasized, that student nurses participate in the recruitment program, and that student personnel policies be stressed. Collegiate students tended to emphasize the importance of correct study habits and the rigid scholastic requirements in nursing.

Most of the students submitted suggestions which were pertinent and thought provoking. They stressed the need for specific information about schools of nursing and believed the recruiter should present all information concisely and explicitly. The nursing representative should be cognizant

of the programs offered by each Oregon school of nursing or should be accompanied by a nurse from each school. Nursing should be portrayed as a challenging profession which offers numerous rewards but the glamour of nursing should be de-emphasized. Sixty-four students believed that prospective applicants should be warned that nursing is hard physical and mental labor. The new student must have a deep sustaining interest in nursing to withstand discouragement bred by long hours of work and study. Three students were convinced that many high school graduates lack emotional and mental maturity so are unable to accept the demands of nursing. They recommended that all students work or attend college for at least one year before entering nursing.

Twenty-three young women suggested that student nurses accompany the recruiters and talk with prospective students. It was believed student nurses would be able to establish more rapport with high school students. Prospective applicants might be reluctant to talk with graduate nurses but would not hesitate to question students. The life of a student nurse when described by one who was actually experiencing that life would have greater meaning to the high school students. It was recognized that graduate nurses might present more technical or more inclusive information but these advantages were offset by the belief that student nurses would have more empathy with prospective students and could present a less biased picture of nursing.

This emphasis on the contributions of student nurses toward recruitment was substantiated by forty-four young women who suggested that opportunities be provided for uninterrupted, unchaperoned discussions which might occur when the prospective applicant visited the school of nursing. The emphasis on uninterrupted, unchaperoned conversation was significant. It might be presumed the young women wanted to verify the information provided by graduate nurses or the director of the school. They believed that the conversation should be informal and should concentrate on such topics as the specific duties of a student nurse, social and dormitory life, and scholastic requirements in nursing.

Sixty-seven students suggested that more stress be placed on high school courses which would prepare them for nursing. They placed special emphasis on the need for science courses. Nineteen wished they had had a broader science background and eighteen more students specifically regretted the omission of chemistry. Conversely, four students regretted the omission of physics. Eight students deplored their lack of algebra and seven believed Latin would have been beneficial. Two young women reported they would have attended summer school had they realized the importance of chemistry, algebra, and Latin. Four students stated they had wanted to enroll in chemistry or Latin classes but these courses were not offered at their high schools. Two young women suggested that high school course-

lors should have a greater knowledge of those courses which would be beneficial to future student nurses. All the students emphasized the importance of planning the high school course of study carefully to ensure adequate preparation for possible vocational choices.

Forty-six students believed the importance of correct study habits should be stressed. Many of those who deplored their lack of study habits indicated that high school had been "easy" and required minimum effort to achieve high grades. The courses taught during the pre-clinical period in nursing had required maximum concentration and many hours of study; the subject matter content was new and difficult to master. These students considered poor study habits a major handicap.

Forty-five students stated they were unaware of the rigid scholastic requirements in nursing. Many of these believed their study habits were inadequate and their high school preparation insufficient. Some had thought nursing accentuated physical labor and minimized scholastic effort. All these students were appalled by the variety of subject matter which must be mastered and the effort required to maintain an acceptable grade-point average. They wanted prospective applicants to realize that nursing demands both the desire and the ability to achieve scholastic success.

Fifty-three young women desired more information about policies governing their social activities and dormitory life. These policies included late leave and over-night

privileges, permission for marriage, social functions sponsored by the school and student body, policies governing the amount and type of personal effects which might be brought from home, and student government. Nursing representatives do not have the time nor the opportunity to present such detailed information to large groups of high school students. Each school of nursing has established its own student personnel policies which are available in printed form from the director of nursing education. Student personnel policies, governing a wide spectrum of factors which affect students, should be a deciding factor in the choice of a nursing school. The majority of these young women stated they had investigated more than one school of nursing but it might be presumed that either their information did not include personnel policies or these policies assumed increased importance after enrollment.

Seventeen students suggested that the collegiate and diploma nursing programs be more clearly differentiated. All these young women were enrolled at diploma schools. They reported that some recruiters were definitely biased so that it was difficult to establish the advantages and disadvantages of each program.

