Factors Influencing the High School Students' Choice of a Nursing Career in Bahrain: Development of a Best Practice Model for Nursing Recruitment

Eman A. Tawash

Royal College of Surgeons in Ireland

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Factors Influencing the High School Students’ Choice of a Nursing Career in Bahrain: Development of a Best Practice Model for Nursing Recruitment

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A thesis submitted to the School of Postgraduate Studies, Faculty of Medicine and Health Sciences, Royal College of Surgeons in Ireland, in Fulfilment of the Degree of Doctor of Philosophy

Supervisor: Professor Seamus Cowman

July 2016
DECLARATION

I declare that this thesis, which I submit to RCSI for examination in consideration of the award of a higher degree (Doctor of Philosophy in Nursing Education) is my own personal effort. Where any of the content presented is the result of input or data from a related collaborative research programme this is duly acknowledged in the text such that it is possible to ascertain how much of the work is my own. I have not already obtained a degree in RCSI or elsewhere on the basis of this work. Furthermore, I took reasonable care to ensure that the work is original, and, to the best of my knowledge, does not breach copyright law, and has not been taken from other sources except where such work has been cited and acknowledged within the text.

Signed: Eman Ahmed Tawash
RCSI Student Number: 11100761
Date: 26th July 2016
DEDICATION

This study is dedicated to my beloved husband Ghassan and my precious children Sarah and Isa, the three candles brightening my life.

To my parents, may their souls rest in peace. They raised me well, always believed in my abilities and gave me the courage to be the person I am today.
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ANA: American Nurses Association
BSc: Bachelor of Science
CE: Christian Era
CI: Confidence Interval
CAGO: Career and Academic Guidance Office
CGC: Career Guidance Counselor
CGPA: Cumulative Grade Points Average
CIO: Central Informatics Organization
GCC: Gulf Cooperation Council
GEM: Group Electronic Mentoring
HEC: Higher Education Council
HSS: High School Students
ICN: International Council of Nurses
KSA: Kingdom of Saudi Arabia
M: mean
MENA: Middle East and North African
MOE: Ministry of Education
MOH: Ministry of Health
N: Total number of sample
n: Portion number of the sample
NCCM: Nursing Career Choice Model
NHRA: National Health Regulatory Authority
NSNA: The National Student Nurses Association
OIT: Organismic Integration Theory
OLR: Office of Licensure and Registration
PBUH: Peace Be Upon Him
NURS-P.R.A.M.: Nursing-Positive Recruitment Arabic Model
Res: Respondent
RCSI: Royal College of Surgeons in Ireland
SD: Standard Deviation
SDT: Self Determination Theory
UAE: United Arab Emirates
UNDP: United Nations Development Programme
UK: United Kingdom
US: United States
WHO: World Health Organization
DEFINITIONS OF KEY TERMS

- Career guidance: Is a process that will help individuals know and understand themselves and the world of work in order to make career, educational, and life decisions.

- Culture: Is the system of shared beliefs, values, customs, behaviours and artefacts that the members of society use to cope with their world and with one another, and that are transmitted from generation to generation through learning (Culture & Religion, 2015).

- Extrinsic motivation: Is motivational behaviour aimed at achieving concrete reward or avoiding punishment (Natan & Becker, 2010).

- Intrinsic motivation: Is defined as motivational behaviour aimed at achieving a feeling of competence and control (Natan & Becker, 2010).

- Image: Is a mental representation of objects or events (Takase, 2005).

- Perception: Is a person’s awareness and understanding of sensory information conquered through interaction between past experiences, culture and the interpretation of the perceived.

- Paradigm: The beliefs and values which a particular research communities share about the type of phenomena, which can or cannot be researched, and methodologies to be adopted (Parahoo, 2006).

- Religion: Is an organized system of beliefs, ceremonies and rules used to worship a God.

- Mixed methods: Is an approach to research that combines multiple research strategies to address a research problem (Cowman, 2008).
SUMMARY

Background
In response to the shortage of nurses, the Kingdom of Bahrain continues to have high dependence on expatriate nurses to maintain the health services. Consistent with Bahrainization, the development and expansion of an indigenous nursing profession through increasing the number of Bahrainis working as nurses must be a health service priority. However, in attracting local candidates to study nursing, the public image of nursing in the Middle East continues to be of concern. The study aimed to identify factors that influence the high school students and their parents in Bahrain to choose the nursing profession as a future career. It also aimed to explore and test strategic interventions to promote nursing as a career in Bahrain.

Methods
A mixed methods research approach was used incorporating quantitative and qualitative dimensions. The study sample included high school students, students’ parents, career guidance counselors and nursing students. A one-group pretest-posttest design was also used to introduce a nursing recruitment intervention to a group of high school students. SPSS was used to analyse quantitative data, while Colaizzi’s (1978) methodology and Krueger’s (1994) framework were applied to analyse the qualitative data.

Findings
The study reported that generally, high school students, parents, career guidance counselors and nursing students have positive perceptions about nursing. However, nursing does not seem to be an attractive career option. It is proposed that the public perceptions of Bahraini people about nursing may be grounded in strong cultural influences and any efforts to improve the enrolment and retention of Bahraini nurses should consider enhancing the social values of the nursing profession.
Conclusion

This study is significant as it will place the perceptions and understanding of Bahraini people and culture in the centre of nursing promotion and recruitment. It will also be a new and insightful addition to the international literature. Some of the issues raised in the study are reflective of the core international literature; however there are fundamental issues particular to the Gulf region, which will require attention in a context of an overall nursing recruitment strategy for Arabic nursing. The recruitment model NURS-P.R.A.M. is new and is a uniquely Arabic creation. It is focused on recruitment to nursing in the region and in particular Bahrain. The model was built from the evidence developed through this dissertation.
ACKNOWLEDGMENTS

In the name of God, The most Gracious, the most Merciful.
First of all, I am so thankful to God, for giving me the strength, health and energy to complete this work.

I would like to express my sincere thanks and gratitude to Professor Seamus Cowman, for providing me with the best academic supervision and great deal of encouragement, endless listening and insightful advice and guidance. He was the person behind my inspirational thoughts with regards to this study. Thank you for believing in me and the importance of my work.

My sincere thanks to Professor Charles Docherty, who acted as a co-supervisor and head of school at the early years of my PhD. Thank you for all your guidance, advice, support, and for facilitating me with the time I needed to do my research.

I would like to say a huge thank you to all my expert colleagues from RCSI Bahrain, who were always there to respond to my calls for advice, guidance and support. Sincere thanks to Dr Hana Kadhom (my spiritual mother), Dr Anne Lindsey Waters, Dr Catherine O’Neill and Dr Hussain Nasaif.

I am grateful to RCSI Bahrain senior management and staff. Many thanks to Professor Sameer Otoom, President of RCSI Bahrain for providing me with all the support I needed to complete my study. Sincere thanks to all staff in the Learning Resource Centre, Communications, Community Engagement and Finance Department for their continuous support. I wish to acknowledge and express appreciation to RCSI Bahrain for providing me with two research grants during the time of my study.

My sincere appreciation is also expressed to the BDF Hospital, in particular Major General Professor Khalid Bin Ali Al-Khalifa for granting permission, and supporting me with all means to film my study video in the BDFRMS Hospital. Sincere thanks.
to Dr Ahmed Al-Ansari, Megala Ghandi and all the hospital staff for facilitating and supporting the filming of the video. Special thanks to the patients who volunteered to participate in the video.

Countless thanks to all those who participated in the study video. Many thanks to Danah Smith for representing the nurse educator as a nurse role model to inspire prospective candidates. Sincere thanks to RCSI alumni and BDF staff nurses Maryam BuDhahi, Ahmed Harb and Nazia AlOmari for portraying positive nursing images of Bahraini nurses. I am also grateful to Catherine Abouzaid for taking the role of the narrator for the video, and for her continuous support. Many thanks to all RCSI Bahrain students who willingly participated in the video.

Sincere thanks to Dr Khalifa Al-Musharraf and Mr. Hassan Al-Basri for supporting me with statistical advice and analysis. Thanks to Dr Ian Grey for helping me construct my questionnaires, David Whitford for advice regarding qualitative data analysis, and to Adrian Lydon for supporting me with his advice and expertise in producing the study video.

Without the unending support and encouragement of my many friends and colleagues, I fear this study would never have reached completion. Special thanks to Sultan Muhammad, Sumaya Faraj, Maryam Yaqoob, Dr Maryam Alaradi and Major Amal Shahab for their continuous support and encouragement.

