

BARRIERS IN OBTAINING A BACHELOR OF SCIENCE
DEGREE AS PERCEIVED BY NURSES PREPARED
BELOW THE BACCALAUREATE LEVEL

By

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TABLE OF CONTENTS

Chapter	Page
I. INTRODUCTION.	1
Statement of the Problem	5
Purpose of the Study	5
Research Questions	6
Definition of Terms.	6
Assumption	7
Limitations.	7
Summary.	8
II. REVIEW OF THE LITERATURE.	10
Education for Associate Degree and Diploma Nurses	10
Obtaining a Baccalaureate in Nursing . . .	15
Interest in a Baccalaureate in Nursing . .	18
Factors Influencing Enrollment	22
Summary.	24
III. METHODOLOGY AND DESIGN.	27
Research Design.	27
Population	29
Instrumentation.	31
Developing Educational Opportunities for RNs	31
Data Collection Process.	34
Research Questions	35
Analysis of Data	35
Summary.	36
IV. PRESENTATION OF FINDINGS.	38
Introduction	38
Summary.	49
V. SUMMARY, CONCLUSIONS, AND RECOMMENDATIONS . . .	53
Conclusions.	56
Recommendations.	57
BIBLIOGRAPHY	59

Chapter	Page
APPENDIXES	62
APPENDIX A - HUMAN SUBJECTS FORM.	63
APPENDIX B - PERMISSION LETTER.	70
APPENDIX C - COVER LETTER	72
APPENDIX D - QUESTIONNAIRE.	74

LIST OF TABLES

Table	Page
I. Demographic Information on Nurses Responding to Survey on BSN Education: Reported in Frequencies and Percents.	32
II. Percent of Diploma Nurses Responding to Questions Concerning Reasons to Obtain a BSN.	40
III. Percent of Associate Nurses Responding to Questions Concerning Reasons to Obtain a BSN.	42
IV. Percent of Diploma Nurses (N=56) Responding to Questions on Barriers to Obtaining a BSN. . .	44
V. Percent of Associate Nurses (N=59) Responding to Questions Concerning Barriers to Obtaining a BSN.	46
VI. Frequencies and Percent of Diploma and Associate Nurses and Their Motives for Obtaining a BSN (N=115).	48
VII. Percentages and Frequencies of Diploma and AD Nurses and the Perceived Barriers to Obtaining a BSN.	50

CHAPTER I

INTRODUCTION

Nurses are the largest group of health care providers and they are an integral part of the health care team. Outside forces such as more rapid advancement and higher pay in other professions are changing the direction of nursing (Hiraki and Parlocha, 1983). These changes are causing nurses to leave the profession throughout the nation. The number of people enrolling in nursing programs is also declining, according to Rosenfeld (1987). She indicates that admission to baccalaureate (BSN), associate degree (AD), and diploma programs has decreased 4.5 percent since 1984. This decline is in part related to the increasing options available to young people as they leave high school and enter college. No improvement is expected in the next decade unless changes are forthcoming in the recruitment and retention of nursing students.

Enrollment in schools of nursing in Oklahoma has also decreased. Easterling (1987), upon interviewing a nursing faculty, was told that "the

number of applicants and graduates has dropped dramatically in the past few years". In the early eighties there were approximately 155 students admitted yearly to the University of Oklahoma College of Nursing, baccalaureate program. This figure has dropped to 100 in each of the last two years.

The 1987 Annual Board Report from the Oklahoma Board of Nurse Registration and Nursing Education (OBNRNE) indicated that associate degree nurse graduates in 1983 numbered approximately 570. In 1987 there were 460. Declining enrollments combined with an approximately 20 percent failure rate in nursing schools will have a serious impact on the level of health care provided by nurses in Oklahoma.

The direction and goal of nursing is changing. With modern technology nurses are called on to not only do nursing care but also to direct and manage. Nursing presently is composed of four different types of nurses: licensed practical nurses (LPNs), diploma nurses, associate degree (AD) and baccalaureate nurses (BSN). Licensed practical nurses are educated at the vocational level. The emphasis of their nursing education is upon functional nursing skills. Licensed practical nurses work under the direction of a registered nurse. Diploma nurses graduate from a two to three year hospital based educational program. They take licensure examinations and

are registered nurses nursing. The new direction is to gradually phase out this branch of nursing and move to collegiate based education. Nurses with an associate degree are educated in two year junior colleges. They usually work under baccalaureate or master degreed nurses. Baccalaureate prepared nurses are educated in a four year collegiate program. They may work at any phase of nursing but are often head nurses or administrators.

Diploma, associate degree and baccalaureate nurses currently take the same licensure exam. As early as 1965 it was proposed that there be only two levels of practice, baccalaureate and associate degree. This would provide not only the technical nurse who would give patient care but also professional nurses educated to accommodate the changing times. The professional governing agencies, the National League of Nursing (NLN) and the American Nurses Association (ANA), endorsed this recommendation. There has been a slow but gradual movement by individual states to ratify this proposal. North Dakota is the only state to date that has completed the process. Appropriate licensure examinations will be prepared for both associate and baccalaureate levels when more states ratify the recommended entry into practice requirements.

According to the Oklahoma Board of Nurse Registration and Nursing Education Report of 1987, Oklahoma has 19,202 registered professional nurses,

including 9,701 diploma and associate degree nurses educated below the baccalaureate levels. Only 67 of that number were identified as enrolled in an Oklahoma baccalaureate program in 1986. This figure is not truly representative of the population as Northeastern State University has a baccalaureate completion program for registered nurses. Their students were not counted in the report by Oklahoma Board of Nurse Registration and Nursing Education as they already hold licensure in Oklahoma. Northeastern State University graduates approximately 40 students yearly (Interview, 1987). This still leaves many diploma and associate degree nurses who are not enrolled in higher level nursing programs. Many would not be interested in higher education due to age, health, or any number of other commitments. Garvy (1983) reports that 80 percent of the professional nurses are prepared below the baccalaureate level. The goal is to increase the number of baccalaureate nurses through new admissions and upgrading.

Upgrading the educational level of currently licensed associate degree and diploma practitioners in nursing presents a philosophical and a logistical challenge. Nurses prepared at the diploma and associate degree levels need additional education to prepare for a competitive market dominated by advanced technology and management principles. MacLeon, Knoll, and Kinny (1985) predicted

that there would be a need to increase the knowledge base and to broaden the level of preparation of the majority of already practicing nurses.

Statement Of The Problem

The conflict between the emerging professional requirement that nurse practitioners have a bachelor degree and the difficulty they have in completing that requirement while practicing the profession is the problem to be addressed. The professional requirement that the baccalaureate degree in nursing be the entry level into practice was the motivating factor to research the barriers nurses encounter in obtaining a bachelor degree in nursing.

Purpose of the Study

The purpose of this study was to investigate the barriers nurses who are prepared below the baccalaureate level encounter when they try to obtain a bachelor of science degree in nursing. Many nurses enter programs which would lead to a bachelor of science degree in nursing. However, they are unable to complete the process. Many seek degrees in other areas such as education or business.

Research Questions

The following are the research questions to be addressed:

1. What motives do pre-baccalaureate registered nurses have for obtaining a bachelor degree in nursing?
2. What barriers do pre-baccalaureate registered nurses perceive in working toward a bachelor degree in nursing?
3. Is there a difference in the motives provided for obtaining a bachelor degree in nursing between diploma nurses and associate degree nurses?
4. Is there a difference in the barriers perceived in working toward a bachelor degree in nursing between diploma nurses and associate degree nurses?

Definition of Terms

1. Diploma nurse - a registered nurse who has graduated from a two to three year hospital based nursing program.
2. Associate Degree nurse - a registered nurse who has graduated from a two year junior college nursing program.
3. Practical nurse - a licensed practical nurse who has graduated from a one year nursing education program.

4. Registered Nurse Completion Program - a program of study designed for registered nurses who desire to obtain a baccalaureate in nursing. Advanced standing may be achieved through the granting of credit for previous college work and by challenging previously acquired knowledge through testing.

5. Bachelor of Science Nurse - a graduate from a four year baccalaureate program in nursing.

6. Barrier - any factor which interferes with an individual's ability to attain his/her desired goal, e.g. a problem with transportation to school, funding for course work or having an unrealistic class and work schedule.

7. Motive - a factor which indicates a reason or interest in obtaining a bachelor of nursing degree by nurses prepared below that level.

Assumption

The assumption was made in this study that respondents answered the questions from the questionnaire completely and honestly.

Limitations

The following are the limitations of the study:

1. The study was limited to diploma and associate degree nurses not enrolled in a baccalaureate program.

2. The response rate of 32 percent decreased the representativeness of the respondents.

3. Questions were limited by the design and utilization of the questionnaire.

Summary

Chapter One of this study identified the barriers that associate degree and diploma nurses perceived in obtaining a baccalaureate in nursing. Data were presented which indicated that such a study would be beneficial to nurses in the State of Oklahoma. A rationale was proposed for baccalaureate education.