Five students hoped that more Future Nurses Clubs would be established. They believed the clubs were an effective recruitment device. Members could confirm or negate their interest in nursing through participation in club activities

and the group could cultivate or sustain enthusiasm for nursing.

Twenty-one students suggested prospective applicants either work at a hospital or attend a pre-nursing session conducted by the school. They believed participation in or observation of a nurse's work would allay fear, dispel misconceptions, and promote a wiser career choice. The majority of these students were basing their suggestion on personal experience. A pre-nursing session could have values other than observation of nursing care since there is limited time for questions or assimilation of information when large groups of applicants tour the hospital and nursing school. Prospective students who attended such sessions could meet the nursing faculty, observe a class, and visit leisurely with the student nurses. Conversely the faculty would benefit from greater knowledge and observation of the candidates. School G which does conduct nursing preview sessions each summer considers them an asset to the recruitment program.

All these recommendations might not be applicable or feasible for a specific school of nursing. Some of the students may have suggested information which was available had they sought it. The nursing recruiter must present the material which she believes will have the most value for the greatest number of students. The composition of the group, the amount of time allotted, and the ability of the

nursing counselor will determine the amount and type of information which can be presented.

Recruitment programs are designed to meet the students' needs and interests. These recommendations revealed areas of doubt, misconceptions, and apprehensions. The students believed their suggestions would strengthen the current program. Nursing educators and nursing recruiters might evaluate each recommendation for possible amplification or inclusion in future recruitment programs.

Table Number XVIII specifies the recommendations, made by 259 freshman students, for future recruitment programs.

TABLE XVIII
RECOMMENDATIONS FOR FUTURE RECRUITMENT PROGRAMS

Recommendations	Distribution of Responses	
	Number	Per Cent
Possible Number and Per Cent	259	100.0
high school preparatory courses	67	25.8
nursing is hard physical and mental labor	64	24.7
student personnel policies	53	20.4
study habits	46	17.7
emphasize scholastic requirements in nursing	45	17.3
discussion with student nurses	44	16.9
student nurse recruiters	23	8.8
employment or pre-nursing sessions	21	8.1
differentiate diploma-degree programs	17	6.5
nursing recruiter should visit high schools	9	3.4
establish Future Nurses Clubs	5	1.9

CHAPTER V

SUMMARY

Summary

The problem presented in this study was twofold: 1) Why do young people choose a career in nursing? 2) What factors influence their choice of a specific school of nursing?

The writer proposed to provide nursing educators and nursing recruiters with relevant data concerning the factors which influenced the 1956 freshman student nurses in Oregon to elect a career in nursing and to choose a specific school of nursing. Four specific objectives were established as guides toward the fulfillment of the broad purpose. These were: 1) to ascertain selected data pertaining to the students' home communities; 2) to identify factors which influenced the selection of a nursing career; 3) to identify factors which influenced the choice of a specific nursing school; and 4) to elicit recommendations for possible inclusion in future recruitment programs.

A combination check-list and free response type questionnaire was devised to ascertain the desired information. A copy of the questionnaire, with a cover letter explaining its purpose and seeking permission for its administration, was sent to the director of nursing education at each of the seven Oregon schools of nursing. This was accompanied by a

letter of approval from Miss Lucile Gregerson, thesis adviser. Each of the directors of nursing education courteously agreed to cooperate with the study. Three hundred sixteen young women, 95 per cent of the freshman students enrolled in Oregon schools of nursing, were polled.

Prior to administering the questionnaire six hypotheses were formulated. It was presumed that:

1. The majority of the students would be residents of Oregon who lived in towns of less than 25,000 population. They would have been graduated from public high schools whose total enrollment ranged between 500 and 1000 students.
2. The majority of these young women would indicate a long-standing interest in nursing which had been stimulated by relatives or family friends who were nurses.
3. Relatives and friends would prove to be the greatest sources of information about nursing.
4. Students who belonged to a Future Nurses Club would have gained most of their information about nursing through the club's activities.
5. The students' chief reasons for choosing nursing as a career would have a positive correlation with their descriptions of what nursing meant to them.
6. Those students who had investigated more than one program in nursing would indicate different reasons for their selection of a specific school than those who had sought little information.

A master tabulation sheet was compiled after the responses from each school had been tabulated separately. With one exception the data provided by all the students were discussed as a unit to preserve the anonymity of the participating schools. The single exception concerned the residency of the students enrolled at each of the schools.