I am especially grateful to the Ministry of Education for giving me the permission to conduct my study in high schools, and to the administrations of high schools who participated in the study for facilitating my research. Also to the Ministry of Labour for granting me with a scholarship to do my PhD.

I would also like to express my gratitude to the participants of this study; the RCSI nursing students of the 2006 cohort, the high school students, their parents and career guidance counselors who volunteered to participate in this study and deserve sincere thanks and acknowledgements for their participation.
An expression of gratitude is extended to my dear nursing students who are now staff nurses and future leaders, Asma Al-Najar, Noor Al-Nahham, Eman Al-Jahmi, Ameera Ahmed, Fatima Ayed, Aysha Sanad, Abdulla Qasim, Hamad Abdulla, Noora Munther and all those who never hesitated to provide their support to me.

Finally, a very special thank you goes to my husband and children, who lived every moment with me throughout the journey of my PhD. Without their support, unconditional love, patience and understanding none of this work would have been possible. I am so thankful to my brothers, sisters, grandparents, parents’ in-law and all my beloved family members who were surrounding me with their continuous care, support and prayers, I love you all.
FUNDING DISCLOSURE

This research received two research grants from RCSI Bahrain (USD 7,937 and 7,950) with special thanks and appreciation.

The Ministry of Labour, Bahrain funded the study by covering the annual registration fees, with special thanks and appreciation.
PRESENTATIONS AND PUBLICATIONS ARISING FROM THE RESEARCH

Publications


Oral Conference Presentations

- The 3rd Annual Middle Eastern Nurses and Partners in Caring Science, Aqaba, Jordan, 19-21 February 2014: “Does culture impact on nursing as a career choice in Bahrain?”

- RCSI Bahrain Annual Research Day, RCSI Bahrain, Kingdom of Bahrain, 11th November 2014: “Does culture impact on nursing as a career choice in Bahrain?”

Poster Conference Presentations

- 32nd Annual International Nursing & Midwifery Research Conference 2013, Royal College of Surgeons in Ireland, Dublin, 20-21 February 2014: “How do student nurses perceive the nursing profession in Bahrain?”

Published Conference Proceedings

Annual International Nursing & Midwifery Research & Education Conference, Dublin, Royal College of Surgeons in Ireland.


**Invited Presentations**

- University of Calgary in Qatar, Qatar, 26 October 2015: “Cultural Impact on Nursing Recruitment in Bahrain”.

SECTION 1
INTRODUCTION AND BACKGROUND
Chapter 1: Context for the Study

In general, the worldwide shortage of nurses has focused political and professional discourse on the current shortfall in the number of individuals who are pursuing nursing as a career and those who are leaving the profession. Such trends have serious implications on the health care industry as a whole. Similar to many other countries, the demand for more nurses in the Kingdom of Bahrain (Bahrain) is evident by a significant increase in the population; more specifically elderly people, the increased prevalence of chronic diseases and disabilities, and the eradication of infectious diseases which lead to the increase in survival rates of individuals accompanied by the increase in life span.

Faced with severe nursing shortages, nursing leaders from both the nursing education organizations and services have an obligation to call for a comprehensive assessment of the factors affecting decisions to enter, stay in or leave the profession. If these reasons are understood, appropriate actions will need to be implemented to encourage more individuals to enter and stay in nursing. No work from Bahrain has been published so far, neither on staff nurses satisfaction, or why nurses decide to stay or leave the profession. To date, only two research studies from Bahrain focusing on factors influencing nursing as a career choice amongst undergraduate nursing students has been published (Tawash & Cowman 2015, Tawash et al. 2012) (Appendix 1). Both publications have emerged from this PhD thesis. There is also a paucity of research work on factors affecting nursing promotion and recruitment across the Gulf region.

The national shortage of practicing nurses in Bahrain accompanied by low numbers of high school graduates entering the nursing programmes has been highlighted in this study. The overall goal of this study is to investigate factors influencing the choice of High School Students (HSS) in Bahrain of nursing as a career, and propose strategies to promote nursing as a career choice in Bahrain. At a time of severe nursing shortages, an understanding of the factors that
influence individuals to choose a career in nursing has important implications for selecting effective recruitment strategies to promote nursing as a career. These strategies should be geared to those significant factors of influence.

Bahrain is a small archipelago of 33 islands; the largest of which is Bahrain Island. It is located at the east coast of Saudi Arabia and has an area of 702 square kilometres (Kingdom of Bahrain National Report, 2013) and a population of 1,234,596 including 666,172 expatriates (Central Informatics Organization [CIO], 2010). The capital city of Bahrain is Manama. The official language is Arabic, however English is the main commercial language in Bahrain. The majority of population are Muslims, yet places of worship for other faiths also exist. According to The World Bank (2009), Bahrain is on the list of high income countries. Bahrain climate is generally described as hot, highly humid summers with mild winters where rainfall is scarce.

1.1 Education and Career Guidance in Bahrain
Bahrain has the “oldest public education system in the Arabian Peninsula” (Ministry of Education [MOE], 2016). The literacy rate of Bahrain has been reported at 94.6% (CIO, 2010). At the beginning of the 20th century, the only form of education in Bahrain was held in Qur’anic schools which were called “Kuttab”. Children and youth were sent to these traditional schools to learn the reading of the Holy Qur’an (MOE, 2016). Only after World War I, a demand for modern educational institutions in Bahrain appeared (Oxford Business Group, 2008). Modern public school system began in Bahrain when two boys’ schools were founded in 1919 and 1926, followed by the opening of the first public school for girls in 1928. These schools were managed by an Education Committee, which was established by several leading Bahraini merchants until 1930, when the Bahraini government took control due to financial causes. According to the MOE statistics (2012a), public schools have a total of 126,981 students registered.
It is obligatory for children between the ages of 6 and 14 to join school education (Oxford Business Group, 2008). All Bahraini citizens receive free education in the public (government) system with free textbooks provided by the Bahraini MOE. In public schools, coeducation is not used, which means that girls and boys are segregated into separate schools. Therefore, the public schools are divided into boys’ government and girls’ government schools. The public system includes six-year primary schools, three-year intermediate schools, and three-year secondary schools (high school). There are private schools established in Bahrain in addition to the public schools, which are also overseen by the MOE. The private schools are divided into two types, national schools which provide both Arabic and English curricula, and international schools which offer international certificates and mainly aim to provide education for the children of the non-Bahraini citizens.

Bahrain also encourages institutions of higher education. The first group of students sent abroad for higher education was in 1928 (Al-Muraikhi, 1991). As the pool of Bahraini nationals receiving advanced degrees increased, the higher education started in Bahrain in 1966 by the opening of the Teachers’ Institute, which aimed to prepare school teachers. In 1987, Bahrain University; the oldest and biggest public university, has been established to offer higher education in a number of disciplines including science, literature, engineering and business studies (Al-Naser, 1999). Today, many government and private universities have been established in Bahrain offering standard undergraduate and graduate education. These universities are regulated by the Higher Education Council (HEC) in Bahrain.

Systematic career guidance is considered a new phenomenon in Bahrain, in both the public and private schools. School career guidance evolved as a result of the publication of Bahrain Economic Vision 2030, aiming to graduate students who are competent to meet the general development requirements. School guidance aims to create career awareness and help students choose suitable careers that match their interests and abilities. The guidance services start at the intermediate schools
and continue through school years and up to graduation to help students prepare for work or university.

The Career and Academic Guidance Office (CAGO) has become a vital component in all public high schools specifically. The Office is directed by the Academic and Career Counseling Unit in the MOE. The Unit prepares the strategic and operational plans for career guidance in schools and review them yearly. It also guides, monitors and supervises the career guidance activities in schools, provides training for the persons involved in providing the career guidance, participates in organizing career fairs and exhibitions, communicates with the public through the media to increase the awareness about career guidance, and conducts research and reports related to career guidance.

The CAGO includes a Career Guidance Counselor (CGC), and an Academic Counselor who mostly deals with students’ academic wellbeing and provides them with the social and psychological support they require to succeed academically. The CGC is a trained person who takes the responsibility for providing planned career guidance services that are in line with the strategic plans for the MOE. The CGC helps students determine their interests and abilities to be better able to make future decisions related to their careers. In addition, CGC organizes career guidance activities such as lectures, workshops, site visits to universities and work places. The guidance activities aim to help students determine their own aptitudes, interests and abilities, and therefore to identify the specialist fields which best suit them. The activities also aim to equip the students with the skills required to help them transfer smoothly from high schools to universities, training institutes or the labor market.