Chapter Two documents the recommended educational needs of today's nurse. Studies are cited which investigate the barriers to obtaining a baccalaureate degree in nursing. The theory of continuing education is reviewed to give dimension to the problem under study.

Chapter Three describes the methodology and design of the study. The population is discussed as well as the instrument used in gathering the data. Statistical measures are described in detail.

Chapter Four provides information on the statistical analysis. Tables are utilized to better envision the results of this. The most salient points are discussed to give depth to the findings.

Chapter Five presents a summary of the study,

conclusions and recommendations for practice and for further research. Finally, implications for the nursing profession are proposed.

CHAPTER II

REVIEW OF THE LITERATURE

The review of the literature presents documentation related to the educational needs of nurses educated below the baccalaureate level.

Interest in obtaining advanced educational degrees in nursing, plans to enroll in educational programs, and problems in returning to school are examined. Factors influencing recruitment and retention of associate degree and diploma nurses in baccalaureate education are also reviewed.

Education for Associate Degree and Diploma Nurses

In 1985 admissions to nursing schools fell 4.5 percent nationally, according to Rosenfeld (1987). There has been an 8.8 percent decrease of nursing students overall with further decreases expected. This can be attributed to the changing emphasis in nursing and the demands which it presents to the potential student.

Financial and social rewards are greater outside nursing, according to many authors.

Traditional students are entering more lucrative professions such as law, business, medicine, computer science and pharmacy (Hoskins, 1987; Lewin, 1987; McCarthy, 1987; Easterling, 1987; Aikens and Mullinix, 1987; Rosenfield, 1987). When recruiting students for nursing programs it is not uncommon to encounter young people who express concern about the difficult course of study as well as having to work various shifts after graduation. They also express concern about working with seriously ill people. A national survey of first time college freshman indicated a 50 percent decline since 1974 in the proportion of full time female students planning careers in nursing (Aikens and Mullinix, 1987). This could be related to unfamiliarity by high school counselors who are often unaware of the differences between the various types of nursing programs and the variety of options available in planning programs for students who need to attend part time.

Declining enrollments, especially of newly graduated high school students, place greater emphasis on recruitment and retention of the more mature student. This is a very important consideration for nursing in light of the current shortage. Emphasis has to be placed on methods to produce more and better educated nurses.

Current collegiate nursing cohorts include increasing numbers of older students who are getting their first degree or are changing professions. Many older students have degrees in other areas. Holzclam (1983) indicates that the older, part time, minority and male students are the potential nurses of the future. They are the students who need individualized advisement so that previous deficits and family problems can be identified and addressed before they become problems. Early intervention would assist the students to attain goals and supply the market.

There are many associate degree and diploma nurses in the nursing population who would benefit from advanced education in nursing. Associate degree programs were promoted in the sixties when, during a previous shortage of nurses, a two year associate degree program was the answer to the immediate demand for more nurses quickly. They became very popular since the course of study was only two years and less costly than a baccalaureate degree.

Even today, Waters (1986) indicates there are nearly twice as many nurses graduated each year with associate degrees or diplomas than with baccalaureate or higher degrees.

Changes were recommended by governing agencies in order to elevate nursing to the status of other

professions. These changes included elevation of already licensed nurses to the baccalaureate level. However, progress toward this goal has been slow. Many schools offer programs for the registered nurse student, but there is little consistency among these programs. Programs may vary in the granting of credit for past learning. Proficiency testing, which tests previous knowledge, is not available in all nursing programs. Potential students must shop around for what will accommodate their needs. Many become discouraged and others choose not to try.

There is some confusion within the profession about what qualifications are needed to advance within the profession. A survey done by the Institute of Medicine (IOM) looked at the hiring market of the nurses with degrees in nursing. The results indicated that all nursing educators are required to have a minimum of a bachelor degree. Head nurse positions usually require a bachelor degree as do assistant head nurses, clinical specialists and consultants. Staff nurses with a bachelor degree are more likely to be promoted to higher positions at a faster pace than associate degree or diploma nurses (Butts, Berger and Brooten, 1986). Nurses with a bachelor degree are required to fill head nurse or supervisor positions when there are sufficient nurses to meet the health care needs. However, in times of shortage, nurses

with varied preparations are placed in higher level positions. This has the potential of placing health care at risk.

The American Nurses Association and the National League of Nurses have officially recommended the entry level requirement for practice to be a bachelor of nursing degree. With fewer registered nurses graduating with a bachelor of nursing degree, the recommendations of the American Nurses Association and the National League of Nurses will be hard to meet (Fisher, Wright and Kraft, 1986; Kinder, 1986; Waters, 1986). The deficiency of nurses prepared at the bachelor level may result from education failing to respond to the special needs of the growing number of associate degree and diploma nurses for baccalaureate education programs.

Many studies reviewed the various characteristics of associate degree and diploma nurses and their views of advanced education. Several studies compared selected characteristics of registered nurse students in baccalaureate programs. Comparisons were done on those registered nurses who succeeded in a program versus those who did not succeed. The variables reviewed were age, sex, race, marital status, number of children, and employment. The population sample consisted of associate degree and diploma nurses. The results indicated that successful students did not have

higher Standard Appitude Test (SAT) scores than did those who did not succeed (Radman and Allen, 1974; McGrath and Bacon, 1979; Lange, 1986). This would lead one to conclude that other factors were the causes of noncompletion of programs by students.

Obtaining a Baccalaureate in Nursing

There were several studies which reported on the problems encountered in obtaining baccalaureate education. These barriers varied in depth depending on population and location of the study. Questions which were relevant to the problems of baccalaureate education included those on enrollment, support systems, constraints at work, and academic experiences. The majority of studies reviewed indicated that a higher percentage of associate degree nurses than diploma graduates enrolled in nursing programs. The diploma nurses often indicated that they would not get credit for past learning and that current baccalaureate programs were too demanding. This was cited as a problem in studies by Bardossi, 1980; McGrath and Bacon, 1979; and Lange, 1986.

The location of baccalaureate programs was often cited as a serious problem for returning to school. Respondents identified programs as too distant if they were 25 miles or further away. Distance tended to be a problem more frequently in rural states. Baccalaureate

programs are more readily available in large metropolitan areas than in remote areas (Bishop and Van Dyke, 1977; Bardossi, 1980; McGrath and Bacon, 1979; Scanlon and Darkenwald, 1984; Lange, 1986). Distance is particularly relevant to nurses who hold full time employment and who have families. Some programs offer academic work by correspondence or talkback television. However, nursing courses generally do not. The clinical components of each course usually prohibit such independent study. The development of innovative programs appears to be a need for the future.

Funding was also identified as problematic. The expense of nursing education presents a problem to many potential registered nurse students. It is anticipated that the cost of completing a degree would be "at least a couple of thousand dollars and perhaps as much as \$5000 or more" (Bardossi, 1980, p.55). Most registered nurse students are working in full time jobs and have family responsibilities. Because they are working they are ineligible for most grants and loans.

Associate degree and diploma nurses interested in returning to school identify expense as a serious problem. Studies done using allied health workers who were participating in higher education identified cost as their number one barrier to the attainment of a college degree (Scanlon and Darkenwald, 1984; Baj, 1985;

Lange, 1986; Bardossi, 1980; Rosenfeld, 1987; McGrath and Bacon, 1979). Legislative assistance for nursing education has been reduced and few workplaces are providing assistance to employees.

A reduction in the ability to pay for a registered nurse completion program may also be incurred as the nursing students move from higher level positions to lower level or part time positions. Hillsmith (1978) found that many of the diploma nurses which she surveyed were in high level jobs such as charge nurse or supervisor. Returning to school is not only costly but charge nurse or supervisory positions held before going to school may not be specifically available after the completion of college. This has affected the overall financial security of individuals.

Financial aid is often unavailable to the registered nurse student as most nurses earn more than is allowed in order to qualify for financial aid. The average salary for a hospital nurse is \$20,340 with a maximum level for experienced nurses of \$27,340. The financial return on a baccalaureate degree for a working nurse is poor in comparison to many other professions (Adkins and Mullinix, 1987; Inglehart, 1987; Bardossi, 1980; Waters, 1986; Hart, Crawford and Hicks, 1985).

Associate degree and diploma nurses who decide to

return to school, either full or part time, need support from the employer. In Lange's study (1986), 64 percent of the nurses surveyed indicated they thought employers would support a return to school. Only 54 percent of the sample indicated that they expected their work schedules to change and only 27 percent indicated that they would reduce their present work hours. In times of nursing shortages it is difficult for employers to grant time off for education.

Family responsibilities are another source of problems in returning to school. A study done in 1985 identified 58 percent of those sampled as married with one or more dependents. Demographic information from other studies indicated that many nurses who are interested in obtaining a baccalaureate in nursing are married with one or more dependents. Many are single parents who must work at least part time (Baj, 1985; Bishop and VanDyke, 1977). According to Durcholz and O'Connor (1973), child care would be a boon to both female students and employees.