Data pertaining to the characteristics of the nursing schools and to the 1955 recruitment programs were provided by a faculty member at each of the seven schools. The information obtained from the survey was supplemented by a review of the literature and those related studies which were available. Conclusions and recommendations were based on an analysis and interpretation of the responses to the questionnaire and on data from the correlated literature.

Conclusions

The major conclusions drawn from the findings of this study were:

1. Three per cent of the young women who were graduated from Oregon high schools in 1956 entered Oregon schools of nursing.
2. Seventy-five per cent of those who entered Oregon schools of nursing were residents of Oregon. Sixty-four per cent of the nonresident students lived in Washington; the majority stated they resided in or near Vancouver.

3. Twenty-four per cent of all the students chose a collegiate school of nursing; the national average is 14 per cent. There was no significant difference between the per cent of resident and nonresident students who selected a collegiate program.

4. Fifty-nine per cent of the resident students lived in towns of less than 25,000 population; 24 per cent lived in Portland. Approximately 16 per cent of the resident students indicated they lived in Salem or Eugene; one-sixth of all the resident students lived in cities which comprised one-nineteenth of the state's population.

5. A majority of the respondents were graduated from public secondary schools; a plurality attended schools whose total enrollment exceeded 1000.

6. Fifty-seven per cent of the young women had been interested in nursing more than four years; 7 per cent had been interested less than one year.

7. Approximately 40 per cent of the students indicated their interest in nursing was first aroused by friends and relatives who were nurses.

8. A majority of the young women had discussed their interest in nursing with their parents or relatives, their high school counselors, and nurses in their community. Only 29 per cent had sought the counsel of a nurse recruiter on Career Day.

9. The four sources which had provided the most infor-

mation about nursing were friends, indicated by 26 per cent of the students; Career Day, 18 per cent; reading material, 17 per cent; and parents or relatives, 13 per cent. Less than one-half of the students who belonged to Future Nurses Clubs indicated this affiliation as their major source of information about nursing.

10. The three reasons for choosing a nursing career which were mentioned most frequently were the enjoyment of working with people, indicated by 38 per cent of the students; the belief that the respondent was best fitted for this career, 25 per cent; and the desire to enter a service profession, 24 per cent.

11. There was limited correlation between the students' reasons for choosing nursing and their description of what nursing meant to them. Sixty-nine per cent of the young women described nursing as the prevention of illness and the care of the sick.

12. The four methods utilized most frequently to acquire information about schools of nursing were catalogs, 83 per cent; school visitations, 67 per cent; conferences with the director of nursing education, 59 per cent; and discussions with student nurses, 53 per cent.

13. Thirty-one per cent of those who chose a collegiate nursing program did so because they believed the quality of instruction and experience was superior; 30 per cent believed a college degree would ensure more rapid promotions in nursing.

14. Forty-seven per cent of those who selected a diploma school did so because it cost less money than a collegiate program; 23 per cent did not wish to spend an additional year for vocational preparation; 15 per cent believed collegiate programs prepared nurse specialists.

15. Eighty-eight per cent of the respondents had sought information about more than one school of nursing before making a final selection. Seventy per cent of these indicated they chose the school which they believed best suited to their individual needs and interests; 10 per cent relied upon the recommendations of friends and relatives. Twenty-seven per cent of those who had investigated only one nursing school based their selection on recommendations of friends or relatives; 22 per cent chose a school sponsored by their church.

16. Eighty-two per cent of the respondents made one or more recommendations for future recruitment programs. It was suggested that more emphasis be placed on: 1) high school preparatory courses, indicated by 26 per cent of the students; 2) the physical and mental labor in nursing, 25 per cent; 3) the student nurse personnel policies established by each school, 20 per cent; 4) the importance of correct study habits, 18 per cent; 5) the scholastic requirements in nursing; 17 per cent; and 6) opportunities for informal discussions with student nurses, 17 per cent.

Recommendations

It is recommended that the findings and conclusions which have been presented in this study be used by each Oregon school of nursing as one method of evaluating its current recruitment program. The students' belief that their friends and relatives had exerted the most influence on their vocational choice might be of prime concern. Friends and relatives were indicated as the prime stimuli of interest in nursing; they were consulted most frequently about nursing; and they provided the most information about nursing for the largest number of students. Emphasis might also be placed on increasing the effectiveness and assuring the accuracy of information presented by nurses and doctors in the students' home communities.

