

COMPARISON OF PROFESSIONAL SOCIALIZATION AMONG THE DIPLOMA AND DEGREE NURSING STUDENTS: A PILOT STUDY

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ABSTRACT

The evolution of nursing profession and education has taken its pace over the past years. Therefore, with the changes in nursing education over the years, the level of professional socialization among the students has become an area of interest. The objectives of this pilot study were to explore and compare the level of professional socialization between the diploma and degree nursing students (first year and final year) using the measuring tool of NPVS-R as well as to identify the demographic variables related to the level of professional socialization among the nursing students. From this pilot study, it was found that there was no significant difference in the level of professional socialization between the diploma and degree nursing students ($p = 0.133$). With regards to the demographic variables related to the level of professional socialization, significant difference was found only for the variable of father's educational level ($p = 0.035$).

Keywords: *Professional Socialization, Diploma and Degree Nursing Students, Nursing Education*

INTRODUCTION

Nowadays, the nursing education has undergone transformation from the original traditional hospital-based apprenticeship to the current concept-based education in college or university settings. Furthermore, the nursing education has now moved from diploma of nursing program to bachelor of nursing programs. With all these changes in the form of nursing education, many people start to question the effectiveness of these different types of nursing programs with regard to prepare their students for the nursing profession. Therefore, comparisons of the level of professional socialization among nursing students from different nursing programs should be looked into.

DEFINITIONS OF PROFESSIONAL SOCIALIZATION

Various definitions of professional socialization appeared in the literature. Professional socialization is the complex process by which a person acquires the specialized knowledge, skills, attitudes, sense of occupational identity, values, norms, and interesting characteristics of a profession (Danielson, 1985; Cohen, 1981; Bragg, 1976). This process involves the internalization of the values and norms of the group into the person's own behavior along with self

conception as well help to integrate the cognitive and affective domains of professional performance that governs individual behavior.

OBJECTIVES OF THIS STUDY

The objectives of this study were to validate Nurses Professional Values Scale – Revised (NPVS-R) by comparing the level of professional socialization among the diploma and degree nursing students as well as identifying the demographic variables related to the level of professional socialization among the students.

LITERATURE REVIEW

No overall differences in the level of professional socialization were revealed when Nurses Professional Values Scale (NPVS) was utilized to compare the professional values between the senior baccalaureate and associate degree nursing students (Hayes, 2006; Martin, Yarbrough & Alfred, 2003). Clark (2004) utilized Nursing Activity Scale (NAS) and remarked that no significant difference was found in professional socialization between graduating students of two-plus-two baccalaureate completion nursing programs and of generic BSN programs. Nursing Role Conception Scale was used by Way (1981) and revealed no difference in the

role conception scores of those students completing four years of university nursing education (UBC-4) and for those who entered as registered nurses and completed the last two years of the program (UBC-2). A longitudinal study done by Taylor, Westcott, and Bartlett (2001) using the Corwin's Role Orientation Scale also revealed no statistically significant differences in role orientation between nursing graduates and diploma nursing students.

On the other hand, Danielson (1985) found that the baccalaureate students' socialization scores more closely approximated to those of the faculty than the associate degree students while using Nurses' Professional Orientation Scale (NPOS). Lynn (1979) modified NPOS and found that the associate degree students were more traditional in their professional socialization than were the baccalaureate degree students. Similarly in Thomas' study (1978), where NPOS was used, it was found that the associate degree and diploma programs were traditionally-oriented while the baccalaureate program for Registered Nurses held the most nontraditional orientation. In the cross-sectional study done by Shinyashiki *et al.*, (2006), the results revealed that a majority of changes occurred between the second and third year of the course.