Interest in a Baccalaureate in Nursing

Interest in baccalaureate education was mixed in most studies reviewed. In 1972, associate degree and diploma nurses made up only 19 percent of the population in baccalaureate programs. According to

McLean and Bacon, the percentage of those interested in baccalaureate education had grown to 65 percent by 1979. Lange indicated that in North Carolina a high percentage of respondents expressed interest but did not plan to enroll in a baccalaureate program (1986).

Interest in returning to school is often inconsistent. Many nurses do not formally enroll in a bachelor completion program until they have completed prerequisites. Many start programs, withdraw, and return. Some programs do not formally identify the student as a nursing major until nursing courses are started. Several of the studies reviewed used small samples, were done in a restricted environment, or sampled only one section of the country.

Only two studies were located which addressed an entire state. The Bardossi study was done through RN Magazine, which has nation-wide distribution. Fifty-seven percent of the 335 nurses who responded expressed interest in obtaining a baccalaureate degree. A variety of reasons for wanting a baccalaureate were identified. Some respondents were motivated by a desire for more comprehensive nursing competencies. Some wanted more independent practice and greater leadership roles. Others identified reasons such as increased salary, broader job options, job security, and professional advancement. Personal

satisfaction and personal rewards were also listed as reasons to get a bachelor of science degree. Increased knowledge, skill and feelings of achievement were identified as positive factors for enrollment in a baccalaureate program (Lange, 1986; McGrath and Bacon, 1979).

Several books and articles indicated that credit for previous learning is available to college students. Courses which have been taken at the college level and meet individual school requirements may be transferred for credit. These courses are evaluated by school officials and credit is granted if course content meets the requirements of the material it is designed to cover. Associate degree nurses apply many of their previously earned credits to baccalaureate degrees. This assists them in completing programs in a shorter time than those nurses who have not earned college credit. Diploma nurses who were trained in hospital based programs often do not have college credit to transfer.

Validation of competencies for both associate degree and diploma nurses is often granted after successful completion of competency tests such as the American College Testing Proficiency Examination Program (ACTPEP). Credit may also be obtained for basic college course work through such programs as the College Level Examination Program (CLEP). Nurses who

choose to seek credit this way take a nationally validated test over material which they learned at a technical level such as in a hospital based nursing program. Nursing credit is available through these forms of testing. This type of credit is certainly advantageous to associate degree and diploma nurses who can then apply college course credit obtained through these testing programs (Hiraki and Parlaha, 1983). This is one route that could be used to promote the recruitment of registered nurse students, particularly diploma nurses without regular course credits.

Associate degree and diploma nurses enter baccalaureate programs with individual life experiences and levels of interest. Most move through programs quickly. However, occasionally the progress is slower for those who have less defined goals and varying learning styles (McLean, Knoll and Kinny, 1985). Most applicants to baccalaureate programs are associate degree nurses and less time is necessary to complete programs for them than for diploma nurses. This aspect is very appealing to this population (Lange, 1986; McGrath and Bacon, 1979).

Low self esteem may also deter many nurses from considering baccalaureate education. Many feel the years they have been out of school without formal learning programs put them at risk for failure. Many

feel they are unable to learn due to age. They express doubts about their ability to learn new theory. Low self esteem is expressed in doubts about their ability to handle the rigors of attending school and working. Some have worked only part time or not at all while raising families. The feelings expressed are often those of despair and fear of failure. Taking just one course and getting a passing grade is often enough of a reward for these nurses.

Even nurses with healthy self esteem may suffer from a self confidence crisis as they consider returning to school (Murdock, 1987). Many associate degree and diploma nurses are accustomed to success and have already proven themselves by completing prior education. Many have attained responsible positions in their employment, yet express interest in getting a baccalaureate for various reasons. Some are motivated by monetary gain or the desire for advanced positions while some want more nursing competencies, especially in problem solving and decision making. They are interested in independent practice and leadership. Some are motivated by fear that a BSN will be required for entry level to practice (McGrath and Bacon, 1981).

Factors Influencing Enrollment

Changes in traditional college programs have been rather modest. Cross (1981), quoting from a survey by

Ragle and Griselman, indicated some colleges were non-traditional in that they used off campus locations. Approximately 57 percent of the colleges surveyed used non traditional methods and 48 percent used non-traditional content.

Cross (1981) discussed barriers to the adult student who wishes to pursue advanced education. She identified them as situational, dispositional and institutional. Situational barriers are items such as the lack of time, home responsibilities, or child care. Dispositional barriers are those related to one's perceptions, such as age, educational background and ability. Institutional barriers are usually erected subconsciously by educational facilities. These include inaccessability, difficult scheduling, and the failure to grant credit by examination. She further indicated that assessments are performed to determine the interest of potential clients. Evaluation of coursework by adult learners assists faculty to include content and to present coursework in a stimulating manner.

Lange (1986) urged schools of nursing which have adult learners to depart from the traditional schedules and course designs. She indicated that courses should be designed for the part time student and include learning modules, self instruction, and learning contracts. She further recommended that program planners should seek input from registered

nurses concerning what works best for them (Lange, 1986).

Rosenfeld (1987) said,

Each potential group of recruits requires special considerations - a better understanding of adult learning and the impact of sexism in nursing, day care facilities, remedial schedules and tutoring (p.286).

Programs would have the potential to increase enrollment if they were designed to accommodate the part time student who works a variety of hours and who has outside commitments. Norris (1980), writing about higher education for registered nurses, indicated that educators needed to be aware of ways to deliver post secondary education to those potential applicants in remote areas and to persons with limited time and finances.

Registered nurse students who do enroll would be helped with the transition to the role of student if they were advised about all the requirements that were expected of them. A support group of peers would be beneficial to help with the transition from work to school, especially during the first months in school (Lange 1986).

Summary

There are many barriers to enrollment in baccalaureate programs in nursing for associate degree nurses and diploma nurses. The literature indicates

that barriers in the acquisition of a bachelor of science degree by associate degree and diploma nurses include the distance to programs, funding problems, family responsibilities, transfer of credit from previously earned college credit, time and motivation.

The size and population, the density the area surveyed, metropolitan versus rural, are also factors in the generalization of the study results. Metropolitan areas have large clusters of registered nurses, whereas rural areas have smaller numbers of nurses. Populations of nurses who are surveyed tend to have greater numbers of nurses from metropolitan areas where baccalaureate education is more readily available. The barriers to obtaining a baccalaureate in nursing are potentially different for those nurses. Only one study was reviewed which had been conducted statewide using randomization techniques. Results from such studies can be relevant to all baccalaureate schools of nursing in a given state.

Arms (1985) summarized the barriers to baccalaureate education as:

1. lowered self-esteem resulting from required repetition of previously mastered nursing experiences;
2. altered life styles due to time commitment necessary to complete the degree and to prepare for class;
3. expenses related to pursuit of the degree;

4. geographic inaccessibility and insufficient number of baccalaureate degree nursing programs;
5. limited non traditional baccalaureate degree programs;
6. lack of credit for previously completed course work, clinical experience, and challenge examinations;
7. and conflicting work and school schedules
(p.32)

The various sources of research reviewed indicated a need to institute change in the baccalaureate programs designed to educate the associate degree and diploma students.

CHAPTER III

METHODOLOGY AND DESIGN

The purpose of this study was to investigate the barriers encountered by nurses prepared below the baccalaureate level when they try to obtain a bachelor of science degree in nursing. This study evolved from information shared by instructors in the schools of nursing in Oklahoma. These instructors were engaged in recruiting and admitting diploma and associate degree nurses into baccalaureate educational programs. This chapter describes the methods and procedures, including construction and pre-testing of the instrument, data collection, and statistical procedures for data analysis.

Research Design

This study describes the perceived problems associate degree and diploma nurses encounter in their pursuit of a bachelor degree in nursing. The descriptive survey was selected as the method for collection of data through questionnaires from two groups of nurses which are currently licensed to practice in Oklahoma. According to Isaac and Michael

(1981), descriptive research systematically describes the facts and characteristics of a given population or area of interest factually and accurately. Wilcox (1985) identified the survey as a method which studies a sample of a total possible population. Surveys are designed to determine the incidence, distribution, and interrelations among identified variables. One of the purposes of survey research is to identify problems or justify current conditions and practices (Isaac and Michael, 1981). The collected data are used to answer questions and solve problems that have been raised. Data are collected in a systematic manner which promotes accuracy in compiling the results. It is also objective and quantifiable which adds validity to the results (Isaac and Michael, 1984).

The questionnaire is used when conducting self report research. It can be a most useful instrument if it is well designed. Good design would include the use of open ended questions which are specifically written from the problem statement, designed to obtain the needed information. According to Zemke and Kramlinger (1983), questionnaires are easy to administer and complete. The same questions are asked and approximately the same time is needed by each respondent to complete the questionnaire. This form of information is familiar to people and reaches large numbers. Questionnaires cost less per respondent than

telephone interviews or face to face interviews (Zemke and Kramlinger, 1983, p. 158).