The findings of this study, while suggestive, should not be considered the basis for generalizations. Further studies should be made to augment, negate, or validate these data. It is recommended that these include:

1. A study of the cultural, social, and economic backgrounds of students who enter Oregon schools of nursing.
2. A study of the number of Oregon students who enroll in out-of-state nursing schools and the reasons for their choice.
3. A study of the recruitment programs at Salem and Eugene to identify those factors which apparently have made them so successful.

4. A study to determine why relatively few students utilized the nursing recruiters as resource persons.

5. A study to determine possible methods of utilizing nurses who live in the students' home communities as qualified resource persons to augment the current recruitment programs.

6. A study of factors which influenced students in other states or regions to choose a career in nursing or to select a specific school of nursing.

Related studies in the field of practical nursing might reveal data of interest and importance to both practical and professional nurses.

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APPENDIX A

NURSING AND YOU

TO THE STUDENT: This is not a test. There are no right answers and no wrong answers. Unless otherwise indicated please mark an X opposite the one answer which most clearly indicates your belief or opinion. Feel free to add any additional comments if you wish. Please do not sign your name. Your cooperation will be of value to all the schools of nursing in Oregon and to future student nurses. Thank you. M. O'Connell.

1. Are you a resident of Oregon? Yes: ___ No: ___
If a resident of another state or country, please specify:

2. Is the population of your home town or city:
 - a. less than 5000 a. ___
 - b. 5000 to 25,000 b. ___
 - c. 25,000 to 75,000 c. ___
 - d. over 100,000 d. ___

3. Was the total enrollment of your high school:
 - a. less than 200 a. ___
 - b. 200 to 500 b. ___
 - c. 500 to 1000 c. ___
 - d. over 1000 d. ___

4. Were you graduated from a:
 - a. public high school a. ___
 - b. parochial high school b. ___
 - c. private high school c. ___

5. How long have you been interested in entering nursing?
 - a. less than one year a. ___
 - b. 1 to 2 years b. ___
 - c. 2 to 4 years c. ___
 - d. over 4 years d. ___

APPENDIX A (CONTINUED)

6. Through whom (what) did you first seriously become interested in nursing?
- | | |
|---|----------|
| a. friends or relatives who were nurses | a. _____ |
| b. aptitude tests and discussions with your counselor | b. _____ |
| c. interview with nurses at Career Day | c. _____ |
| d. working in a hospital or doctor's office | d. _____ |
| e. other (please specify) _____ | |
7. Did you discuss your interest in nursing with:
(Check more than one answer if appropriate)
- | | |
|---|----------|
| a. your high school counselor | a. _____ |
| b. your college counselor | b. _____ |
| c. parents or relatives | c. _____ |
| d. a registered nurse at Career Day | d. _____ |
| e. a registered nurse in your community | e. _____ |
| f. your family doctor | f. _____ |
| g. other (please specify) _____ | |
8. From whom (where) did you gain the most information about a career in nursing? (one answer)
- | | |
|---------------------------------|----------|
| a. friends | a. _____ |
| b. parents or relatives | b. _____ |
| c. teachers | c. _____ |
| d. high school counselor | d. _____ |
| e. college counselor | e. _____ |
| f. Career Day | f. _____ |
| g. Future Nurses Club | g. _____ |
| h. radio or newspaper | h. _____ |
| i. Family doctor | i. _____ |
| j. other (please specify) _____ | |
9. Was there a Future Nurses Club at your high school? Yes: _____ No: _____
- If so, were you a member? Yes: _____ No: _____
- If you were a member, what was your chief benefit from belonging?
- | | |
|---|----------|
| a. Knowledge about a career in nursing | a. _____ |
| b. knowledge about entrance requirements for schools of nursing | b. _____ |
| c. knowledge about schools of nursing | c. _____ |
| d. no benefits | d. _____ |
| e. other (please specify) _____ | |

APPENDIX A (CONTINUED)