METHODOLOGY

This pilot study on comparison of the level of professional socialization between diploma and bachelor of nursing students was conducted in Segi University College and International Medical University (IMU) in Kuala Lumpur, Malaysia. A total of 40 nursing students took part in this pilot study, out of which 10 (25.0%) was first year diploma students from Segi University College, 10 (25.0%) was final year diploma students from Segi University College, 10 (25.0%) was first year bachelor students from IMU, and 10 (25.0%) was final year bachelor students from IMU. Data collection was conducted using a questionnaire which comprised of Demographic Data Questionnaire (DDQ) and Nurses Professional Values Scale – Revised (NPVS-R) developed by Weis and Schank (2009). The questionnaires were distributed in the classroom after the classes and collected on-the-spot after the students have completed filling it. The Predictive Analytics Software (PASW) Statistics 18 program was used to carry out all the statistical analyses. Student *t*-test and one-way analysis of variance (ANOVA) were carried out to compare the differences among the student groups.

RESULTS

Section 1: Demographic Data Questionnaire (DDQ)

The first section of the questionnaire is Demographic Data Questionnaire (DDQ) which looked into the demographic characteristics of the students. The characteristics included age, gender, race, nationality, marital status, number of children, highest educational level, past working experience, parents' educational level and occupation, main reason of enrolling in nursing, and future goal in nursing.

Table 1 : The demographic characteristics of the students

A. Demographic Characteristics of the Students (N=40)

Characteristics	Frequency (N)	Percentage (%)
Age groups (years)		
16-20	14	35.0
21-25	25	62.5
26-30	1	2.5
Gender		
Female	34	85.0
Male	6	15.0
Race		
Malay	6	15.0
Chinese	23	57.5
Indian	8	20.0
Others	3	7.5
Nationality		
Malaysians	40	100.0
Non - Malaysians	0	0.0
Marital status		
Single	38	95.0
Married	2	5.0
Number of children		
0	39	97.5
1	1	2.5
Highest educational level		
Secondary education	13	32.5
Pre -university education	26	65.0
Tertiary education	1	2.5
Past working experience		
Have no working experience	14	35.0
Have worked in health- related field	6	15.0
Have worked in non health-related field	17	42.5
Have worked in both health- and non health-related fields	3	7.5

B. Family History of the Students (N=40)

Characteristics	Frequency (N)	Percentage (%)
Father's highest educational level		
- Primary education	4	10.0
- Secondary education	25	62.5
- Tertiary education	11	27.5
Father's occupation		
- Non health-related field	40	100.0
Mother's highest educational level		
- Primary education	9	22.5
- Secondary education	28	70.0
- Tertiary education	3	7.5
Mother's occupation		
- Non health-related field	40	100.0
Main reason of enrolling in nursing		
- Good job prospects	18	45.0
- Interested in nursing	17	42.5
- Parents' influence	4	10.0
- High income	1	2.5
Future goal in nursing		
- Further education in nursing	23	57.5
- Registered nurse	13	32.5
- Head nurse	4	10.0

Section 2: Nurses Professional Values Scale – Revised

The second part of the questionnaire was related to information to measure the nurses' professional values. The Nurses Professional Values Scale – Revised (NPVS-R) developed by Weis and Schank (2009) was employed for this purpose. The NPVS-R consisted of 26 items. Each item has a short description reflecting the professional nursing values based on the American Nurses Association Code of Ethics for Nurses. The students were to rate the importance of each professional values with a 5-point Likert scale ranging from 1 (not important) to 5 (most important).

Total Scores on NPVS-R

Table 2: Total Scores on NPVS-R among the Nursing Groups

Student Group According to Level in Programme	Mean Total Scores on NPVS-R (M)	Standard Deviation (SD)
Final year degree	115.5	8.10
First year diploma	108.8	14.05
Final year diploma	105.7	10.1
First year degree	101.9	17.34

As shown in Table 2, in this study, the final year degree nursing students had the highest mean total scores on NPVS-R (M = 115.5, SD = 8.10) followed by the first year diploma nursing students (M = 108.8, SD = 14.05). Next, the final year diploma nursing students had the mean total score of 105.7 (SD = 10.1). The first year degree nursing students had the lowest mean total scores of 101.9 (SD = 17.34).