Research concerning the education of diploma and associate degree nurses can identify possible barriers to baccalaureate nursing education. It can also identify supports for and motives in baccalaureate nursing education for diploma and associate degree nurses.

Population

The sample for this survey was obtained from those registered nurses who were educated at the associate degree or diploma level in nursing. The sample pool was identified from the 1988 lists of licensed associate degree and diploma nurses supplied by the Oklahoma Board of Nurse Registration and Nursing Education (OBNRNE). All subjects were licensed to practice in Oklahoma. The 1987 annual report of the Oklahoma Board of Nurse Registration and Nursing Education indicated that there were 9,701 diploma and associate degree nurses in Oklahoma from which 375 were randomly drawn. A table used to determine needed sample sizes from a given finite population was utilized. Every twenty sixth name was chosen to receive a questionnaire.

Permission to use human subjects in this research was granted by the Human Subjects Committee of Oklahoma

State University which reviewed the application and determined that the research in question would not violate individual rights or cause harm (Appendix A). In order to provide confidentiality, each questionnaire was assigned a number through a random number system. Respondents who wished a copy of the research results indicated this by providing names and addresses. Returns were obtained through the use of a stamped, self addressed envelope.

There were 117 usable responses from the mailing. This represented a 32 percent return rate. Five questionnaires were undeliverable due to non current addresses and two arrived after the designated return date.

All counties in Oklahoma were represented by the sample of respondents. The two largest counties, Oklahoma and Tulsa, returned the greatest number of questionnaires. Smaller counties which were close to Oklahoma City or Tulsa returned five to six questionnaires. All other counties returned one or two questionnaires.

The demographic information obtained from the questionnaire provides insight into the characteristics of the respondents. Almost equal numbers of associate degree and diploma nurses responded. Fifty percent of the respondents had graduated from Oklahoma schools. Seventy-four percent of the

applicants were married and 66 percent had children at home. The most prevalent age groups of respondents were from 40 to 49 and from 50 to 59. Fourteen diploma nurses and 18 associate degree nurses responded in the 40-49 year old group and 10 diploma and 25 associate degree nurses responded in the 50-59 year old group. All respondents answered the birth year question. The majority of the respondents in the 50-59 year old group were not interested in obtaining a bachelor of science in nursing. The 14 diploma and nine associate degree nurses who responded from the 30-39 year old category did express interest in obtaining a degree in nursing. The demographic information is presented in Table I.

Instrumentation

Developing Educational Opportunities

for RNs

The instrument, Developing Educational Opportunities for Registered Nurses (DEOR), was adapted from one used by Lange (1986) to survey registered nurses in western North Carolina. The purpose of the instrument was to elicit information about the motives to obtain a bachelors degree in nursing. Two questions

TABLE 1

DEMOGRAPHIC INFORMATION ABOUT NURSES RESPONDING
TO SURVEY OF BSN EDUCATION REPORTED
IN FREQUENCIES AND PERCENTS

INFORMATION	f	%
Associate degree nurses	59	48
Diploma nurses	56	50
Basic program in OK	70	59
Program outside OK	46	40
Married	86	74
Never married	8	7
Divorced	14	12
Widowed	7	6
Children	77	66
No children	38	33
Age-diploma 40-49	17	49
Age-associate	18	51
Age-diploma 50-59	10	29
Age-associate	25	42

were eliminated because they pertained only to a single university in North Carolina. The name of the state was changed in one question to conform to the area in which it was used. There were four main areas addressed by the questionnaire. These were related to interest in returning to school, support from the work place, barriers in returning to school and plans to enroll in a baccalaureate program. Demographic questions were integrated in all four areas. Refer to Appendix D for a copy of the instrument. Permission was sought from the author for all changes (Appendix B).

The questionnaire was self administered by the respondents. Questions were brief with emphasis placed on words which addressed the central ideas of motives and barriers in obtaining a bachelor degree in nursing. Space for additional comments was made available.

The questionnaire contained 28 multiple choice questions. Lange (1986) pre-tested her instrument using a group of nurse educators to establish face and content validity. The adapted tool was submitted to 12 deans from the baccalaureate schools of nursing in Oklahoma. The instrument was evaluated for face and content validity. Although several suggestions were made, most dealt with individual ideas concerning specific items which might be added to the instrument. None of the suggestions indicated that the instrument was inferior in design. Several editing suggestions

were incorporated to add clarity to the instrument.

A group of registered nurse students also received the questionnaire to pretest for content and form. Only one of the 15 reviewers had difficulty with a question which incorporated two columns to which a response was needed instead of the usual pattern of circling in one column. No changes were made in the question as it provided only demographic information about type of employment. All respondents answered the questionnaire in approximately 20 minutes and indicated that the questions did request pertinent information about baccalaureate education.

Data Collection Process

Questionnaires were mailed to 375 associate degree and diploma RNs in the State of Oklahoma during the second week of April, 1988. A second mailing was not done. After the first mailing there was an increase in postal rates which left each questionnaire with insufficient postage. A method to provide the additional postage could not be developed. This did limit the number of responses and the strength of the study. A cover letter was included with the questionnaire explaining the purpose of the study, the value of the research to potential registered nurse students, and its importance to nursing education (Appendix C). A commitment was made to share results

with respondents at their request. A stamped, self-addressed envelope was included to facilitate return of the questionnaire. The designated time limit for return was three weeks. Collection of the data was finalized four weeks from the first mailing.

Research Questions

1. What motives do pre-baccalaureate registered nurses have for obtaining a bachelor degree in nursing?

2. What barriers do pre-baccalaureate registered nurses perceive in working toward a bachelor degree in nursing?

3. Is there a difference in the motives provided for obtaining a bachelor degree in nursing between diploma and associate degree nurses.

4. Is there a difference in the barriers perceived in working toward a bachelor degree in nursing between diploma nurses and associate degree nurses?

Analysis of Data

To evaluate the relationship among groups, the chi square test of independence was applied. This was determined to be the test of choice since 32 respondents indicated there was no reason to obtain a bachelor of science degree in nursing, leaving only 85

respondents completing the majority of the questionnaire. As the characteristics within the variables exceeded the number of respondents, it was decided to use a chi square test of independence and thus evaluate the significance of each independent relationship. This would produce the most accurate results.

Computer analysis of the data was done using the Statistical Analysis System (SAS). This computer program performed descriptive statistics on the data. The Yates correctional factor was utilized to compute cells with fewer than ten frequencies. When the qualitative variables have fewer than two values ($df=1$) the chi square statistic does not correspond with the chi square distribution. Since some cells contained two or fewer responses, application of the Yates correctional factor was indicated.

Cramer's test of association indicated the strength of the relationship when the value of the X^2 reached a significant probability level. The range of Cramer's is from 0, reflecting no relationship, to 1.00, a perfect relationship. This statistic is interpreted in terms of magnitude (Jaccard, 1983).

The SAS computer program displayed data in vertical and horizontal charts. The advantage of using SAS for this study is that it provides the ability to add extra information such as the material from the

open-ended questions. The level of significance was set at $p < 0.05$.

Summary

This study describes the barriers associate degree and diploma nurses encounter in seeking a bachelor of science degree in nursing. The population was selected from a list of all registered associate degree and diploma nurses in the State of Oklahoma. A sample of 375 names were randomly drawn from that list. Questionnaires were pre-tested prior to their being sent to the population. There were 117 questionnaires returned for a 32 percent response rate. The results were subjected to data analysis using a computerized program (SAS). The chi square test of independence was applied as well as the Yates correctional factor and Cramer's test of association.

CHAPTER IV

PRESENTATION OF FINDINGS

Introduction

The data were compiled from the questionnaires completed by a sample of associate degree and diploma nurses throughout Oklahoma. The results were analyzed using the statistical analysis system (SAS), a computer produced package. Each research question was addressed from the reported answers on the questionnaires. One hundred seventeen questionnaires were returned out of the 375 mailed out for a total response rate of 32 percent. Two questionnaires were not completed properly and were unusable. Results are presented by table and in narrative. The variables in Column One of each table appear in abbreviated form. The complete wording of the variables may be found in Appendix D.

In response to the first research question which asked what motives pre-baccalaureate registered nurses had for obtaining a bachelor degree in nursing, diploma nurses identified "personal achievement" least frequently (44%). "No interest" was chosen most frequently (80%) by those nurses who were not motivated to obtain a bachelor of science in nursing. Other variables which

indicated motives to obtain a baccalaureate in nursing by diploma nurses were identified as "pressure from employers" (62%) and "desire for recognition" (57%). "Pressure from the profession" (54%) and "job security" (53%) were also identified as important factors in reasons to get a bachelor degree in nursing.

