



Graduate entry nurses' initial perspectives on nursing: Content analysis of open-ended survey questions



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ABSTRACT

Background: Graduate entry nursing courses offer individuals with prior degrees the opportunity to gain nursing qualifications and facilitate career change. While it is known that accelerated graduate entry courses are increasingly popular, the perceptions of nursing held by such individuals and the influence this has on those seeking to enter the profession are less clearly understood.

Objective: To explore graduate entry nursing students' perceptions of nursing on entering their pre-registration course.

Design: A descriptive design utilising cross-section survey with two open-ended questions: *What do you believe the role of the nurse is? What things have influenced that view?* were asked. Demographic data were analysed using descriptive frequencies, while the two open-ended questions were analysed using summative content analysis.

Setting: One university-based postgraduate graduate entry nursing course in Australia

Participants: Eight cohorts ($n = 286$) commencing students with prior degrees other than nursing.

Results: The course attracts students from diverse backgrounds. Exposure to nursing and nurses, either as a consumer of health care or other health care role, plays a primary role in influencing career change. However, similar to those found with school leavers, there remains much misinformation about nurses' roles for students in these courses. Most identify the role of caring in nursing. For some, media representations are the only information sources.

Discussion: Graduate entry courses offer opportunities to attract new nurses and contribute to addressing workforce shortages. However, there is still a lack of knowledge of nursing roles among students on entry. More work is required by the profession to ensure nursing is accurately and positively represented to the community.

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1. Introduction

Similar to other countries, Australia faces future nursing workforce shortages. Workforce modelling predicts a shortfall of 85,000 registered nurses by 2025 (Health Workforce Australia, 2014). Hence, strategies are required to attract suitable individuals into nursing careers. The factors that influence the choice of a career in nursing have been widely explored, particularly with the school leaver population. Price et al. (2013) examined nursing career choice for millennial generation students in Canada, finding that students demonstrated altruistic reasons underpinning their decision-making, seeking a career where they were able to help people. Nursing was viewed as 'honorable and noble'. A systematic review conducted by Wu et al. (2015) further reinforces the role played by altruism in influencing career choice in nursing. In Australia, Wilkes et al. (2015) surveyed undergraduate nursing students to

examine reasons for entering nursing, also finding altruistic reasons for entering nursing however, another dominant feature was having career security.

Public perceptions have been viewed as playing a role in influencing nursing career choice. Neilson and Lauder (2008) interviewed high achieving secondary school students in the United Kingdom to understand their potential to seek nursing careers. These students' perspectives were largely negative, seeing nursing as a practical and undemanding profession without the need for high cognition, thus entering nursing would squander their high scores. Furthermore, students were strongly influenced by media representations that doctors cure patients and save lives, while nurses merely care for them. Students did not perceive they could make a difference to the community by being a nurse.

Perceived status of nursing as inferior to other professions has been argued as impeding high quality healthcare delivery with highly achieving academic students seeking professions rather than nursing (Wu et al., 2015). In their study, Neilson and Lauder (2008) identified that the main source of information for high school students was through television. Furthermore, these students held stereotypical views on female

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and male nurses. The media has been argued as continuing to portray nursing in out-dated and demeaning stereotypes. Heilemann (2012) asserts that television often depicts doctors performing roles that nowadays are done by nurses, while storylines lack accuracy in portraying nurses.

Another factor that influences the choice of a nursing career is the direct involvement of family members. This has both positive and negative effects. The systematic review by Wu et al. (2015) found for some parents, low pay and status did not make nursing attractive, while in others it was viewed as 'a very worthwhile career' (p.558). In a large Italian study of nursing and non-nursing university students, Dante et al. (2014) found that nursing students were more likely to have at least one family member working in nursing, than non-nursing students.