Scores of Items on NPVS-R

The scores of each item on NPVS-R are summarized in Table 3.

Table 3: Mean Scores of Items on NPVS-R

Professional Values	Mean (M)	Standard Deviation (SD)
Accept responsibility and accountability for own practice	4.60	0.63
Seek additional education to update knowledge and skills	4.58	0.64
Maintain competency in area of practice	4.55	0.55
Maintain confidentiality of patient	4.55	0.82
Practice guided by principles of fidelity and respect for person	4.50	0.68
Protect moral and legal rights of patients	4.47	0.75
Protect health and safety of the public	4.47	0.72
Safeguard patient's right to privacy	4.45	0.71
Provide care without prejudice to patients of varying lifestyle	4.37	0.77
Promote equitable/fair access to nursing and healthcare	4.32	0.80
Engage in ongoing self evaluation	4.27	0.82
Assume responsibility for meeting health needs of a culturally diverse population	4.23	0.83
Promote and maintain standards where planned learning activities for students take place	4.18	0.68
Initiate actions to improve environments of practice	4.15	0.77
Establish standards as a guide for practice	4.15	0.74
Recognize role of professional nursing associations in shaping healthcare policy	4.15	0.83
Request consultation/collaboration when unable to meet patient needs	4.05	0.85
Advance the profession through active involvement in healthrelated activities	3.98	0.92
Act as a patient advocate	3.95	1.11
Discuss with other healthcare workers about questionable or inappropriate practice	3.93	0.92
Protect rights of participants in research	3.90	0.98
Participate in public policy decisions affecting distribution of resources	3.78	0.83
Participate in activities of professional nursing associations	3.70	1.07

Participate in peer review	3.70	0.99
Participate in nursing research and/or implement research findings appropriate to practice	3.68	0.89
Refuse to participate in care if in ethical opposition to own professional values	3.33	1.33

Amongst the 26 professional values, the value “accept responsibility and accountability for own practice” had the highest mean score of 4.60 (SD = 0.63) followed by the value “seek additional education to update knowledge and skills” with a mean score of 4.58 (SD = 0.64). The third highest mean score was 4.55 as achieved by the value “maintain competency in area of practice” (SD = 0.55).

On the other hand, the lowest mean score was 3.33 as achieved by the value “refuse to participate in care if in ethical opposition to own professional values” (SD = 1.33) followed by the value “participate in nursing research and/or implement research findings appropriate to practice” with a mean score of 3.68 (SD = 0.89). The third lowest mean score was 3.70 as achieved by the values of “participate in peer review” (SD = 0.99) as well as the value “participate in activities of professional nursing associations” (SD = 1.07).

Comparison of the Level of Professional Socialization among the Diploma and Degree Nursing Students

One-way analysis of variance (ANOVA) test with the alpha significance value set at 0.05 was utilized to compare the scores on NPVS-R achieved by the students. This was followed by the Bonferroni post-hoc test to find out which groups of students showed significant differences.

Table 4: ANOVA Analysis of Scores on NPVS-R and Groups of Students

Factors		Sum of Squares	df	Mean Square	F	Significance
Total Scores	Between Groups	993.875	3	331.292	1.990	0.133
	Within Groups	5993.100	36	166.475		
	Total	6986.975	39			

As shown in Table 4, the total scores on NPVS-R did not differ significantly across the four groups of nursing students, $F(3, 36) = 1.99, p = 0.133$. As the p value obtained (0.133) was higher than the alpha value of 0.05, therefore the null hypothesis was accepted. Thus there is no difference in the level of professional socialization among the first year and final year diploma and degree nursing students.

Differences in NPVS-R Scores by Demographic Characteristics

For the demographic variables with two subgroups, student t-test was performed to compare the differences in scores among the nursing students. One-way ANOVA was carried out to compare the differences in scores among the nursing students with respect to demographic variables with more than two subgroups.