The diploma nurses not interested in obtaining a baccalaureate degree indicated "desire for recognition" (67%) and "better job options" (55%) as possible reasons to get the degree. There were fewer variations in the non-interested than in the interested group. "Desire for recognition" (67%) was the most frequently reported reason and "pressure from the profession" (43%) the least frequently reported. Other variables of interest were "better job options" (55%) and "personal achievement" (52%). The information about reasons for diploma nurses to obtain a baccalaureate in nursing are presented in Table II.

Associate degree nurses who expressed interest in obtaining a baccalaureate degree indicated "personal achievement" (56%) to be the most important variable of interest. "Better job options" (55%) and "increased knowledge" (55%) were also important. The highest percent was identified as "personal achievement" (50%) and the lowest "no interest" (20%). Of those respondents who identified reasons to obtain a baccalaureate degree, "desire for recognition" was

TABLE II
 PERCENT OF DIPLOMA NURSES (N=56) RESPONDING TO
 QUESTIONS CONCERNING MOTIVES TO OBTAIN A BSN

REASONS	INTERESTED		NOT INTERESTED	
	f	%	f	%
No reasons	4	80	52	47
Job security	21	53	35	46
Increased salary	21	47	35	50
Increased knowledge	24	45	32	52
Pleasure in learning	17	47	39	49
Better job options	35	45	21	55
Pressure from profession	32	54	24	43
Personal achievement	22	44	34	52
Pressure from employers	16	62	40	45
Desire for recognition	12	57	44	67

Not all respondents replied to each item.

identified by 43 percent.

Those associate degree nurses who were not interested in getting a baccalaureate degree identified "pressure from the professions" (57%) as the highest variable of interest. The lowest variable of interest was "better job options" (45%).

In comparing the variables of interest selected by diploma nurses and associate degree nurses, 62% of diploma nurses "felt pressure from employers" to obtain a baccalaureate degree while only 38 percent of associate degree nurses indicated that pressure was a reason. Fifty-six percent of diploma nurses indicated they would get a baccalaureate degree for "personal achievement" while only 44 percent of associate degree nurses identified this variable. All other variables were very close, indicating low comparison values. Table III presents the results of reasons associate degree nurses would get a baccalaureate degree.

The barriers pre-baccalaureate nurses perceive they encounter while working toward a bachelor of science degree in nursing are identified from the responses to research question two.

Diploma nurses identified the variable "lack of study skills" (67%) as the greatest barrier to obtaining a baccalaureate degree followed by "insufficient credit" (62%). "Lack of support from family" (50%) and "required classes unnecessary" (48%)

TABLE III
 PERCENT OF ASSOCIATE NURSES (N=59) RESPONDING TO
 QUESTIONS CONCERNING BARRIERS TO OBTAIN A BSN

REASONS	INTERESTED		NOT INTERESTED	
	f	%	f	%
No reason	1	20	58	52
Job security	18	46	41	54
Increased salary	24	53	35	50
Increased knowledge	29	55	30	48
Pleasure in learning	19	53	40	51
Better job options	42	55	17	45
Pressure from profession	27	45	32	57
Personal achievement	28	56	31	48
Pressure from employers	10	38	49	55
Desire for recognition	9	43	50	53

Not all respondents replied to each item

were also identified. The lowest indicator of perceived barriers was "insufficient money" (30%).

Of those diploma nurses not interested in getting a baccalaureate degree, the problem seen as most difficult was "conflict between work and class" (67%). "Courses offered at distant locations" (65%) and "family responsibilities" (54%) were also selected frequently. The selected variables relating to barriers in obtaining a bachelor of science degree were "lack of family support" at 49 percent, the lowest percentage and "insufficient money" the highest at 59 percent.

There were few similarities between those diploma nurses interested and those not interested in getting a baccalaureate degree. Respondents not interested do not share the concern of having poor study skills with the interested diploma nurses. The variable "courses offered at distant locations" (65%), which was selected most often by diploma nurses who were not interested, was not shared by diploma nurses who were interested (28%). Both groups reported a lack of support from their families. The barriers to obtaining a baccalaureate degree by diploma nurses are presented in Table IV.

TABLE IV
 PERCENT OF DIPLOMA NURSES (N=56) RESPONDING TO
 QUESTIONS ON BARRIERS TO OBTAINING A BSN

BARRIERS	INTERESTED		NOT INTERESTED	
	f	%	f	%
Money	12	30	44	59
Courses at far locations	14	28	42	65
Lack of study skills	6	67	50	47
Insufficient credit	22	62	34	43
Family responsibilities	16	39	40	54
Conflicts/ work and class	19	32	35	67
Lack of support/ family	4	50	52	49
Lack of support/employer	3	38	53	50
Classes unnecessary	16	48	40	49

Not all respondents replied to each item.

Results reported in Table V indicate that of the associate degree nurses interested in obtaining a baccalaureate degree, 72 percent reported they felt "courses offered at distant locations" would be a barrier in returning to school. Other variables which would present problems were indicated as "insufficient money" (70%) and "conflicts between work and family" (68%). Variables which also might be considered as indicators of barriers were shown as "lack of support from employer" (53%) and "family responsibilities" (61%). This group of responses was separated by 24 points from the lowest variable to the highest, suggesting diversity in respondents.

The other major areas of potential barriers indicated by associate degree nurses were "conflicts between work and class times" (68%), "family responsibilities" (61%) and "lack of employer support" (63%). "Lack of study skills" (33%) and "insufficient credit" (37%) were cited less frequently as barriers to associate degree nurses who were interested in pursuing a baccalaureate degree.

Both diploma nurses and associate degree nurses who were interested in obtaining a baccalaureate degree identified lack of support from families as a barrier. Both groups also indicated they perceived credit for previous learning as necessary. Lack of support

TABLE V
 PERCENT OF ASSOCIATE NURSES (N=59) RESPONDING
 TO QUESTIONS CONCERNING BARRIERS TO
 OBTAINING A BSN

BARRIERS	INTERESTED		NOT INTERESTED	
	f	%	f	%
Money	28	70	31	42
Courses at far locations	36	72	23	35
Lack of study skills	3	33	56	53
Insufficient credit	13	37	46	58
Family responsibilities	25	61	34	46
Conflicts/work and class	41	68	18	33
Lack of support/family	4	50	55	51
Lack of support/employer	5	63	54	50
Courses unnecessary	17	52	42	51

Not all respondents replied to each item

from families was also indicated by the uninterested diploma nurses and associate degree nurses.

The differences in motives for obtaining a bachelor degree in nursing by diploma and associate degree nurses were addressed in research question four.

The chi square test of independence was performed, comparing the reported reasons as indicated by both groups. The Yates correctional factor was applied to three cells with frequencies of less than 10. No significant differences were observed among the groups. The data are presented in Table VI.

Research question four also addressed the differences in barriers diploma and associate degree nurses perceived they have in working toward a bachelor degree in nursing. The chi square test of independence was performed to measure the relationship of perceived barriers to diploma and associate degree nurses in their obtaining a nursing degree. Yates correctional was applied on five cells with frequencies of less than 10. The analysis indicated a statistically significant relationship on four variables. Both diploma nurses and associate degree nurses perceived they would have problems obtaining a bachelor degree due to insufficient money, the distance at which courses are offered, conflicts between work and class, and insufficient credit for previous learning.

TABLE VI

FREQUENCIES AND PERCENT OF DIPLOMA AND ASSOCIATE NURSES AND
THEIR MOTIVES FOR OBTAINING A BSN (N=115)

REASON	DIPLOMA		DIPLOMA		AD		AD		x	CRAMER
	INTERESTED		NOT INTERESTED		INTERESTED		NOT INTERESTED			
	f	%	f	%	f	%	f	%		
No reason	4	80	52	47	1	20	58	53	.15	-.14
Job security	21	54	35	46	18	46	35	54	.43	-.07
Better salary	21	47	35	50	24	53	35	50	.73	.03
Knowledge	24	45	32	52	29	55	30	48	.50	.06
Learning	27	47	39	42	19	53	40	51	.83	.02
Better jobs	35	46	21	55	42	55	17	45	.32	.09
Pressure/prof	32	54	24	43	27	47	32	57	.22	.11
Achievement	22	44	34	52	28	56	31	48	.28	-.08
Pressure/employ	16	62	40	45	10	38	49	55	.14	-.14
Recognition	12	57	44	47	9	43	50	53	.39	-.08

* indicates positive value Code: from 2x2 chi square
Diploma (N=56) AD (N=59)

All other variables indicated statistically insignificant relationships. Table VII indicates the results of the relationship of problems and obtaining a bachelor of science degree by diploma and associate degree nurses.

Summary

The results of the surveys which were subjected to analysis were presented in this chapter. Each research question was addressed by identifying salient points from the compiled results. The variables of interest were presented in narrative and table format.

The first research question addressed the motives for obtaining a bachelor of science degree by pre-baccalaureate nurses. Pressure from employers was the most frequently reported variable indicated by the diploma nurses who were interested in obtaining the degree. Those not interested in obtaining a bachelor degree indicated desire for recognition as a potential reason.