10. What is your chief reason for choosing a nursing career? (one answer)
- a. You wished to enter a service profession a. _____
 - b. You believe the job opportunities are better than in other professions b. _____
 - c. Some of your friends and relatives are nurses c. _____
 - d. You feel that you are best fitted for a career in nursing d. _____
 - e. You enjoy working with people e. _____
 - f. You believe the marriage opportunities are greater f. _____
 - g. Nursing offers opportunities for adventure and travel g. _____
 - h. Nursing requires less time and money than going to college h. _____
 - i. Other (please specify) _____
11. Which of the following best describes what nursing means to you? (one answer)
- a. An opportunity to contribute to the prevention of illness and care of the sick a. _____
 - b. An opportunity to belong to a professional group b. _____
 - c. A career which will be an asset to marriage c. _____
 - d. A career which will insure your livelihood d. _____
 - e. An opportunity to work with people e. _____
12. Did you seek information about more than one school of nursing before making your choice?
 Yes: _____ No: _____
 If so, how many? _____
13. In choosing a school of nursing did you:
 (Check more than one answer if appropriate)
- a. write for the school catalog a. _____
 - b. have a conference with the director b. _____
 - c. visit the school c. _____
 - d. talk with recent graduates of the school d. _____
 - e. talk with students at the school e. _____
 - f. work at the hospital where the school is located f. _____
 - g. attend a pre-nursing session sponsored by the school g. _____
 - h. other (please specify) _____

APPENDIX A (CONTINUED)

14. Is your school of nursing operated under the auspices of a religious group? Yes: ___ No: ___
If so, are you a member of that faith? Yes: ___ No: ___
15. Are you enrolled in a:
a. diploma school of nursing a. ___
b. collegiate school of nursing b. ___
16. If you are enrolled in a collegiate program, why did you choose this rather than a diploma school? (one answer)
a. A college degree has personal importance to you a. ___
b. You decided upon nursing after entering college b. ___
c. You feel a college degree will prepare you for more rapid advancement in nursing c. ___
d. You believe the quality of instruction and experience is superior d. ___
e. other (please specify) _____
17. If you are enrolled in a diploma program, why did you choose this rather than a collegiate school? (one answer)
a. You believe a collegiate program has no advantages a. ___
b. A diploma program requires less time b. ___
c. A diploma program requires less money c. ___
d. The academic requirements are higher for entrance to a collegiate school d. ___
e. No one explained the collegiate program to you e. ___
f. Other (please specify) _____
18. What was your chief reason for choosing this school of nursing? (one answer)
a. It was located close to home a. ___
b. It is sponsored by the church to which you belong b. ___
c. It was recommended by friends and relatives c. ___
d. You investigated several schools and this seemed most suited to your needs d. ___
e. You wanted to be with your friends e. ___
f. Other (please specify) _____

APPENDIX A (CONTINUED)

19. Now that you are enrolled in a school of nursing, what information did you lack that would have helped you before entrance?

20. If you were chosen to help your school recruit the next class what recommendations would you make?

APPENDIX B

TABULATIONS OF FINDINGS

Participating Schools

Questions

	A	B	C	D	E	F	G
1. Oregon resident:							
a. yes	34	39	6	28	46	52	22
b. no	17	2	5	11	13	25	5
Nonresident representation:							
a. Alaska	1			1		1	
b. California	2			3		1	
c. Colorado			1				
d. Idaho	4	1			1	2	2
e. Illinois		1					
f. Minnesota							1
g. Montana							1
h. Nevada	1			1			
i. North Dakota	1						
j. Philippines							
k. Utah			1				
l. Washington	6		3	5	12	21	1

APPENDIX B (CONTINUED)

Questions	Participating Schools						
	A	B	C	D	E	F	G
2. Population of home community:							
a. less than 5000	21	11	5	12	24	19	5
b. 5000 to 25,000	29	6	2	10	13	24	12
c. 25,000 to 75,000	14	10	1	6	10	13	5
d. over 100,000	7	3	3	11	12	21	5
3. Total high school enrollment:							
a. less than 200	3	6		9	14	5	4
b. 200 to 500	26	8	3	13	14	19	5
c. 500 to 1000	18	10	4	12	15	14	9
d. over 1000	24	8	4	5	16	39	9
4. Type of high school:							
a. public	70	23	10	18	42	76	26
b. parochial		9		20	17	1	
c. private	1		1	1			1

APPENDIX B (CONTINUED)