1.2 The Development of Health Care Services in Bahrain
Bahrain was a pioneer in the Arabian Gulf region to establish health services at the beginning of the 20th century (Tawash et al., 2012). Government services started in 1925 by the opening of a small government clinic to treat injured pearl divers. An
Indian doctor was appointed in that (World Health Organization [WHO], 2007). A Preventive Care Directorate, which later became the “Public Health Directorate”, was established in the same year (Ministry of Health [MOH], 2008). It provided preventive care against the widely spread communicable diseases during those years; such as malaria, tuberculosis and typhoid. After oil was discovered in Bahrain in 1932, a private hospital was built by Bahrain Petroleum Company for its staff, which represented the first planned medical provision (WHO, 2007). The Department of Health, which later became the MOH, was established in 1938 by the government of Bahrain. That laid the ground for the initiation of preventive services together with vaccination against small pox; which was spreading in the early 1940s. In 1940, the first formal government hospital “Al Naim Hospital” was opened, followed by a maternity hospital and child and mother care centres. As a result, the budget of health services rose from 24,200 Rupees (the old currency in Bahrain) in 1941 to 45,300 Rupees in 1945 (Al-Muraikhi, 1994).

The rapid increase in population; from 74,040 in 1941 to 118,734 in 1959 (growth of over 50% in less than 20 years) (CIO, 2000); which could be attributed to the improved quality of health services, which helped promote the health of population in general and alleviate the spread of communicable diseases (WHO, 2007). The need for the development of larger modern health services created by the expansion of Bahrain’s economic sector gave rise to the construction of Salmaniya Hospital in 1959. In addition, the health services goals in Bahrain expanded to incorporate the provision of primary health care for citizens. This initiative came after Bahrain has joined the WHO in 1967. With the announcement of Alma Ata declaration in 1978, the achievement of “health for all” became the health services’ goal in Bahrain and the drive to achieve this goal was based on building, equipping and staffing health centres all over Bahrain (Al-Muraikhi, 1994). The quality of care was continuously being emphasized with further development of medical audits, bed utilization, diagnostic tools and evaluative procedures (Al-Muraikhi, 1994).
At present, Bahrain has developed a prominent international position in health fields. Good progress has been made by the health care system, through the achievement of improved quality outcomes and solid infrastructure for health care (MOH, 2008). In line with the WHO global objectives, all population receive comprehensive health care. Bahrain exhibited an infant mortality of 7.6/1000 live births and a life expectancy of 74.8 (more than 40% longer, when compared to the 1950s) which are comparable to the health indicators of developed countries (WHO, 2007). Over the years, communicable diseases were controlled and Bahrain has managed to reach 100% coverage of basic vaccines.

In the last few years, there has been rapid growth in the private sector in Bahrain, however it only represents 10% of health care services in Bahrain; which is limited when compared to the public sector. The aspiration in future is that, health services are provided by the private health sector while the public sector takes the role of policy making and regulation (WHO, 2007).

The excellent infrastructure in all health areas, as well as efforts to develop women and high literacy rate, have led to an excellent health status reflected by major international health indicators. However, a continued growth in the numbers of patients with chronic diseases such as diabetes, cancer and cardiovascular has been witnessed in Bahrain (WHO, 2007), a similar case to those in the developed countries. In spite of all the achievements to date, significant challenges are still facing the health care system in Bahrain. Because of demographic factors; such as aging, growth of population, and the change in disease mix with the ever-increasing prevalence of chronic diseases, the demand for health care in Bahrain is rising rapidly. One of the most significant challenges for the health system in Bahrain is to prepare a health force capable of attaining its health objectives (MOH, 2008).
1.3 The Evolution of Nursing and Nursing Education in Bahrain

During the early 20th century, health services in Bahrain were almost exclusively provided by non-Bahraini medical professionals, and it was not until 1931 that the first qualified nurse recruited from India was appointed to work in Bahrain. In formally establishing health services, a major objective was to provide well trained and qualified local manpower with the abilities to assume the key roles in developing and running the health services. The period between 1941 and 1961 witnessed the qualification of the first Bahraini medical and nursing personnel (Al-Muraikhi, 1994). Extensive training and educational opportunities have been provided to qualify Bahrainis in the different health fields. Murad (2009) reported that the first native Bahraini nurse and midwife, Fatima Al Zayani was appointed in 1941 to become the first local nurse in Bahrain and the Arab Gulf countries. In addition, Habib Mohammed was sent to London in the early 40s to be trained as the first male Bahraini nurse. In 1959, more nurses were trained locally. Today, numerous Bahraini nurses, doctors and other health personnel have received their degrees in various fields of studies. Many reached the highest level in their specializations (Al-Muraikhi, 1994).

The establishment of Salmaniya Medical Complex and the initiative of primary health care increased the demand for local health professionals including nurses. The development of health personnel became an area of utmost importance to the MOH (MOH, 2007). Prior to 1959 there had been informal training for Bahraini girls working in government hospitals as assistant nurses. Al-Muraikhi (1994) historically outlined the formal development of nursing education in Bahrain in 1959, in response to the demand for more trained Bahraini nurses. This gave rise to the first Nursing School established in the Arabian Gulf region; which offered a 4 years nurse training programme.

In the 1960s, Bahrain witnessed development and expansion of health services, which resulted in a demand for more qualified nurses (Tawash et al., 2012). In 1973, the Kanoo Nursing School was opened to replace the above and trained 135
nurses, both males and females (Al-Naser, 1999). As the demands for nursing services continued to grow, there was a crucial need for a central training institute to prepare more health professionals in nursing and allied health (MOH, 2007). The College of Health Sciences replaced Kanoo Nursing School in 1976, which was instrumental in providing training to Bahraini citizens, not only in nursing, but also in other health sciences. The number of graduates from all three nursing schools increased from four general nurses in 1964 (Al-Muraikhi, 1994) to 2187 in 1998 (Al-Naser, 1999). In the 1970s, nurses from Bahrain were sent abroad to obtain nursing specializations (Tawash et al., 2012), until the College of Health Sciences started specialist courses such as midwifery, psychiatric, and community health (Al-Naser, 1999). In 1984, a two years Bachelor in Science (BSc.) nursing completion programme was launched and only in 2007, the College of Health Sciences introduced a programme which awarded an undergraduate BSc. in Nursing.

The development of competent, skilled health personnel including nurses has been and continues to be a priority in all countries of the region. In the process of meeting the quantitative demands for nurses in Bahrain, permission has been recently granted for private institutions of higher education to offer health-related programmes (WHO, 2007). Governed by the Royal College of Surgeons in Ireland, the Royal College of Surgeons in Ireland-Bahrain (RCSI Bahrain), was a pioneer to offer programmes for nursing education in 2006, through the School of Nursing and Midwifery. The programme aims to graduate competent nurses who can meet the current health needs and future challenges. Programmes offered by health training institutions are accredited by the MOE through the HEC in Bahrain. Further, an educational Quality Assurance body was established in 2007 by the Economic Development Board to follow up on adherence to standards in higher education (WHO, 2007). While this progress is impressive, the current and projected changes in health needs and health delivery systems make it imperative to continue strengthening nursing and midwifery. It is crucial that nursing education
programmes in Bahrain respond to these changing health care needs and delivery systems and prepare the nurses needed for the future (WHO, 1998).

**Nursing regulation in Bahrain**

The protection of the health of the public depends on both, the human resources as well as institutionalized systems regulating health professionals’ practices (Gezairy & Danzon, 2002); these include nurses and midwives. Employers and health service administrators have a responsibility to ensure that the health care providers they employ are competent to provide care which is at standards acceptable to the public; the recipients of care (Bryant, 2005). The MOH was established to take responsibility for planning, policy-making, and regulating the health services. The Government of Bahrain regulates health services in order to achieve national health objectives and guide private activities (MOH, 2008).

Initially, regulation of nursing and other health professions was a role conducted within the MOH. The Office of Licensure and Registration (OLR) was established in 1991 and was “responsible for regulation, licensing and re-licensing, accreditation and other issues related to the regulation of health professions including nursing” (Tawash et al., 2012, p.82). The OLR was replaced by the National Health Regulatory Authority (NHRA) in 2010, which functions independently from the MOH.