Graduate entry nursing education has become a popular pathway into nursing for individuals with previous qualifications seeking career change and provides one possibility for recruiting individuals who might not otherwise enter into the profession (Everett et al., 2013). Internationally, the concept of 'graduate entry' nursing does vary. In the United Kingdom, this term has been used to refer to education programs leading to initial nursing registration being at bachelor degree level (Ali and Watson, 2011; Ingrams, 2016). While in other countries, such as Australia and the United States, graduate entry represents a shift towards registration as a nurse through postgraduate courses, aimed for people with prior degrees other than nursing (Seldomridge and DiBartolo, 2007; McKenna and Vanderheide, 2012). Such courses provide accelerated progression through an undergraduate nursing degree, or at masters level.

Demographics of students in accelerated postgraduate nursing courses have been found to differ from traditional nursing courses. Graduate entry courses report older students with a higher proportion of males and international students (Everett et al., 2013; McKenna et al., 2015; McKenna and Vanderheide, 2012; Seldomridge and DiBartolo, 2007) than traditional courses. Furthermore, academics have reported that these students are challenging to teach, being more likely to engage in critical questioning (Lindsey, 2009; Seldomridge and DiBartolo, 2007). Little has been written about why individuals choose to assume nursing as a second career. In one Australian qualitative study, Neill (2012) interviewed six graduates from a graduate entry program, seeking to explore their journey from student to nurse. This study revealed that participants held long-term interest in pursuing nursing careers, and expressed wanting a caring role.

The Master of Nursing Practice is a four semester long accelerated program designed for baccalaureate degree holders in disciplines other than nursing, leading to initial nursing registration, introduced at Monash University in 2009. Since its inception, a range of aspects of the course and students has been evaluated to ensure that the course is responsive to students' needs as well as those of the nursing profession and health care more generally. While it is known that accelerated graduate entry courses are increasingly popular, students' initial understandings of nursing are less clear. It is possible that these may have later implications for future nursing career progression, and may differ to traditional undergraduate students. Furthermore, perspectives may have an impact on early graduate career offerings. Hence, this study sought to examine their views of nursing on entry to the program and what influenced these.

2. Methods

2.1. Design

A descriptive design utilising questionnaire was employed to address broader study aims of understanding individuals' motivations to undertake nursing as a second or subsequent career and what they were seeking from a future nursing career. The questionnaire examined demographic characteristics of individuals commencing the graduate

entry Master of Nursing course, and their perceptions of nursing on entering the profession. Cross-sectional data were collected from beginning students to ensure their entry perceptions had not been influenced by the course content.

2.2. Participant Recruitment

The total population of eight cohorts (302 students) of the Master of Nursing Practice from 2009 to 2015 were invited to participate within the first two days of commencing the course. During allocated lecture time, one of the research team not directly engaged with the students' learning provided a verbal introduction to the study and invited their participation.

2.3. Survey

The total questionnaire consisted of 12 items covering demographic characteristics including age, gender, whether from a non-English speaking background or not, previous studies, along with education, employment history and reasons for wanting to undertake a nursing course. Some demographic findings have been published elsewhere (blinded for review). This paper concentrates on the findings of two open-ended questions asked to enhance the quantitative findings: *What do you believe the role of the nurse is? What things have influenced that view?*

2.4. Ethics

Prior to the commencement of data collection, approval was sought from the relevant university ethics committee. Interested students were provided with an Explanatory Statement outlining the study. Consent was implied with the return of a completed survey.

2.5. Analysis

Demographic data were analysed using descriptive frequencies, while the open-ended questions were analysed using summative content analysis. This is an analytic approach commonly used for open-ended survey questions, whereby key words are identified and quantified to understand a situation (Hseih and Shannon, 2005). Hence, this approach sought to enable analysis of the usage of terminology arising in response to the questions posed. Two researchers independently read and re-read the text to identify key words from the responses. These were subsequently sorted into like categories and sub-categories. These were then quantified using frequency counts. This approach was considered the most suitable as responses were in single word and short sentence formats. The main categories and sub-categories that arose were then identified to enable further interpretation. The researchers then compared identified categories for validation purposes.

3. Results

3.1. Demographic Characteristics

Out of a potential sample size of 302, 286 surveys were returned, representing an overall response rate of 95%. Characteristics of the sample are provided in Table 1. Due to an incomplete survey for one cohort, some of these contain larger amounts of missing data than others. However, the findings do indicate a diverse group of students with regard to age, gender, cultural background and previous education.