The interested associate degree nurses indicated personal achievement would be a motivating factor, whereas those not interested felt they were being pressured by the profession. Both groups of nurses who were not interested indicated increased salaries as a potential motivating factor for obtaining a bachelor degree in nursing.

TABLE VII
 PERCENTAGES AND FREQUENCIES OF DIPLOMA AND AD NURSES AND
 THE PERCEIVED BARRIERS TO OBTAINING A BSN

BARRIERS	INTERESTED DIPLOMA		NOT INTERESTED DIPLOMA		INTERESTED AD		NOT INTERESTED AD		x	CRAMER
	f	%	f	%	f	%	f	%		
Money	12	30	44	59	28	70	30	41	$\frac{1}{4}$.01*	.27
Location	14	28	42	65	36	72	23	35	$\frac{1}{4}$.01*	.36
Study skills	6	67	50	47	3	33	56	52	.26	-.11
Credit	22	63	34	43	13	37	46	58	.34*	.19
Family	16	39	40	54	25	61	34	46	.21	.14
Conflict	19	32	37	67	41	68	18	33	$\frac{1}{4}$.01*	.36
Support/family	4	50	52	48	4	50	55	51	.94	.00
Support/employer	3	38	53	50	5	63	54	50	.51	.61
Courses	16	29	40	49	17	52	42	51	.98	.03

Code: value from 2x2 chi square
 Diploma (n=56) AD (n=59) significant p < .01

The second research question addressed perceived barriers to obtaining a bachelor degree. Lack of study skills was reported as a problem to the interested diploma nurses and conflicts between work and class schedule would be problematic for the non-interested nurses.

Associate degree nurses indicated that driving to classes which were at distant locations would be their greatest problem. Insufficient credit for past learning was selected by the non-interested nurses. Both associate degree and diploma nurses reported a perceived lack of support from their families. They also indicated that required coursework seemed unnecessary.

The third research question addressed the differences in motives that associate degree and diploma nurses have for obtaining a bachelor of science degree. When subjected to the chi square test of independence, insignificant statistical relationships were found for all reasons in this area.

Research question four addressed the differences in perceived barriers in working toward a bachelor of science degree by associate degree and diploma nurses. This question was also subjected to the chi square test of independence. Four variables were statistically significant: insufficient money, distance of course

location, the lack of support from families, and insufficient credit for past learning.

CHAPTER V

SUMMARY, CONCLUSIONS AND RECOMMENDATIONS

This study examined the variables associated with motives in obtaining a baccalaureate in nursing and the perceived barriers to obtaining that degree. A brief overview of the current status of nursing was provided, including facts about the decreasing numbers of nurses entering the profession. Recommended levels of education for entry into practice were also discussed. The supporting data about nursing served to establish a basis for the study. The problem identified how nurse practitioners have difficulties meeting the requirements of an emerging profession and who also earn a bachelor of science degree. Research questions were included as well as assumptions, limitations and definition of terms.

In the review of the literature, the issue of the education of associate degree and diploma nurses was discussed in detail. Declining enrollments could be attributed to more students seeking education in other less demanding professions. The potential for recruiting and retaining students was discussed as it related to the development of innovative programs which

offered alternatives to the traditional methods of education. Nurses with degrees provide us with practitioners who would be able to deal with advancing technology and a greater need for management skill.

Studies were reviewed which reported the interest in obtaining a baccalaureate degree and the barriers encountered in obtaining that degree. Several reasons appeared frequently in the literature which lent support to the topic under study, including pressure from the nursing profession, desire for recognition and pressure from employers. The barriers encountered by pre-baccalaureate nurses in achieving a bachelor of science degree were identified as insufficient money, the distance at which courses are offered and conflicts between work and class schedules.

The principles of adult learning were supportive of the topic under study. The literature identified nursing students as older, married or divorced and having children. They were also described as self starters, diligent and industrious.

The descriptive design was validated with supporting literature. This included the benefits of using questionnaires as a method of collecting data. The population was randomly selected from a master list supplied by the Oklahoma Board of Nurse Registration and Nursing Education. A table indicating sample size

was utilized to identify the number of participants. Demographic information on the participants was presented in table format as well as in narrative.

The instrument used to obtain information from the participants was described in detail. This included information on the validity of the instrument. A letter was included with the instrument which described the study, its value to nursing and the sharing of information with the participants. The data were analyzed using the chi square of independence. The Yates correctional factor was used on cells of less than 10 frequencies. The $p < .05$ was set as the level of significance.

After subjecting the results of the survey to statistical analysis using a computer package (SAS), the results were presented in tables and narrative. The most salient points from each research question were outlined from each group and from each variable. There were no significant differences in the motives of associate degree and diploma nurses and their desire to obtain a bachelor of science degree in nursing. There were four barriers identified in which there was a significant relationship between the associate degree and diploma nurse groups

This study provided four significant relationships on barriers to obtaining a bachelor degree in nursing, and through the open ended questions it identified

factors that influence the ability of associate degree and diploma nurses to obtain a degree in nursing. Classes offered at near locations, funding for education, and the availability of class schedules after 6 PM on weekdays were all identified as needs which would help those nurses prepared below the baccalaureate level obtain a degree in nursing.

Conclusions

Educational programs are needed to accommodate technology such as computer technology, talk-back television and video-assisted learning. Use of these advanced methods can promote educational programs in distant locations and also would increase enrollment by assisting those registered nurses who have limited time to attend full time classes. Hospitals and medical facilities are encouraged to look into offering such classes as part of in-service programs where some credit can be obtained and applied toward a baccalaureate degree. Flexible scheduling of clinical rotations would also be advantageous to the registered nurse student. Hospitals would then have access to a more qualified nurse who would be readily available to them. The nurses who enroll in these programs would need less time to travel and more available time for family and work.

To promote professional nursing in Oklahoma, funding for registered nurse students to return to school is needed. This could be in the form of tuition reimbursement, time to attend one or more classes without loss of pay or the conversion of vacation time. The baccalaureate prepared nurse would be more likely to remain active in the nursing profession if she had the potential for upward mobility potential. This could alleviate a shortage of nurses which currently exists by providing more and better educated nurses to the profession.

Recommendations

1. Alternate educational methods and clinical rotations for registered nurse students should be studied. This has the possibility of enhancing the learning process for the experienced registered nurse.

2. Sources of funding for the diploma and associate degree nurses to return to school should also be researched. This would promote the education of a greater number of nurses.

3. The development of educational modalities which reach into rural areas needs to be explored. Use of already existing health care facilities and schools as educational sites should be researched. This would assist areas with the greatest amount of difficulties in health care delivery to keep nurses near home and available to work at least part time.

4. Studies are needed about barriers in obtaining a bachelor of science degree in nursing using age of respondent and most prevalent barrier in that age group as variables.

5. The problem of coordinating work and class schedules for those nurses prepared below the baccalaureate level needs to be investigated.

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APPENDIXES

APPENDIX A

HUMAN SUBJECTS FORM



Oklahoma State University

RESEARCH AND PROJECTS
COLLEGE OF EDUCATION

408 CLASSROOM BUILDING
STILLWATER, OKLAHOMA 74078-0408
(405) 624-6508

April 15, 1988

M E M O R A N D U M

TO: Shelly Holland, Office of University Research
FROM: Kenneth H. McKinley, ^{K.H.M.} Director, Education Research & Projects
SUBJECT: IRB Approval #Ed-88-009

I approve of the subject proposal as an exempt review.
Subjects are not at risk, the proposal meets exempt criteria.

cc: Dr. Venable, Associate Professor, OAED



Celebrating the Past Preparing for the Future

**OKLAHOMA STATE UNIVERSITY
INSTITUTIONAL REVIEW BOARD APPLICATION**

IRB # ED-88-009

- **NOTE** Please send **TWO** copies of the application form, informed consent form, and protocol, to be previewed before the preview deadline to insure that all forms are ready for review to the IRB Coordinator, Office of University Research Services, 001 Life Sciences East Basement.
- **NOTE** All **Competing Renewals** must be submitted as **NEW** IRB applications (this form, research protocol and consent form). When requesting support for training grants, career award, fellowships or scholarships, submit only the signed original documents.