In 1981, Bahrain became a member of the Gulf Cooperation Council (GCC) which includes the five neighbours; Kingdom of Saudi Arabia (KSA), United Arab Emirates (UAE), Kuwait, Qatar and Oman. Given this fact, the public health system in Bahrain has collaborative relationships with other public health systems of the gulf region in terms of health service policy. The GCC Countries implemented many of the WHO policies collectively. “Based on the GCC regulations, Bahrain has enacted a statue that regulates the registration and licensure of nurses and midwives. Although the statue is enacted as part of an umbrella law covering the allied health professions, nursing and midwifery, each profession had its own implementing resolution” (Tawash et al, 2012, p.82).
Bahrain national code of professional conduct for nurses was developed by the OLR, in collaboration with the past Bahrain Nursing Society in 2002 (Tawash et al., 2012). This code aims to serve as a framework for professional conduct for those entering the nursing profession, nurses with the profession as well as the public. The code has identified accountability, dignity, confidentiality and privacy as generally encompassing and relevant values to provide guidance for decision making concerning ethical matters (OLR, 2002).

It is also essential that nursing regulation is linked with nursing education and practice competencies, if nurses are to provide care which is competent and safe. Guided by the World Health Assembly and the Regional Committee for the Eastern Mediterranean (2008) resolutions, as well as international trends in nursing education, changing health situation and socio-cultural characteristics in the region (Gezairy 1998), Bahrain identified minimum educational standards for basic and post basic nursing education. At present, to ensure the graduation of competent nurses, the HEC and NHRA are responsible for accrediting nursing education programmes and assessing the quality of the educational processes.
Chapter 2: Background to the Study

Internationally, nursing as a profession has undergone change over the recent decades. According to Berman & Snyder (2012) the dramatic changes in nursing occurred in response to societal needs and health care demands resulting in a shortage of health professionals and particularly nurses. Health policy experts predict that during the next 30 years, the current shortage of nurses will worsen (Tawash et al., 2012). Yeager & Cheever (2007) suggested that the very few young students joining nursing programmes is one important reason for the shortage.

Nursing shortages are reported not only in Bahrain, but many countries of the world have similar shortages of health professionals (International council of Nurses [ICN], 2002). According to WHO (2007), to meet current and future demands, efforts are being taken to assess the needs and distribution of nurses in order to resolve the shortage. The establishment of the School of Nursing and Midwifery in RCSI Bahrain is one proactive measure in addressing the requirement for qualified nurses in Bahrain and the gulf countries. However, the main challenge is to encourage more HSS to join the nursing profession. The development of skilled competent nurses is a priority in all countries of the East Mediterranean Region (Gezairy, 1998), yet the ability to attract the candidates to study nursing has always been difficult. Several factors have impacted on the recruitment of nursing in Bahrain; one of the most important reasons is that very few high school graduates choose to study nursing, and students need to be encouraged to consider nursing as an option. Sponsorship is available in Bahrain and this presents a positivity for nursing development.

2.1 Requirements for Nurses in Bahrain

The preparation of highly qualified health care providers has been given more attention since the establishment of modern health services. Currently in Bahrain, there is less dependence on expatriate nurses than it is in other countries of the
GCC. According to the most recent health statistics, there are 3,173 registered nurses in Bahrain, of which 49% are Bahraini nationals (Health Information Directorate, 2013). Bahrainization; which is a government policy that aims at maximising the dependency on Bahraini citizens in work places, has been a government policy over the years, however the shortage of Bahraini nurses remains noticeable, a picture replicated in other gulf countries.

The number of nurses in Bahrain has increased steadily over the years, however the health services continue to experience a shortage of nurses to meet the needs of its population. At present, there are 4 nurses per 1000 population compared to an average of 8.7 nurses per 1000 population reported by the Organization for Economic Cooperation and Development (OECD) (Ithmar Capital, 2009). As in other countries of the GCC, “there is a high dependence on expatriate nurses to maintain the nursing services of Bahrain. Over the years, recruitment initiatives have been taken in many countries of the world to meet the demand for nurses” (Tawash et al., 2012, p.83). However, there is a need for new policy initiatives to ensure the greater availability of nurses from Bahrain to provide health services.

Higher demands for the development of more nurses and other health care workers has resulted from the establishment of two major projects; the new King Hamad University Hospital and the plan to open all primary health care centres for two shifts (morning and afternoon) (WHO, 2007) as well as the plan to open four new health centres in the coming two years (Atawi, 2011).

The establishment of an undergraduate nursing programme in RCSI Bahrain in September 2006 represents an important initiative in providing an opportunity for Bahraini persons to enter nursing. Having been formally established as a University in Bahrain since 2004, RCSI Bahrain “became the first independent University to undertake the education and training of nurses” (Tawash et al., 2012, p.83). The inauguration of the BSc. Nursing at RCSI Bahrain was preceded by careful and thoughtful analysis of national and international trends. It has been
suggested that this innovative programme presented a significant move forward for the development of a nursing career in Bahrain, and the GCC. The programme is modelled on the Irish undergraduate nursing programmes, and incorporates the European Union directives on nursing education. Two noteworthy developments occurred in 2009, when RCSI Bahrain was the first University in the Arabian Gulf region to establish postgraduate education in nursing. This master in nursing programme is suitable for nurses from all clinical backgrounds, as well as nursing management and education. In the same year, a BSc Bridging programme was also opened to facilitate registered nurses to upgrade their qualification from Diploma to a degree level. “It is an objective of RCSI Bahrain to attract the high calibre candidates to study nursing and this was reflected during the promotional and recruitment campaigns in Bahrain” (Tawash et al., 2012, p83). Understanding the factors influencing the attitudes of HSS and their families in Bahrain about nursing as a future career is essential to building a valid and reliable process, which enhances the recruitment of HSS into nursing.

2.2 Research Problem and the Importance of the Study

Many international studies examined the perceptions of HSS about nursing and factors that influence their choice to study nursing (Spouse, 2000). Adolescent students were found to consult their family members, friends, teachers and school counselors when they are not sure about career choice (Grossman & Northrop, 1993; Anderson, 1991). Al-Kandari & Ajao (1998) revealed that Kuwaiti nursing students withdrew from their nursing programs as a result of peer pressure and disapproval from their family members. In addition, a study by Dalayon (1990) identified that socio-cultural factors acted as barriers to HSS’s choice to enrol and remain in nursing education. However, there is no published work on the factors that affect the recruitment of nursing students in Bahrain.

This study aims to explore among HSS and their parents in Bahrain, the factors that encourage or discourage them choosing a career in nursing. Understanding these factors represents seminal work in terms of Bahrain’s health services and
indeed the international nursing community. According to Anderson (1992) nursing educators need to develop awareness of what influences students to select nursing as a career.

2.2.1 Purpose and Significance of the Study
Because of the low interest in nursing by Bahraini people, expatriate nurses have been employed to make up for the shortage of national nurses (WHO, 1998). The most recent health statistics reported there are 1,607 non-Bahraini nurses working in the MOH health services, which constitutes 51% of the nurses (Health Information Directorate, 2013). However, according to the WHO (1998) foreign nurses generally experience difficulty communicating with patients and they lack proficiency in a particular language and the knowledge of cultural values, thus their care is primarily of a technical nature. This is not unique to Arab countries, as it has been evidenced by a recent study in the United Kingdom (UK). Germack et al. (2015) proposed that language and cultural differences are associated with patient dissatisfaction with expatriate nurses. Lovering (2012a) presented a unique nursing model for Arab Muslim care, which was based on nurses’ cultural beliefs and values. She argued the case for the provision of nursing care that is based on the Muslim worldview, which supports the case for the indigenous growth of nursing with an increasing Arab nursing workforce.

To encourage young people in Bahrain to join a nursing career, it is essential to influence the public image of the profession (Tawash et al, 2012). Identifying what HSS and their families and CGC think about nursing is crucial to enhancing nursing recruitment.

2.2.2 Aims and Objectives of the Study
The study aims to identify factors that influence the HSS and their parents in Bahrain to choose the nursing profession as a future career. It also aims to explore strategies to promote nursing as a career in Bahrain.
The objectives of the study are:

I. Identify high school students’ perceptions of nursing and factors that influence their choice to study nursing.
II. Describe current High School nursing career guidance practices and perceptions of nursing.
III. Describe the extent of influence the students’ parents/families have on their career choice.
IV. Outline the perceptions of the first cohort of RCSI Bahrain nursing students of nursing as a career.
V. Based on the outcomes of objectives I, II, III and IV, to set out, implement and evaluate a career promotion strategy in Bahrain.
VI. Recommend a strategy and a model to enhance recruitment to nursing as a career choice in Bahrain.