3.2. General Roles of the Nurse

A total of 255 participants responded to the first open-ended question: *What do you believe the role of the nurse is?* Four key categories

Table 1
Sample characteristics.
Actual sample (N = 286).

| | N | % |
|--|-----|------|
| Age (years) | | |
| Under 21 | 1 | 0.3 |
| 21–25 | 105 | 36.7 |
| 26–30 | 56 | 19.6 |
| 31–35 | 42 | 14.7 |
| 36–44 | 31 | 10.8 |
| 41–45 | 31 | 10.8 |
| 46–50 | 12 | 4.2 |
| 51–55 | 5 | 1.7 |
| 56+ | 2 | 0.7 |
| Unknown | 1 | 0.3 |
| Gender | | |
| Female | 191 | 66.8 |
| Male | 71 | 24.8 |
| Unknown | 24 | 8.4 |
| From non-English speaking background | | |
| Yes | 127 | 44.4 |
| No | 136 | 47.6 |
| Unknown | 23 | 8.0 |
| Previous highest education level | | |
| Bachelor degree | 224 | 78.3 |
| Graduate diploma | 14 | 4.9 |
| Masters degree | 35 | 12.2 |
| Doctoral degree | 8 | 2.8 |
| Other | 5 | 1.7 |
| Previous discipline | | |
| Science | 108 | 37.8 |
| Business | 39 | 13.6 |
| Arts | 28 | 9.8 |
| Psychology | 16 | 5.6 |
| Public health/health science | 15 | 5.2 |
| Medicine | 14 | 4.9 |
| Nursing | 8 | 2.8 |
| Information technology | 7 | 1.7 |
| Law | 6 | 2.1 |
| Paramedicine | 6 | 2.1 |
| Pharmacy | 6 | 2.1 |
| Complementary and alternative medicine | 5 | 1.7 |
| Education | 5 | 1.7 |
| Engineering | 5 | 1.7 |
| Nutrition and dietetics | 3 | 1.0 |
| Physiotherapy | 3 | 1.0 |
| Tourism, international work | 3 | 1.0 |
| Social work | 2 | 0.7 |
| Dentistry | 2 | 0.7 |
| Veterinary science | 2 | 0.7 |
| Respiratory therapy | 1 | 0.3 |
| Disability | 1 | 0.3 |
| Years in the workforce | | |
| 0–5 | 134 | 46.9 |
| 6–10 | 75 | 26.2 |
| 11–15 | 37 | 12.9 |
| 16–20 | 15 | 5.2 |
| over 21 | 24 | 8.4 |
| Unknown | 1 | 0.3 |

emerged from the analysis: Care, Clinical Skills, Practice Characteristics, Interpersonal Relationships (Table 2).

Category: Care

Overwhelmingly, the concept of 'care' emerged strongly from the data. The provision of general patient care was noted by 61.6% of participants. Others raised constructs for care delivery such as holism (12.2%) and patient-centred care (3.5%), for example:

To provide holistic and therapeutic care for any person/s who are in need (156).

Table 2
Role of the nurse.

| | N = 255 | % |
|--|---------|------|
| <u>Category: care</u> | | |
| General care provision | 157 | 61.6 |
| Holistic care | 31 | 12.2 |
| Comfort provision | 18 | 7.1 |
| Patient-centred care | 9 | 3.5 |
| Emotional support provision | 7 | 2.7 |
| To help the sick, alleviate suffering | 3 | 1.2 |
| <u>Category: clinical skills</u> | | |
| Observation, monitoring | 17 | 6.7 |
| Medication administration | 14 | 5.5 |
| Wound management | 12 | 4.8 |
| Facilitating activities of daily living, hygiene | 9 | 3.5 |
| General task focus | 5 | 2.0 |
| Infection control | 2 | 0.8 |
| Documentation | 2 | 0.8 |
| Diagnosis | 1 | 0.4 |
| <u>Category: practice characteristics</u> | | |
| Health promotion, teaching | 58 | 22.7 |
| Patient advocate | 29 | 11.4 |
| Professional | 22 | 8.6 |
| Legal, ethical, trustworthy | 12 | 4.7 |
| Competent, skilled, knowledgeable | 12 | 4.7 |
| Leadership, coordination, management | 10 | 3.9 |
| Quality and safety | 10 | 3.9 |
| Decision making, critical thinking | 8 | 3.1 |
| Accountable, responsible | 6 | 2.3 |
| <u>Category: interpersonal relationships</u> | | |
| Communication, collaboration | 28 | 11.0 |
| Interprofessional team, partnership | 27 | 10.6 |
| Working with families | 20 | 7.8 |
| Hierarchy, subservience, assisting role | 14 | 5.5 |