Request Level of Review (check one box in each column):

- | | |
|--|---------------------------------------|
| <input checked="" type="checkbox"/> Exempt | <input type="checkbox"/> New |
| <input type="checkbox"/> Expedited | <input type="checkbox"/> Renewal |
| <input type="checkbox"/> Regular | <input type="checkbox"/> Continuation |

PROVIDE AN ANSWER FOR EVERY BLANK IN THIS FORM

I. RESEARCH PROPOSAL:

- A. Title of Study Barriers in Obtaining A Bachelors of Science in Nursing By Nurses Prepared Below the Bachelors Level
Grant ID # _____
- B. External Funding Agency (Sponsor) _____ Agency ID # _____
Internal Sponsoring Department _____ IND # _____ IDE # _____
- C. Principal Investigator(s) Janet Lewis Faculty
Department O.A.E.D. College Education Staff
Telephone Extensor 624-6275 Student
Co-Principal Investigator(s) _____ Faculty
Staff
Student
- D. Collaborating Investigator(s)/Department(s)/College(s) _____
Advisor only: Dr. William Venable
- E. Site(s) of Study Oklahoma

II. DESCRIPTION OF SUBJECTS:

- A. Age Range: Adults B. Sex: Females Only; Males Only; Both
- C. Special Qualifications: All a registered nurses prepared at diploma or associate degree level

D. Source of Subjects: Randomly selected from Board of Nurse Registrars
Oklahoma

E. Specify the number of subjects needed for this study:

Patients _____; Healthy Volunteers 370

F. Identify conditions under which subjects will be terminated from the study: _____

If they fail to complete the Survey instrument

G. Identify any groups of subjects who will be excluded from the study: _____

III. **ADDITIONAL PROTECTED GROUPS:** Please identify any or all of the following groups involved in this research protocol. (Please also address any special concerns of these groups in the consent form.)

- Pregnant Women Abortuses Fetuses Mentally Disabled
 Children* Elderly/Aged Prisoners Mentally Retarded

*If Children are involved as patients:

- The consent of both parents is required by federal regulation unless one parent is deceased, unknown, incompetent, or not reasonably available, or when only one parent has legal responsibility for the care and custody of the child.
- The assent of the child (age 7-17) is required by federal regulation, if the child is capable of providing such assent.

A. Will you obtain their assent? Yes; No. If NO, explain why?

B. Will you obtain the consent of both parents? Yes; No. If NO, explain why?

C. Are they wards of the State? Yes; No. If YES, DHS will need to identify their Advocates.

IV. **ETHICAL CONSIDERATIONS:**

A. Informed Consent: If a written consent document is used, it should include all elements of informed consent as described in the Institutional Assurance. If oral consent is used, the exact wording of the statement read to the subject is required. A separate document is required in addition to the oral consent statement. The separate document must be signed by the subject or the subject's legal guardian, the investigator and a third party who witnessed the oral presentation.

1. Informed consent will be obtained from any human subjects (patients or normal volunteers) participating in this study: Yes; No. If NO, explain why:

No risk to human subjects.
 Is there administration of any investigational test article (drug, biologic, or device):

- Yes (please identify) _____
 Not applicable

** If there is a separate consent form from the institution that the subject will sign for these procedures, please state that in the consent form.

2. Identify the direct benefits to the subject(s) or to others obtained from the study.

3. Identify the incentives or rewards that will be offered to the subjects.

Results of study could result in changes in the educational system for AD + diploma nurses making it easier for them to access baccalaureate education.

4. Identify who will pay for the additional costs of those items connected purely with the research such as laboratory work, tests and procedures. (Address this concern in the consent form)

Patient/Subject Sponsor Both Other (identify) _____

5. Identify the risks/side effects to the subject:

6. Check with your institutional official about policies governing compensation and medical treatment in the event of injury to the subject(s).

a. Is there risk of injury to subjects? Yes No
If YES, the subject must be informed about the availability of compensation and medical treatment from the institution.

b. Will medical treatment be provided? Yes No *(N/A)*
If YES, will it be provided free or at a reasonable fee ?

Identify who will pick up the additional cost(s) of injury due to participation in this study. (such as medications for the treatment of side effects or hospitalization) If there is a split of the costs, please identify who is responsible for which costs. (Please address these points in the consent form.)

Patient/Subject (insurance) Sponsor Both Other *N/A*

c. Will compensation be provided? No; Yes. If YES, how will it be provided? *N/A*

7. Identify the safety precautions that will be taken to protect the health of subjects and/or the personnel participating in this study.

V. OTHER COMMITTEE REVIEW REQUIREMENTS:

If the grant application also involves the use of animals, it is advised that you contact the Animal Resources Facility for information concerning the regulations for obtaining approval from the Institutional Animal Care and Use Committee. If you have an approval number please provide the IACUC number _____.

VI. ANNUAL REVIEW OF STUDIES INVOLVING RESEARCH WITH HUMAN SUBJECTS:

The terms of our Institutional Assurance for the protection of human subjects require that the principal investigator prepare an annual progress report for review by the IRB. The Office of University Research Services will notify investigators when reports are due. The annual progress report is an important requisite for annual review. If a progress report is not returned by the date requested, the IRB will place the project on inactive status, precluding any further research.

VII. ATTACHMENTS: (All categories must be included)

- Informed Consent Form/Assent Form (if appropriate)
- Proposal
- Instrument(s) (questionnaire, survey, testing, field)
- Curriculum Vita
- Departmental/College Review Statement (Optional)

VIII. CERTIFICATION:

The principal investigator agrees to the above requirements and statements, and has received approval from all persons named as collaborating investigators and officials of the project site(s).

7-25-88
Date

Janet Lewis
Signature

I have reviewed this application and all attachments and hereby approve.

Francis DeLoach
Administrative Unit
(College; CARD)

Kenneth M. Kinley
Signature
(College Dean or their Representative)

THE FOLLOWING TO BE COMPLETED BY IRB.

IRB ACTION:

- Approved
- Approved with Provision
- Deferred for Revision
- Not Approved

Comments:

Approve for release to PI for use in field
~~No~~ Subjects not at risk - proposal meets
exempt criteria *KHM*
3/24

Date

IRB Chair's Signature

APPENDIX B

PERMISSION LETTER

6114 N Meridian Apt 723
Oklahoma City OK 73112
Feb 20 1988

Dr. Linda Lange
Virginia Commonwealth University
Box 567
Richmond, Virginia 786-0724

Dear Dr. Lange

Several Months ago I obtained your survey instrument Developing Educational Opportunities for RN's. I am going to use this for my dissertation and will give you credit for its development.

I have made several changes to adapt it for use in Oklahoma. My research is aimed at a random selection of AD and diploma nurses throughout the state of Oklahoma. Questions 2 and 9 were eliminated as they referred to a particular university and not necessary for my study. The state name North Carolina, in question 26 was replaced with that of Oklahoma. I trust these changes meet with your approval.

Sincerely

Janet Lewis

APPENDIX C

COVER LETTER

6114 N Meridian Apt 723
Oklahoma City OK 73112
Feb 20 1988

Dear Colleague,

You have been selected to participate in an important research project related to baccalaureate education for nurses. It is important because it will assist us in understanding the direction nursing must take in our state. As a doctoral student at Oklahoma State University, I have the opportunity to seek answers to your nursing education needs by conducting this survey as part of my dissertation.

The survey consists of twenty eight questions; the first nine relate to your interest and opinions about baccalaureate education. Questions 10 through 18 seek information about your work experiences and the last few questions ask questions about you. This last group of questions will help me group your answers for analysis.

A stamped, pre-addressed envelope is enclosed for your use in returning the questionnaire. Results of the survey may be obtained by placing your name and address after question 28.

Thank you for participating in this important survey. The few minutes taken will greatly assist in the future direction of baccalaureate education in Oklahoma.

Sincerely

Janet Lewis

APPENDIX D

QUESTIONNAIRE

A SURVEY
DEVELOPING EDUCATIONAL OPPORTUNITIES FOR RNs

By Linda Lange
Adapted For Use In Oklahoma

- 1 NO PROBLEMS EXPECTED OR FACED
- 2 NOT ENOUGH MONEY
- 3 COURSES OFFERED AT DISTANT LOCATIONS
- 4 LACK OF NEEDED STUDY SKILLS AND HABITS
- 5 INSUFFICIENT CREDIT FOR PREVIOUS LEARNING
- 6 FAMILY AND/OR CHILD CARE RESPONSIBILITIES
- 7 CONFLICTS BETWEEN WORK AND CLASS SCHEDULES
- 8 LACK OF SUPPORT OR ENCOURAGEMENT FROM FAMILY
- 9 LACK OF SUPPORT OR ENCOURAGEMENT FROM EMPLOYEES
- 10 REQUIRED COURSES SEEM UNNECESSARY
- 11 OTHER (specify) _____

Q5 Of the problems you identified in the preceding question, which do you see as the single most difficult problem you expect or have faced? (Place the number of the problem in the box below)

_____ MOST DIFFICULT PROBLEM

The next few questions are related to the academic courses you have taken or expect to take.

Q6 Prior to September, 1987, did you take any academic courses which you believe would transfer to another program (circle number of your answer)

- 1 NO
- 2 YES _____ > if YES, HOW MANY COURSES
WHERE TAKEN _____

Q 7 During the next 12 months, (now until January 89), do you plan to enroll in any academic credit courses? (circle number)

- 1 NO
- 2 YES _____ > If YES, WHERE? _____
if yes, WHAT COURSES?