2.2.3 Research Questions
The study sets out two primary research questions to be addressed in the study.
I. What are the factors that influence nursing as a career choice among high school students and their parents in Bahrain?
II. What strategies and actions, in terms of best practice, are most effective and should be implemented in order to promote nursing as a career in Bahrain, and enhance recruitment to nursing?

2.3 Structure of the Theses
The thesis includes five sections presented as 23 chapters. Section 1 includes two chapters and introduces the background and context for the study. Section 2 discusses the literature review and includes six chapters; sociocultural influences and nursing professionalization, perceptions of nurses and nursing, the influence of significant others and media portrayals of nursing, the role of career guidance, and current promotion practices and strategies as well as the theoretical framework underpinning the study. Section 3 discusses the research design and methodologies, and includes seven chapters; research paradigms, population,
sampling and data collection methods, reliability and validity, data analysis, ethical considerations and the nursing recruitment intervention. Section 4 presents the study findings and includes five chapters; HSS’s perceptions of nursing, CGC’s roles and perceptions of nursing, parents perceptions and influence on career choices, perceptions of the nursing students and evaluation of the nursing recruitment intervention. Section 5 includes three chapters and presents the discussion of the research findings, the NURSING-Positive Recruitment Arabic Model (NURS-P.R.A.M.) and study conclusions, recommendations and limitations.
SECTION 2

LITERATURE REVIEW
1 Introduction

Choosing a profession is a significant stage in life and expresses one’s personal indications (Natan & Becker, 2010). There is a wealth of research into why students drop out from nursing education, but fewer well-researched is what motivates them to join nursing in the first instance (McLaughlin et al., 2010). The available international literature have shown that motivation and career considerations related to nursing unveil that the decision is determined by a multitude of factors, generally making a distinction between intrinsic and extrinsic rewards, and work values. Law & Arthur (2003) indicated that the directions in the literature were clear in terms of the major factors influencing choice of career from several overseas studies. They claimed that the students’ decision to choose or not choose nursing was significantly influenced by three categories; socio-demographic factors (such as gender, biology subject pursued, previous academic achievement and mothers’ occupation), students’ perception of nursing as a career and other extrinsic factors influencing the students’ career choice, which were evident in the literature.

The aim of this literature review is to explore the various factors that influence the choice of nursing as a career amongst HSS. It also aims to place this research study in the context of international literature, and to provide support and rationale to the current study in relation to the choice of nursing as a career and factors that influence this choice. The section provides comprehensive review of the literature in areas that inform this study. Intrinsic and extrinsic motivational factors affecting the choice of a career in nursing will be explored, with more focus on factors representing perceptions of nursing, the influence of parents, nurses, career guidance, sociocultural factors and the media.

1.1 Search Strategy

The literature search was conducted through a systematic process using electronic databases, the internet and manual searches. The electronic databases included
Cumulative Index of Nursing and Allied Health Care (CINAHL), Medline, Academic Search Complete, ProQuest and PsychINFO. Citation Databases, including Scopus and Web of Knowledge were also used. The internet searches included publications by government, WHO, nursing and other relevant national and international organizations, as well as e-books. Hard copies of books and journals were searched manually. In addition, reference sections of the identified literature were reviewed for other related resources. Grey literature related to Bahrain was also hand searched.

The primary focus of the literature search was related to factors affecting the HSS’s choice of nursing. The inclusion criteria for searching focused on retrieving the most recent literature, however because the study needed to include some historical background related to the scope of the study, some of the literature goes back to the 1990s and sometimes earlier. A thorough review of the literature has been done, however most of the available literature, specifically from the West is relatively old. As it was important to reflect on the topic from international perspectives, it was considered pertinent to review the older literature in benchmarking perceptions to nursing in Bahrain.

The systematic approach adopted in reviewing the literature ensured focus and depth in approach. Inclusion criteria focused the literature on research studies written in English and not older than 10 years, whenever possible and seen appropriate. Some of the key words used to initiate the electronic searches included ‘high school students’; ‘nursing students’; ‘students’ parents’; ‘perceptions of nursing’; ‘nursing image’; ‘nursing shortage’; ‘nursing education’; ‘nursing recruitment’; ‘barriers to nursing education’; ‘career guidance’; ‘nursing promotion’; ‘nursing retention/attrition’. A grid was used to extract the relevant data from the available literature as seen appropriate, to help provide clarity and transparency in the literature extraction stage of the study (a sample is provided in Appendix 2).
Chapter 3: Sociocultural Influences and Nursing Professionalization

Nursing has been striving for professionalism for over a century. Based on the history and evolution of nursing, it has been indicated that the transformations needed to enhance the nursing professionalization process are taking place, however very gradually (Cowman, 2013). As a social institution, nursing is influenced by the sociocultural context within which it is embedded (O’Lynn, 2007a), therefore socialization is a process controlled by society, where it fulfils a role. Individuals are expected to follow the values, orientations and rules of their society. As Dimitriadou et al. (2013) claimed, no one can develop own identity in isolation of the sociocultural context. Individuals grow and develop within social systems and these include family, peer groups, school class, professional groups, religious groups, etc. In some cultures, religion plays a significant role in shaping the habits, customs, traditions and ethnic code of conducts in a community (Rassool, 2014). There is no clear distinction between the terms “religion” and “culture”. The two terms are particularly synonymous in many parts of the world. Religion, like culture, consists of systematic patterns of values, beliefs and behaviours acquired by members of the society. Religious beliefs are considered the sources of moral strength and a basis for the cohesion of the cultural groups.

From a sociological perspective, Hollup (2012) claimed that little is known about the early development of nursing; different countries presented nursing with different history, culture and societies. Nursing care has been linked with social structures in different historical phases; these include tribes, families and professional organisations (Gonzalez & Ruiz, 2011). Lovering (2012a) claimed that, nursing has historical origins in spiritual and the compassionate practices of many cultures and suggested that nurses’ caring role is culturally determined. The public image of nursing and nurses has been discussed and debated for many decades, and these discussions have now intensified as the nursing shortage has brought increased focus on the nursing profession (Takase et al., 2002). Nursing shortages have driven international recruitment, and today the internationalization
of nursing has highlighted transcultural nursing issues. In their efforts to care, nurses have been confronted by a series of limitations related to cultural ideology, economics and eventually political power (Reverby, 1987). The juxtaposition is that nursing has advanced significantly since the 1860s, however the public stereotypical images persist and are fuelled by misconception, misinformation and in some instances by the actual realities of the profession (Jinks & Bradley, 2004).

This chapter will provide an insight into the cultural and social challenges involved in forming the contemporary image of nursing and nursing professionalization. It will address the impact of culture on the public image of the nursing profession and its practitioners and will reveal the bond that has wedded nursing to womanhood.

3.1 Historical Evolution and the Shaping of Nursing Profession
Throughout the history, nurses have assumed responsibility to society for providing health care to patients and families. Prior to the recognition of nursing as an organized occupation in the mid-19th century, societal need for health care providers influenced the development of the nurse role, and societal moves determined who the nurses were (Wallace, 2007). It was reported that prior to the 18th Century (1701 – 1800 in the Gregorian calendar), the nursing image was that of an “inferior, undesirable” occupation (Kalisch & Kalisch, 2004). And during the mid to late 18th century, nursing was provided by few uneducated and sometimes undesirable women who were not even sufficient to meet the demands for nursing care (Ellis & Hartley, 2012). Historical documents reporting on the development of the nursing profession indicated that, during the years of middle to late 19th century (1801 – 1900), nurses worked mostly in negative challenging conditions, performing what was then called a domestic service. This period was associated with the period of the reformation and the establishment of Protestant beliefs, which included subordination of women to men. This era was rightfully designated as “the dark age of nursing” (Ellis & Hartley, 2012).
3.1.1 Florence Nightingale: The Hero of Modern Nursing

According to Cowman (2013) the framework of professionalism in nursing began well over a century ago rooted in the Victorian England era (1837–1901) with Florence Nightingale who placed a high value on commitment and standards. The expectations of the Victorian era did not include educational training, nor employment for women outside of their home. Women of this era were viewed as physically and intellectually inferior to men, and were regarded as unsuitable for educational development beyond that needed to make them useful as wives and mothers (Kalisch & Kalisch, 2004). The task of nursing the sick was consequently demoted to women, indigents, prisoners and others of similar classes in the society, who lacked education and other positive traits (Wallace, 2007). Despite these societal exterior influences of this era, Nightingale’s contribution to health care and nursing reform were positive (Kalisch & Kalisch, 2004). Boling (2003) claimed that Nightingale was the first to define the essentials of nursing to what was a large uninformed group who defined themselves as nurses, either by employment or as a result of illness in the family. She was educated in the subjects of that era: languages, history, mathematics and philosophy, and had a desire and a passion for entering the nursing field (Wallace, 2007). Nursing gained legitimacy during the time of Nightingale, through linking nursing with religious calling, a mission to serve humanity, a high moral ground and an emphasis on the special femininity of nurses. Rather than being a domestic role carried out by women of questionable morality, nursing was accepted as a career for women (Lovering, 2014).