Elements of altruism also arose from a few responses identifying alleviation of suffering and helping the sick (3%), such as:

Basically the essence of being a nurse is providing care to the needy (43)

The role of a nurse is to help alleviate the discomfort of the patients to a better situation (18).

Others recognised the need to care beyond the physical, that is, provide emotional care (2.7%).

Caring for patients' physical & emotional wellbeing (11).

Category: Clinical Skills

Elements of clinical practice were identified by a small number of participants and these varied. Overall, this suggested that there was not a great deal of understanding of this component of nursing. A general task focus was identified by 2.0%, observation and monitoring recognised by 6.7% of participants. On the other hand, 13.8% identified specific clinical skills such as:

To administer medications, wound management, to monitor their BGLs etc. (4)

To assist an individual whether healthy or sick in performing activities in which he/she cannot perform individually (208)

Category: Practice Characteristics

Respondents also identified characteristics of nursing practice beyond the delivery of clinical care. Interestingly, almost one quarter (22.7%) identified health promotion and teaching as the nurses' role, evidenced through many comments such as:

Provide health education within health care locations and community (11)

Education re treatment/care undertaken and preventative measures available (135)

Within this category, respondents also identified a range of practice characteristics such as leadership and management, ethical, legal, professional practice and decision making, such as:

To work within a regulated field that has legal, ethical and professional guidelines (144)

To follow ethical and legal guidelines to maintain responsible practice (154)

Category: Interpersonal Relationships

The final category to emerge related to interpersonal relationships involved in the nurses' role. The interprofessional team was identified by 10.6%, while others (11%) identified communication and collaboration more broadly. Working with families was noted by 7.8% of respondents, with comments such as:

Communication and looking after the family as well (162)

Working in synergy with other health disciplines/workers to provide the best possible care for the patient, including with patient advocacy (156)

Of concern, 5.5% of respondents provided comments suggesting nurses as subservient and working to assist other health professionals, such as the following:

To provide care and helping hand to doctors and other staff to provide total care to a patient full TLC to the patient to get a full recovery (40)

Assisting doctors (265)

3.2.1. Influences on Perceptions of Nursing

A total of 228 participants responded to the second open-ended question: *What things have influenced that view?* The responses indicated that the following were important influences in this area: Personal or family experience as patient, talking with nurses, previous experience in a health-related role, media and personal research. (See Table 3.)

Experience with the health care system was an important factor in influencing views on nursing. For 38.2%, such experience involved either being a patient personally, or having family members hospitalised:

Having family members spending significant time in hospitals over a number of years (31)

Being a patient in a hospital, spending time with a family member who has been in hospital. (152)

A number of respondents (31.1%) reported talking with nurses had provided their information. These were often family members or friends who were nurses, such as:

Hearing my mother's stories from her experience as a nurse (91)

Talking to friends who have worked as nurses (100)

A number of respondents (29.8%) had previously worked in other health care disciplines (see Table 1) or caring roles and their

experiences had allowed them to see nurses firsthand in their roles and this had provided their understandings:

Working in hospital as a cardiac technician. Volunteer in disaster relief in 2004 tsunami (41)

Working in rehabilitation as a physiotherapist before (81)

Some respondents (12.1%) had gained their knowledge through undertaking personal research into nursing roles, while 11.0% reported gaining their understandings from the media, in particular, television. This included fictional and non-fictional programs, as demonstrated by:

TV- particularly E.R. and All Saints [TV hospital dramas] (22)

Media – print and TV (news & fictional) (134)

What I have been exposed to in the media (172)

4. Discussion

This study sought to understand perceptions of nursing, and the influences of those perceptions, for individuals entering one Masters level graduate entry nursing program in Australia. The open-ended questions yielded rich data about students' initial views on nursing. Similar to other studies into perspectives on nursing, and why individuals seek nursing careers, students overwhelmingly reported the centrality of caring in nursing, and their desire for a career where they were able to care for others in a meaningful way. In this way, it reinforces that some people are attracted into both traditional, and graduate-entry courses, for altruistic reasons.

Findings suggest that many respondents in this study did not appear to have a sound understanding of nurses' roles, beyond caring and a few individual clinical skills. It is possible that this was related to not having had clinical experience, but some generic course information. That health promotion and teaching were rated highly by almost one quarter of individuals suggests that this is perceived to be a major part of nursing, but in reality may only form a small component, depending upon where the nurse is practising. Furthermore, our findings suggest that experience with the health field, either personal or family, played an important role in influencing interest in a nursing career. This is consistent with a US study by Donelan et al. (2008) who reported the primary factor underpinning conversations about potential nursing careers was through personal or a family member's experience with nurses. Coming into contact with nurses may provide necessary insight into the work of nurses, and attracting newcomers into the profession. This was the case for respondents who had previously worked in other health care roles. Having achieved more life experience than school leavers, it is likely that some previous engagement with the health care system is an important factor in attracting individuals into graduate entry programs such as ours. Further, strategies to expose individuals to the realities of nursing may assist in recruiting new nurses.

A number of participants in this study reported that media representations, both news and fictional, influenced their perceptions of nursing. The media has been described variably as influencing individual perspectives of nursing. Donelan et al. (2008) described news stories about nurses in disaster situations had a positive impact on public perceptions. However, other authors have suggested that media, in particular television series, portray nurses and doctors in out-dated stereotypes (Neilson and Lauder, 2008). Doctors are often portrayed as the heroes who cure while the care nurses provide is undervalued leading to misinformation about the nursing profession (Price et al., 2013). Of concern, some of the respondents in our study identified nursing as being subservient to other health care professionals and media representations may have contributed to such perspectives. Clearly, there is a need for positive, realistic depictions of nursing practice within the media.

There are limitations to this study. It was only conducted with graduate-entry students from one Australian university. While not generalisable, they may reflect similar perspectives to students elsewhere. In addition, there were some participants who chose not to

Table 3
Influences on perceptions of nursing.

| Categories | N = 228 | % |
|--|---------|------|
| Personal experience of self or family as a patient | 87 | 38.2 |
| Talking to nurses, particularly family, friends | 71 | 31.1 |
| Experience as caregiver or other health-related role | 68 | 29.8 |
| Personal passion, altruistic influences | 30 | 13.1 |
| Personal research, obtaining information | 28 | 12.1 |
| Media | 25 | 11.0 |

provide responses to the open-ended questions. Hence, their perspectives were not captured and may have been different to those captured in the findings. Furthermore, those who did respond may have not provided responses that fully reflected their views. Nevertheless, the findings are important and contribute to our limited knowledge of factors influencing career changes into nursing, particularly into graduate entry programs.

5. Conclusion

This study sought to examine perceptions of nursing for graduate-entry nursing students at one Australian university. Findings suggest that exposure to health care plays an important role in informing individuals about the scope of nursing practice. Despite having more life experience than school leavers, many new students still have limited knowledge of nursing on entering their nursing education, some influenced only by media representation. Findings reinforce the need for the profession to continue working to effectively market nursing in a realistic way to promote future recruitment.

Contributions

- Conception and design of the study, or acquisition of data, or analysis and interpretation of data – LM, IB, RV
- Drafting the article or revising it critically for important intellectual content – LM, IB, RV
- Final approval of the version to be submitted – LM, IB, RV

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