Questions	Participating Schools						
	A	B	C	D	E	F	G
5. Length of interest in nursing:							
a. less than 1 year	3	2	1	5	6	3	1
b. 1-2 years	6	5	3	4	13	11	1
c. 2-4 years	18	6	2	12	12	12	10
d. over 4 years	44	19	5	18	28	51	15
6. How interest aroused:							
a. nurses friends or relatives	26	15	3	15	24	39	11
b. aptitude tests; counselor	4	2	2	2	4	3	2
c. interviews with nurse on Career Day	7	4		1	4	6	1
d. work	10	6	1	3	10	11	3
e. other	24	5	5	18	17	18	10
7. Interest discussed with:							
a. high school counselor	42	19	8	23	40	43	7
b. college counselor	9		4	2	3	9	27
c. parents or relatives	62	31	11	34	58	69	22
d. nurse in community	51	16	4	15	23	39	13
e. nurse at Career Day	22	12	2	8	19	27	3
f. family doctor	32	13	3	11	19	24	7
g. minister or priest	2		1	6	5	4	1
h. friends	1	3			2	2	

APPENDIX B (CONTINUED)

Participating Schools

Questions

	A	B	C	D	E	F	G
15	9	3	9	15	25	5	5
8	5		5	9	9	5	5
2	2		2	1		4	4
6	2		3	7	5		5
3	3		3	2	1		5
17	8	1	5	9	16		16
4	2	1		5	4		1
1	1						
2	2	1	2		1		1
13	3	5	6	9	14		3
			4	2	1		4

8. Chief source of information:

- a. friends
- b. parents or relatives
- c. teachers
- d. high school counselor
- e. college counselor
- f. Career Day
- g. Future Nurses Club
- h. radio or newspaper
- i. family doctor
- j. reading matter
- k. employment

9. Future Nurses Club at high school:

- a. yes
- b. no

If so, were you a member?

- a. yes
- b. no

12	9	2	6	15	10		
59	23	9	33	44	67		27
8	8	1	2	11	10		
3	1	1	4	4			

APPENDIX B (CONTINUED)

Participating Schools

Questions

	A	B	C	D	E	F	G
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9. (cont.)

Chief benefit from club membership:

- a. career knowledge
- b. entrance requirements
- c. school knowledge
- d. no benefits
- e. work in hospital

a. career knowledge	6	7		2	6		6
b. entrance requirements	1	1	1		3		1
c. school knowledge	1						2
d. no benefits							
e. work in hospital		1			1		

10. Chief reason for choosing nursing:

- e. service profession
- b. better job opportunities
- c. nurse friends or relatives
- d. best fitted for career
- e. enjoy working with people
- f. marriage opportunities greater
- g. less time and money than college
- h. service to God and church
- i. preparation for marriage
- j. no money for medical school
- k. no chief reason
- l. greater variety of knowledge
- m. travel opportunities

e. service profession	18	8	4	8	12	19	6
b. better job opportunities	5	2		1	3		
c. nurse friends or relatives						1	
d. best fitted for career	19	6	1	9	19	18	8
e. enjoy working with people	25	15	4	16	18	31	10
f. marriage opportunities greater							
g. less time and money than college	2				2	1	
h. service to God and church				1		3	2
i. preparation for marriage						1	
j. no money for medical school	1			1			
k. no chief reason							
l. greater variety of knowledge				1			
m. travel opportunities	1	1	2	2	5		3

APPENDIX B (CONTINUED)

Questions	Participating Schools						
	A	B	C	D	E	F	G
11. Best description of nursing:							
a. prevention of illness; care of sick	50	20	5	30	39	56	17
b. belonging to professional group	1						
c. insure livelihood	4	2		2	2	2	
d. opportunity to work with people	15	5	6	6	8	15	7
e. asset to marriage	1	5		1	10	4	3
12. Inquire about more than one school?							
a. yes	65	26	10	36	50	68	24
b. no	6	6	1	3	9	9	3
How many?							
a. two	9	8	1	9	10	19	6
b. three	20	6	5	16	21	19	8
c. four	7	4	2	6	11	13	4
d. five	10	6	1	3	3	7	4
e. six	5	1			2	3	4
f. seven	4			1		1	
g. eight	4		1		1	1	2
h. ten	2				2	2	
i. over ten	3	1		2		4	

APPENDIX B (CONTINUED)