In 1860, Nightingale funded the establishment of the Nightingale School and Home for Nurses in what was considered the birth of nursing education (Kalisch & Kalisch, 2004). Whereas nursing education was revolutionary in its time, it was lacking in terms of instilling vital abilities required for professional practice, evidence based practice and lifelong learning (Cowman, 2013). In the early period of the formation of formal nursing, Nightingale was conscious of the need for
structure in the organization of nursing services. She set out to formalize nursing and ensure that it played a leading role in health care. Furthermore, Nightingale promoted fundamental changes to the constructions and designs of hospitals to ensure better ventilation and warming of the patients’ environment (Cowman, 2013).

The work of Florence Nightingale in Europe initiated the change in the image of nursing. Some of her initiatives that generated a change in nursing’s image were education, discipline and the selection of trainees on the basis of good character (Wallace, 2007). The “Angel of Mercy” image that evolved during the time was reflected by characteristics such as nobleness, morality, religion, self-sacrificing, compassionate, hard-working, dedication, and serenity. This image is linked to Florence Nightingale’s self-sacrificial, moral and noble work during the Crimean War (1853 - 1856). It was her influence that led to the acceptance of nursing as a respectable career for women. However, at this time nursing was not yet a career or a profession, and there was no body of knowledge. Nightingale had a vision that all of the appropriate training and organization would come later (Wallace, 2007).

Since its foundation and modest beginnings in the 1860s, nursing has evolved and advanced significantly to meet the complex challenges of today’s health care settings (Kalisch & Kalisch, 2004). For many years, nurses were influenced by the writings of Nightingale (Boling, 2003). In the United States (US), nurse training was also initiated in the mid-19th century, and it flourished as the need for nurses to support home, public and hospital care grew. It was reported by Wallace (2007) that increases in the number of nursing schools, hospitals, models for nursing practice and the development of diverse patterns for nursing education reflected the growing need for nurses. Indications of nurses’ shortages were articulated in various eras in the society following the establishment of nursing as a respectable occupation. One of those eras was World War I (1914 – 1918), when nurses were included as part of the US resources needed for the war, as was the case in some European countries; like Germany and Great Britain (Soine, 2010). As the military
requirement for nurses continued to rise, shortages in the civilian sector became more evident (Kalisch & Kalisch, 2004).

3.1.2 Nursing after World War I and World War II
Unfortunately, after World War I (during the 1920s), and with the wider participation of nurses in social and employment activities, the image of the nurse had momentarily deteriorated, from a highly regarded occupation into a mere “Girl Friday” (Kalisch & Kalisch, 1987). During these years, nurses were more focused on their social lives and personal desires. Involvement with patients served as a means to the end of attaining romance and sexual pleasures, often in liaison with clients and colleagues (Wallace, 2007).

As was expected, the Great Depression (1929 – 1939) followed by World War II (1939 - 1945) served as another significant milestones for the society in general, and nursing in particular. Women were needed in the work force during this time for a variety of reasons (Wallace, 2007). America’s involvement in World War II brought improved focus to nurses and nursing. The image of the nurse was highly elevated in the society reflected as that of “Heroine” (Kalisch & Kalisch, 1987). As it was during the Nightingale era, nursing was again regarded as a real profession requiring developed knowledge and skills for its own practice. Nurses were represented as dedicated, humanistic, rational, autonomous, decisive and brave, and nursing was viewed as an occupation made up predominantly of women who were recruited heavily (Wallace 2007, Kalisch & Kalisch 1987). After World War II, nursing image went back to the early and mid-19th century image of “Wife and Mother”. As reflected by Kalisch & Kalisch (1987) during the period of the 1960s, nurses were typically not seen as contributors to patient care. They were stereotypically seen as handmaidens and assistants to doctors.

The image of nurses further deteriorated from the mid-1960s to the 1990s, the media portrayals of nurses focused on the sex lives of nurses. In these stereotyped sex object roles, there was little time for professional nursing work.
The colleague involvements are almost always with a doctor, thus compounding
the subordinate role of the nurse (Kalisch & Kalisch, 1987). In the mid-1990s, with
different variants of cost cutting in the US, Canada and Europe, nursing as one of
the largest occupational groups was a soft target for restructuring and cost saving.
Cost constraints led hospitals to lay off more expensive, and thus more
experienced nurses. They replaced registered nurses with poorly trained and
poorly paid nursing aids. The remaining few nurses in the wards were asked to
care for large numbers of very sick patients. Nurses started leaving the profession
as a result of eroding working conditions, and fewer recruits have entered. Thus,
what began as just a periodic nursing shortage, has turned into a major nursing
crisis (Gordon, 2006).

3.1.3 The Impact of Nursing Reforms
The development of nursing reforms that was started in the later years of the 19th
century continued until the early 20th century. In the last decade, nursing has
undergone major and significant changes in its structural, educational and
professional aspects (Parkin, 1995). Today, nursing is portrayed as a profession
where the nurses role can make a difference to people’s lives, nursing is about
putting patients first (Schroeter, 2014). Generations of nurses have taken initiatives
to change the nursing identity from one allied with “female domestic service to that
of a scientifically based human care service, free of gender qualifications” (Brodie,
1994, p.559). Developing university nursing education in some parts of Europe
early in the 21st century to replace the Nightingale model of education represented
a paradigm shift in terms of upgrading the profession and ensured that nursing,
like other health care professions, receive their undergraduate education in
university with a graduate qualification (Cowman, 2013). Nursing has been
changed to imitate the efforts of its leaders in providing order and discipline. These
nurse leaders rejected the view of nursing as a domestic art, and nurses as
domestic servants who require minimal skills (Brodie, 1994). They took steps to
emphasize an image of nursing as to have intellectual demands and caring skills,
which allowed them to begin depicting nursing as a profession, with a unique mission to serve mankind (Magnussen, 1998). However, further efforts are required to strengthen leadership qualities in nursing that may mean nurses becoming more political in pursuit of professional nursing agendas (Cowman, 2013).

Wallace (2007) suggested that nurses still carry some of the past stereotypes today, and continue to be invisible despite the developments in nursing education and research, even in America. Paternalistic influences remain in some occasions and can be seen in nurses’ passive deference to doctors. Other displays of paternalistic influences include the expectation of subservience by those in authority, including the nurse managers (Wallace, 2007). Dworkin (2002) identified the problem with nurses’ identity at the present time, when he claimed that nurses went from being colleagues to nobodies. Until early in the 20th century, the nursing profession has been faced with medical hostility, which resulted from the fear that nurses are undermining the authority of doctors. Sir William Gull stated in a British medical journal editorial, that nurses must be persons who pay blind obedience to doctors’ orders, a view which the lay governors of the hospitals encouraged and supported (Cowman, 2013).

3.2 International Perspectives and the Sociocultural Impact on Nursing
Looking at the role of the nurse as recognized internationally, and the global nature of nursing, it is difficult to understand why nursing professionalization is at different levels in different countries. Over time, even within nursing, there has been a debate with regards to the designation of nursing as a “skilled craftsperson” job or “professional” career. Nursing has always been respectable, but it is not well thought-out by the public as a career with high status (Magnussen, 1998).

According to Purnell (2007) in Sweden, nursing generally has not been seen as a desirable profession, especially for men, because nursing has suffered from a low status and low wages, and it is seen as women’s work. Also in Iceland, the view of nursing is that the work of nursing is monotonous, and requires little education.
With the current and protracted nursing shortage, nursing image has come to be portrayed as a primary cause for the nursing shortage (Wallace, 2007; Chitty, 2005). Image and the reality of the nursing environment have been identified as reasons why some nurses do not work in nursing (Goodin, 2003). Collectively, the data on the nursing image and the shortage of nursing suggest that, causes for the shortage are several and diverse, however, the data are explicit in identifying that image of nursing continues to play a pivotal role in the durable nursing shortage (Wallace, 2007).