NAME OF COURSES

IF MORE SPACE IS NEEDED, USE MARGINS

Q8 If you were to enroll in school part-time, about how long would it take you to complete the requirements for a BSN degree? (circle number)

- 1 LESS THAN 1 YEAR
- 2 1 TO 2 YEARS
- 3 2 TO 3 YEARS
- 4 I DON'T KNOW

Q9 About how long would it take you to complete BSN degree requirements if you went to school full-time?(circle number).

- 1 LESS THAN 1 YEAR
- 2 1 TO 2 YEARS
- 3 2 TO 3 YEARS
- 4 MORE THAN 3 YEARS
- 5 I DON'T KNOW

Next, I am interested in learning about your work experiences.

Q 10 Are you employed in a job outside your home? (Circle Numbers that apply)

- 1 NO--- >IF YOU ARE NOT EMPLOYED OUTSIDE YOUR HOME, please skip from here to Q 13 on the next page.

- | | |
|-----|--|
| --- | 2 YES, IN NURSING |
| --- | 3 YES, OUTSIDE OF NURSING |
| --- | ---> IF YES, (4) I WORK FULL TIME (AT LEAST 40 HRS PER WEEK) |
| | 5 I WORK PART TIME _____ Hours per week
(how many) |

Q 11 Which shift or hours of the day do you usually work?

_____ SHIFT/HOURS USUALLY WORKED

Q 12 Generally speaking, what is your employer's attitude toward RN's interested in working together toward BSN degrees? (Circle Number)

- 1 VERY SUPPORTIVE
- 2 SOMEWHAT SUPPORTIVE
- 3 NEITHER SUPPORTIVE NOR NONSUPPORTIVE
- 4 SOMEWHAT NONSUPPORTIVE
- 5 VERY NONSUPPORTIVE

Q 13 If you were to enroll in academic courses applicable to BSN requirements, which of the following would you request from your employer? If you were already taking courses, which have you requested? (Circle numbers of all that apply)

- 1 REIMBURSEMENT FOR EDUCATIONAL EXPENSES
- 2 EXPENSES (Books, Tuition)
- 3 REIMBURSEMENT FOR TRAVEL TO CLASSES
- 4 CHANGES IN MY WORK SCHEDULE
- 5 LEAVE OF ABSENCE WITHOUT PAY
- 6 OTHER (specify)

Q 14 If you were to enroll in academic credit courses, what changes, if any, would you expect to make in your job? If already enrolled, answer in terms of changes made. (circle all that apply)

- 1 WOULD CHANGE JOBS WITHIN MY AGENCY OR INSTITUTION
- 2 I WOULD MOVE TO ANOTHER AGENCY OR INSTITUTION
- 3 I WOULD DECREASE MY HOURS OF WORK EACH WEEK
- 4 I WOULD STOP WORKING WHILE GOING TO SCHOOL
- 5 I WOULD MAKE NO CHANGES
- 6 OTHER (specify) _____

Q 15 Once you get a BSN degree, in what ways, if any, would you expect your situation to change? (circle numbers of all that apply)

- 1 I WOULD EXPECT NO CHANGES
- 2 I WOULD EXPECT AN INCREASE IN SALARY
- 3 I WOULD EXPECT AN INCREASE IN RESPONSIBILITY
- 4 I WOULD PROBABLY CHANGE JOBS
- 5 I WOULD STAY IN THE SAME JOB BUT BE MORE EFFECTIVE IN IT
- 6 I CAN'T PREDICT WHAT CHANGES MIGHT OCCUR
- 7 OTHER (SPECIFY) _____

Q 16 If you were to enroll (or if you are already enrolled) in courses for the BSN, would you expect to need additional financial support? (circle number)

- 1 NO
- 2 YES

> if YES, Please indicate your most likely source of additional financial support (circle all that apply)

- 1 SPOUSE'S INCOME
- 2 ASSISTANCE FROM PARENTS
- 3 PERSONAL OR FAMILY SAVINGS
- 4 GOVERNMENT INSURED STUDENT LOAN
- 5 REGULAR LOAN FROM BANK, CREDIT UNION, SAVINGS & LOAN
- 6 SCHOLARSHIP OR GRANT
- 7 OTHER _____

Q 17 If you decide to seek a BSN (or if you are already doing so), which class schedule would you prefer? (circle all numbers that apply)

- 1 FULL TIME, DAY CLASSES (12 OR MORE HRS/WK)
- 2 FULL TIME, EVENINGS CLASSES (12 OR MORE HRS/WK)
- 3 PART TIME, (LESS THAN 12 HRS PER WEEK

_____ >if PART TIME, HOW MANY HOURS PER WEEK? _____

_____ >IF part time, which time period do you prefer?

(circle all numbers that apply)

- 1 WEEKDAYS BETWEEN 8 A.M. AND 5 P.M.
- 2 WEEKDAYS AFTER 6 P.M.
- 3 WEEKEND BETWEEN 8 A.M. AND 5 P.M.
- 4 WEEKEND AFTER 6 P.M.
- 5 SEVERAL WEEKS DURING THE SUMMER
- 6 OTHER (specify) _____

Q 18 How many one way miles would you be willing to travel to attend class?

- 1 LESS THAN 10 MILES
- 2 10-25 MILES
- 3 26-40 MILES
- 4 41-60 MILES
- 5 MORE THAN 60 MILES

Finally, the last few questions will help us group your answers for analysis.

Q 19 First, in what year did you graduate from your basic (diploma or associate degree) nursing program?

_____ YEAR OF GRADUATION

Q 20 Which kind of basic nursing program did you attend?(circle one)

- 1 A DIPLOMA PROGRAM
- 2 AN ASSOCIATE DEGREE PROGRAM
- 3 OTHER (specify) _____

Q 21 Was your school located in Oklahoma? (circle number)

- 1 NO
2 YES

Q 22 How many years have you been actively employed in nursing (circle one)

- 1 LESS THAN 1 YEAR
2 1 TO 3 YEARS
3 4 TO 10 YEARS
4 11 TO 20 YEARS
5 MORE THAN 20 YEARS

Q 23 In which types of agencies or institutions have you worked and do you now work?

Past Experiences	Present Jobs	
1	2	1 HOSPITAL MORE THAN 100 BEDS
2	2	2 HOSPITAL LESS THAN 100 BEDS
3	3	3 LONG TERM CARE FACILITY
4	4	4 PSYCHIATRIC HOSPITAL/CLINIC
5	5	5 PUBLIC HEALTH DEPARTMENT
6	6	6 PHYSICIAN'S OFFICE
7	7	7 PRIVATE DUTY
8	8	8 PRIMARY CARE FACILITY
9	9	9 PUBLIC SCHOOL
10	10	10 OUTPATIENT DEPT
11	11	11 BUSINESS OR INDUSTRY
12	12	12 NURSING EDUCATION PROGRAM
13	13	13 OTHER (specify) _____

Q 24 What is your marital status? (circle number)

- 1 MARRIED
2 NEVER MARRIED
3 DIVORCED OR SEPARATED
4 WIDOW OR WIDOWER

Q 25 Do you have children now living in your home?

- 1 NO
2 YES _____ >if YES, How many? _____
Age of Youngest? _____

Q 26 In what county do you now live?

_____ COUNTY

Q 27 In what year were you born?

_____ YEAR OF BIRTH

Q 28 Is there anything else you'd like to tell us
about your needs and ideas concerning BSN
Programs for registered nurses?

THANK YOU FOR YOUR ASSISTANCE

VITA

Janet Murphy Lewis

Candidate for the Degree of

Doctor of Education

Thesis: BARRIERS IN OBTAINING A BACHELOR OF SCIENCE DEGREE
AS PERCEIVED BY NURSES PREPARED BELOW THE
BACCALAUREATE LEVEL

Major Field: Occupational and Adult Education

Biographical:

Personal Data: Born at Bell Island, Newfoundland,
Canada, August 29, 1939, the daughter of Vincent
and Mary Murphy

Education: Received nursing diploma from St. Clare's
Mercy Hospital School of Nursing, St. Johns,
Newfoundland in 1964; received a Bachelor of
Science in Nursing degree from Boston College,
Newton, Massachusetts in 1974; received a Master
of Education degree in Adult and Continuing
Education from Boston State University in 1976;
received a Master of Science degree in Community
Health Nursing in 1981; completed the requirements
for the Doctor of Education degree at Oklahoma
State University in December, 1988.

Professional Experience: Assistant Professor of
Nursing, Oklahoma City University, Oklahoma City,
1983 to Present; Nursing Administrator, Stephen J.
Ott Center, Medfield, Massachusetts, 1979-1982;
Head Nurse, Admission Unit, Medfield State
Hospital, Medfield, Massachusetts, 1978-1979;
Coordinator and Staff Nurse, Boston Visiting
Nurse, Boston, Massachusetts, 1976-1978 and 1965-
1976.

Professional Organizations: Sigma Theta Tau; American
Nurses Association; National League of Nurses; and
Public Health Association.