Questions	Participating Schools						
	A	B	C	D	E	F	G
13. Methods used to acquire data on schools:							
a. catalog	63	28	10	33	46	72	19
b. conference with director	49	24	3	12	42	44	11
c. visit school	47	27	7	21	42	56	11
d. talk with graduates of school	26	11	3	11	15	35	5
e. talk with student at school	39	11	5	19	34	46	12
f. work at hospital	2	7		9	6	2	1
g. attend pre-nursing conference							7
h. teachers or counselors	2			1			
i. physicians	1						
j. National League for Nursing			1	2			1
14. School operated under religious auspices?							
a. yes	71	32	11	39	59	77	27
b. no							
Are you a member of this faith?							
a. yes	10	14	5	28	30	25	25
b. no	61	18	6	11	29	52	52

APPENDIX B (CONTINUED)

Questions	Participating Schools						
	A	B	C	D	E	F	G
15. Type of nursing program:	71	52	11	39	59	77	27
a. diploma							
b. degree							
16. Why collegiate program chosen:							
a. degree of personal importance			1	6			6
b. decided upon nursing in college			7	14			3
c. more rapid promotions			1	13			2
d. instruction and experience better			2	5			10
e. broader educational background							2
f. wished to experience college life							2
g. degree needed for vocationary field							2
h. could combine work with college				1			2

APPENDIX B (CONTINUED)

Questions	Participating Schools						
	A	B	C	D	E	F	G
17. Why diploma program chosen:							
a. college no advantages	5	6			4	7	
b. less time	15	5			18	16	
c. less money	37	14			23	37	
d. academic requirements less		1			1	1	
e. degree program not explained		4			12	14	
f. degree program for specializing	6						
g. have had college	1					1	
h. diploma program superior	2	2			1	1	
i. wanted to be sure nursing liked	2						
j. did not want degree	2						

APPENDIX B (CONTINUED)

Questions	Participating Schools						
	A	B	C	D	E	F	G
18. Give reason for school choice:							
a. proximity	1	9		1	3	3	2
b. sponsored by your church	3	3	1	8	1	9	
c. recommended by friends or relatives	6	4		3	10	10	4
d. best suited to individual need	57	15	10	25	35	45	16
e. to be with friends				1	2		
f. prior employment at hospital	1			1	2		3
g. hospitalization	1				1		
h. accreditation status	1	1			3	5	1
i. religious emphasis	1				1		
j. no major reason						5	

APPENDIX B (CONTINUED)

Participating Schools

Questions

	A	B	C	D	E	F	G
19. and 20. Recommendations for future recruitment programs:							
a. No suggestions	8	6	2	9	12	14	6
b. student nurse recruiters	4	8		1	7	3	
c. discussion with student nurses	12	4	2	3	10	13	
d. high school preparatory courses	18	11	1	2	21	14	
e. study habits	7	5	5	6	5	7	9
f. scholastic requirements in nursing	6	4	4	9	8	7	7
g. student personnel policies	15	12	1	5	7	11	2
h. differentiates diploma-degree programs	1	6			2	8	
i. establish Future Nurses Clubs	2	2			2	1	
j. employment or pre-nursing sessions	1	1		2	3	2	12
k. recruiter should visit high school	2		3	1	1	2	

APPENDIX C
INTERVIEW GUIDE

I Characteristics of the School

- A. Location of School
- B. Type and Cost of Program
 - 1. diploma
 - 2. collegiate
- C. Auspices of School
 - 1. Catholic
 - 2. Protestant
 - 3. secular
- D. Clinical Facilities
 - 1. size of the hospital
 - 2. number and type of affiliations
- E. Enrollment
 - 1. total enrollment
 - 2. restrictions on enrollment
 - a. age
 - b. sex
 - c. marital status
 - d. educational preparation
 - 3. number of classes admitted each year

II Recruitment Program

- A. Type of Program Conducted
 - 1. number of weeks allotted for recruitment
 - 2. number of high schools visited
 - 3. number and type of additional recruitment programs
 - 4. selection of applicants
- B. Nursing representative or recruiter
 - 1. director or assistant director of nursing education
 - 2. nurse faculty member
 - 3. nursing service representative
 - 4. student nurse
 - 5. non-nurse
- C. Recruitment methods
 - 1. informal discussion
 - 2. panel discussion
 - 3. films
 - 4. slides
 - 5. printed matter
- D. Content of presentation
 - 1. rewards of nursing
 - 2. personal and academic qualifications

APPENDIX C (CONTINUED)

- D. Content of presentation (continued)
 - 3. high school preparatory courses
 - 4. employment opportunities
- E. Information about the school of nursing

Typed by:

Marilyn Southard