Nasrabadi et al. (2004) claimed that the nursing image in Iran has remained negative, despite the advances in nursing education, practice and research, which is similar to other East and West Asian countries. These family oriented societies view the work of women very negatively, because they leave their homes in the evening and night. As a result, families are reluctant to allow their daughters become nurses, and encourage other family members to discontinue their nursing career. Although seen as caring and educated, nurses are still perceived as “doctors’ handmaidens” and suffer the image of being “subservient to physicians”. These images are similar to the public image of nurses in Japan, which also viewed nurses as subservient to physicians; an image that was reported by nursing history in the Western countries (Primomo, 2000). In a family-centred community like Pakistan, having a family member in nursing may affect the family status adversely (Gul, 2008).

Birks et al. (2009) argued that sociocultural factors combine to further limit the progression of nursing as a profession in Malaysia. The low status of nurses, however not to be misinterpreted as disrespect for the nursing profession in many of these countries. The history of nursing in Korea can be an evidence of this claim. Originally, the Korean word for nurse was “kanhobu”, the end “bu” connoting “housewife”. In contrast, words ending with “sa” were used to refer to professionals, such as “uisa” for doctor and “yaksa” for pharmacist. To achieve the societal recognition of nursing, and to increase the status of nurses in South
Korea, a campaign was organized to change the language referring to a nurse. Changing the name given to nurses gives them a better self-image and nurses are elevated in the public’s recognition of them (Purnell, 2007).

### 3.2.1 The Sociocultural Feminization of Nursing

From a functionalist perspective, sociologist Parsons and his colleagues defined two main functions for the modern family which are carried by the wife and mother; socialize children into normative system of society’s values and instil appropriate status expectations, and provide an environment that is emotionally stable and would cushion the male worker from the psychological damage of the alienating occupational world. Within the family, males play the “instrumental” role to earn the families keep and maintain discipline, while females play the affective, “expressive” role of support and nurturance (Moghadam, 2013). Nursing has been one of the more “sex-typed” occupations because of its resemblance with the traditional role of females. This clearly explains why nursing continues to retain an image as a peripheral or menial occupation, and an occupation without prestige despite all the developments witnessed today. Throughout the history, there has been a feminization of the image of nursing (Bartfay et al., 2010) and nursing unfortunately, remains as a gendered-based occupation which may be more associated with the name rather than the functions (Wallace, 2007). According to Squires (2007) Mexican women who choose nursing become the embodiment of the “Great Mother Figure”, this image is described in native and Catholic religions in Mexico. This rooted cultural image has influenced the contemporary image of nursing in Mexico, as it did in other countries of the world.

Aldossary (2013) reported that, despite there being clear standards of role for nurses issued by the ICN, the role of nurses has always been a subject for debate. She claimed that the nursing profession has been described in multiple images that highlighted the potential for role conflict between nurses, other healthcare providers and the public. Parkin (1995) suggested that the social organization of
health care with its manual and mental division of labour has been viewed by the society as an extension of the domestic sphere of labour.

In addition, O'Lynn (2007b) stated that historically and persistently, caring, which is associated with nursing, has been strongly allied with women and femininity, which is reflected not only in the nursing literature, but also in the sociology and psychology literature. Hallam (2000) argued that in caring for people, nurses are viewed with the “ideological feminine nature”, who possess the characteristics of “generous compassion” and “self-sacrifice”. In this instance, Martin & Ebrahimi (2013) claimed that the typical image of a nurse is one of a caring and nurturing individual, who is female, in whom these traits are considered innate. In general, there is strong association of the qualities of females with nursing which symbolizes cultural gender stereotypes of nurses (Keogh & O'Lynn, 2007a; Seago et al., 2006). Stereotyping is described by Clements & Jones (2008) as a series of shared generalizations about characteristics of a group, or class of people. According to Hollup (2012) industrialized countries, which have European values and predominantly Christian-based cultures, share common views in the way nursing has been evolved and perceived, turning it into an occupation that is typically dominated by females.

Traditionally, the nursing profession was one of only a few careers considered acceptable for women, and it has relied on a steady stream of young women entering the profession to replace retiring nurses, or those leaving the profession for other reasons. The modern tradition in which nursing became predominantly female discipline has been attributed to Florence Nightingale, whose personal philosophy of nursing as a profession was purely a feminists one (O'Lynn, 2007b; Evans, 2004). Clementson (2008) added that, nursing as a women’s occupation was established by Nightingale as she stating that “every woman was a nurse”. She pointed that nursing requires traditionally female attributes, and so is more suited to women. The public stereotypical views irritates against males choosing the nursing profession, or consider it as an option (Purnell, 2007).
Based on the above, males have been systematically discouraged from entering the nursing profession, despite males’ long history working as nurses. Unlike professions that have been traditionally dominated by males, nursing has been slow to neuter its image (O’Lynn, 2007b). This reluctance to neuter nursing image continues to reinforce the gendered construction that nursing is aberrant as a career for males. Kouta & Kaite (2011) claimed that although males and females choose nursing for the same reason; which is the desire to care for people, the media often represented them as “male nurses” while females are presented as “nurses”.

3.2.2 Male Nurses: Where do They Stand?

Many professions have been viewed as essentially open and undifferentiated by gender. Nevertheless, many occupations are still clearly divided into “men’s work” and “women’s work” by many societies. Law and medicine are examples of professions known to be male-dominated for many years, and only in the last few decades that females have joined these professions, following feminists’ determined campaigns (Holroyd et al., 2002). Under similar gender assumptions, males have been excluded from female-dominated professions; such as nursing and teaching (Williams, 1993). Nursing has remained highly dominated by females, irrespective of the male-female balance of matriculations in many occupational and professional education programmes. According to Dyck et al. (2009) the nursing profession is characterized with the widest numerical disproportion between female and male practitioners.

According to Clementson (2008) males worked in the nursing profession since its infancy. However, nursing has been associated with characteristics of feminine by tradition, and is frequently perceived as women’s job (O’Brien et al., 2008), a view that has been reinforced by the low numbers of males joining nursing (Maraldo et al., 1991). Evans (2004) affirmed that the earliest historical accounts of male nurses goes back to the fourth and fifth centuries. It was reported that, in the 11th century male nurses cared for persons with erysipelas, while in the 14th century
they cared for victims of the black plaque (Romem & Anson, 2005). During monastic movement of the same era, and as members of various religious orders, male nurses provided nursing care to the sick, wounded and dying. Males continued to nurse under various religious orders during the eleventh and twelfth centuries (Berman & Snyder, 2012). Males have also played a major role in military nursing as they provided nursing care with orders; such as the Knights Templars and Knights of St. Lazarus (Evans, 2004). Males continued to provide basic care to the wounded until the Crimean War, when Nightingale began the responsibility of caring for soldiers (Yang et al., 2004). The nursing profession began to be female-dominated from this war to the present (Saritas et al., 2009).

Evans (2004) referred to the “dark ages in nursing” where men almost disappeared from nursing. Even though males continued to work as nurses, written accounts of males decreased as the numbers of female-nurses in Catholic countries increased. Females were directed towards serving in hospitals as a vocation (Clementson, 2008). The status of male nurses worsened even more when military nurses were fired in large numbers from the US military between 1908 until 1965 (Romem & Anson, 2005). In addition, the number of male nurses decreased further between 1901 and 1955 when the US banned taking nurses into the military (Evans, 2004). Evidently, there has been a very turbulent period for male nurses from the Middle-Ages, in particular, until today. With the Industrial Revolution, males found industrial work to be more ideal for them due to the long days they spent away from home and the physical labour the work required. During this era, females felt industrial work was not consistent with their social roles (Clementson, 2008).

Nurses moved toward gaining professional status during the early twentieth century, which significantly impacted on male nurses. Most of the nursing schools barred males from admission, which made them move to areas such as pharmacy and medicine, where they sought higher paid employment and status (O’Lynn, 2007c). Male nurses were formally segregated in 1919, when the Nurses Act was introduced, and males were barred from the General Register (Evans, 2004). This
discriminatory act was short lived, as male nurses from different countries united to call for nursing equality (Clementson, 2008). Evidence showed that, in 1945, the number of general hospitals accepting male nurses in England and Wales increased compared to 1937, and schools started training males in nursing (Saritas et al., 2009). After the 1950s, males were gradually readmitted to nursing programmes in different parts of the world (Evans, 2004). However, in countries like Turkey, males were only allowed to work as nurses in 2007, after passing the new law for nursing. Despite the efforts male nurses made through bounds and leaps in achieving equality during the 20th century, gender divisions still exist today. It is concluded that, the gender divisions which occurred in the “dark ages of nursing” have significantly impacted on the future of male nurses (Clementson, 2008).