Only the variable of father's highest educational level showed significant differences across the four groups of nursing students ($F[2, 37] = 3.674, p = 0.035$). Although no significant difference between groups was revealed when Bonferroni post-hoc test was done, it was remarkably interesting to note that students whose fathers were with the highest educational level of primary education had the highest mean score on NPVS-R ($M = 117.50, SD = 10.15$) compared to those of secondary education ($M = 103.88, SD = 13.84$) and those of tertiary education ($M = 113.82, SD = 9.62$).

DISCUSSION

Level of Professional Socialization between the First Year and Final Year Diploma and Degree Nursing Students

It was found that the total scores on NPVS-R did not differ significantly across the four groups of students ($F[3, 36] = 1.99, p = 0.133$). This was related to the fact that the students were four different individual groups with their own characteristic values. It could also be due to the fact that they have enrolled in the nursing program with different baseline values.

There was no significant difference found in the level of professional socialization between the final year degree ($M = 115.50, 95\% \text{ CI } [109.71, 112.26]$) and the final year diploma nursing students ($M = 105.70, 95\% \text{ CI } [98.47, 112.93]$). This finding was consistent with the studies done by Martin *et al.* (2003), Hayes (2006), Leduc and Kotzer (2009), as well as Taylor *et al.*, (2000). One possible explanation might be that the diploma and degree nursing students in Malaysia are required to undergo the same amount of clinical practice (45-55%) with the same disciplines and clinical outcomes (Nursing Board Malaysia, 2010). In addition, all nursing students from both nursing programs are required to fulfill 100% clinical experience exposure in the practical sessions in order to sit for the licensure exam (Nursing Board Malaysia, 2010). Besides that, Thomas (1978) also remarked that

at the time of graduation from a basic nursing program, nursing students will have similar views of nursing profession.

For the demographic variables, only the mean scores for the variable of father's highest educational level differed significantly across the four groups of students ($F [2, 37] = 3.674, p = .035$). Although Bonferroni post-hoc test revealed no significant differences between the student groups, it was remarkably interesting to note that students whose father's highest educational level of primary education had the highest mean total score (117.50 ± 10.15) compared to that of tertiary education (113.82 ± 9.62) as well as than that of secondary education (103.88 ± 13.84). This was consistent with Danielson's study in 1985 which remarked that father's education negatively correlated with students' socialization scores. Students having more highly-educated fathers did not have the idealistic role concept of a professional compared to those with less-educated fathers. This could be due to the fact that nursing has always been misperceived as a low "dirty" job. Therefore, fathers with higher educational background would oppose to their children taking up nursing.

IMPLICATIONS OF THE STUDY

From the finding of the present study it can be said that there was no significant difference in the level of professional socialization between the diploma and degree nursing students with respect to meaningful implications to the nursing education. The results

indicated that different levels of basic nursing education programs, be it diploma or bachelor, produce students with the same level of professional socialization as the end products. The bachelor of nursing program is one year longer in duration than the diploma and contains additional nursing modules including professionalism, management and leadership, research and statistics, laws and ethics, as well as nursing models compared to the diploma of nursing students. In spite of that, findings from this pilot study suggested that students from different programs (diploma or degree) achieved high level of professional socialization. It strongly suggested that both categories of nursing education provide significant as socializing nurses.

The reliability of the NPVS-R was estimated by calculating Cronbach's Coefficient Alpha value. The calculation with SPSS 18 program produced an alpha value of 0.958. Following the pilot study, changes in the structure of a few questions were made in the questionnaire so that the students could have better understanding. Besides that, the small sample of this study also indicated that in actual case a larger sample should be recruited to make meaningful comparisons and increase representativeness of the results.

CONCLUSION

From this study, it can be concluded that NPVS-R is a validated and reliable tool in measuring professional socialization.

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