Nursing research has suggested that there is a need to change nursing profile to meet the shortfall of the worldwide nursing shortage (Meadus & Twomey, 2011). In addition, it is important to ensure gender diversity of nurses in health care environments, where both female and male patients seek care, and through which the needs and comfort levels for patients who present for care are met. Even though more males started joining nursing careers, many areas of nursing; such as obstetrics and gynaecology, still remain difficult for males to enter (Marks & Bevan, 2013). And despite the progress that has been made in the recent years with regard to the numbers of males entering nursing, the movement of males into nursing is still slow, and males remain a minority compared to female nurses. International statistics show that, in UK male nurses constitute only 10% of the workforce (Martin & Ebrahimi, 2013). By comparison globally, men represent 8.9% of US nursing workforce (Bureau of Labour statistics, 2010), 5.8% in Canada (Meadus & Twomey, 2011), 7.8% in Ireland (Nursing & Midwifery Board of Ireland, 2014), 18% in Germany, 22.9% in Portugal, 10.6% in Australia (Saritas et al., 2009) and 25% in Philippines (Bartfay et al., 2010). In the Middle East, there is cultural sensitivity with restrictions on male nurses caring for female patients,
however there is great variance in the number of males in nursing. In Bahrain, the male nurses constituted 10% of the nursing workforce (Health Information Directorate, 2013), compared to 29% in Iran (Vaismoradi et al., 2011). This situation of having low numbers of male nurses was found to be exceptional in Jordan, where 65% of the nursing students in the nine nursing programmes were males (Ahmad & Alasad, 2007).

3.3 Culture and Nursing in the Middle Eastern Arab Countries
There are parallels in the transformation of Western nursing at the time of Florence Nightingale, and the legitimization of nursing in the Middle East through Islam (Lovering, 2014). However, the era of Florence Nightingale is pre-dated by the historical context of nursing in the Middle East. It goes back to more than a thousand years during the time of Holy Prophet Muhammad, peace be upon him (PBUH), with Rufaidah Al-Aslamiyyah; the first nurse in Islam, who lived in the eighth century of the Christian Era (CE). Like Nightingale, and 12 centuries before her, Rufaidah set up a school to train Muslim women, was a promoter of community health and developed the first code of ethics and conduct (Atkinson 2015, Lovering 2012a). According to Al-Osimy (1994, p.18) the “status of the women participating as nurses in the wars was highly honoured by the Prophet”. Just as the men soldiers received their share of the war loot, the Prophet gave the women theirs. This arrangement raised the status of women in the nursing role and meant that nursing was worthy in Islam. Among women who participated in wars as nurses was the Prophet’s wife, Aisha and his daughter Fatima. The practice of nursing was not restricted to war times and caring for the army, rather there were women who used to practise nursing in times of peace; such as Salma, who was a midwife and a nurse. Acceptance of nursing within Islam was symbolized by nurses caring for patients in the mosque (Rassool, 2014), however recognizing Rufaidah as the first Muslim nurse, and role model in the Middle East is a very recent phenomenon.
It was also reported by Al-Osaimi (2004) that in the post Prophetic era, nurses; both males and females, worked along with the physicians and pharmacists. A nurse’s role consisted of serving the patients their portions of food, their prescribed medicines and healing liquids. They made sure that every patient took whatever was prescribed for him/her. It was also found that in Andalusia and Morocco, plenty of women practiced nursing and medicine. The King of France, Louis XVI had sent his niece princess on a big educational mission to Andalusia to learn about nursing, medicine and other sciences known by the Muslim ladies. Unfortunately, in later years and for a long period of time the nursing profession was badly condemned and misunderstood. The exact reasons for why that has happened were not very clear, but it is thought that nursing was not appreciated because of the ignorance of its role and the inequality in labour between men and women.

3.3.1 Family Structure and Gender Role
According to Lovering (2012b) in the Middle East, the nursing perspective draws on the interconnected aspects of Islam, discrete gender roles, the family as the primary and most important social unit, as well as the low status perception of nursing. In the GCC, of which their populations are mainly of an Arab background, the family is considered as the core of the community with individuals viewing family unity, honour and obligations as central values. The predominantly masculine family structure that is based on an extended family system provides stability, physical and psychological support. Arab Muslims do not hesitate to sacrifice individualism to maintain family cohesiveness, as their self-image, security and identity are derived from their relationship with the family (Daneshpour, 1998).

Although Islam sees a woman, whether single or married, as an individual in her own right (Rassool, 2014), the “Middle Eastern Muslim Family” has long been described as a patriarchal unit. Moreover, the laws of Muslim families have served to reinforce patriarchal gender relations and women subordinate position within the
family. Each family remains a potent cultural trope, with conservative discourses frequently trying women’s family roles to cultural, religious and societal cohesion (Moghadam, 2013). The Parsonian sociologist view is very similar to the contemporary Muslim view, which sees the family as the fundamental unit of the society and stresses the mother’s role in the socialization of children, particularly in rising “committed Muslims” and transmitting cultural values (Moghadam, 2013). Whether the family live together with their children with the extended family, or separately, parents are usually consulted in all decision making processes. All actions, decisions and judgments ought to be family oriented and culturally derived (Rassool & Sange, 2014).

In Islam, the status of women has been the subject for much controversy as Islam has often been misunderstood by people who believe that it degrades and oppresses women. This misconception is based on prejudice and ignorance (Rassool & Sange, 2014). In Islam women has the right to seek employment as long as the sanctity of the family remains intact and a woman’s honour is not compromised. It is permissible for a woman to go out of her house to work under certain conditions, including that there should be no mixing with men and her work should not lead her to travelling without being accompanied by one of her male family members. However, her role in society as a mother and a wife is regarded as the most sacred and essential (Rassool & Sange, 2014).

3.3.2 Islam and Cultural Practices
Islam can be regarded as a religio-cultural phenomenon, whereby the behaviours of the believers are shaped by religious values and practices. Cultural practices of Muslim communities are strong and very closely linked to their religious beliefs, so that separating the two can prove difficult, if not impossible (Rassool, 2014). The behaviours of Muslims from different parts of the world however, are often shaped by cultural practices which may not be in concordance with basic religious practices (Rassool, 2014). Muslim communities use non-Islamic/cultural practices
which are given an Islamic dimension, although these practices are not Islamic (Saidi, 2008).

There is an increasing recognition of the need to distinguish between the true teachings of Islam in the Muslim world, and cultural traditions, which may have nothing to do with Islam (Rassool, 2014). From this instance, Atkinson (2015) claimed that the Muslim religion supports nursing as an honourable profession, but the culture does not. This is evidenced by the fact that although Rufaidah as an Arab Muslim nurse supported by the Prophet (PBUH) symbolized acceptance of nursing and helped give some kind of legitimacy to the nursing role and nursing identity within the religion and culture, in traditional Arab societies, nursing is not viewed as a respectable profession for women, and it continues to be viewed with considerable ambivalence (Lovering, 2008).

### 3.3.3 Cultural Attitudes about Nursing

Most of the students who participated in Okasha & Ziady (2001) felt the community in Qatar held negative attitudes towards the nursing profession. Miligi & Selim (2014) argued that many Arab women are discouraged from entering the nursing profession because of the stereotypes of the nurse as subservient, uneducated female worker. This was also found earlier by Miller-Rosser et al. (2006) and Al-Kandary & Lew (2005). Considering the socio-cultural constrains surrounding the families, and the fact that nurses are viewed by the society as having “compromised moral standing” and low status, families in the Arab societies, especially in the GCC are hesitant to send their children to study nursing (Mansour, 1992). This is because in the Arab culture, actions taken by any individual is reflected on the reputation of the family, the tribe or community.

Things become stricter with females who are expected to maintain the honour of their family by veiling, seclusion of women and strict segregation from males (Lovering, 2012b).
The job conditions of nursing is unacceptable socially, and runs contrary to deep rooted beliefs of what is permissible for females to do. Nursing is believed to force females to work night shifts, stay long hours away from the family and mix with men. As a result, nursing is not viewed as an honourable profession (Miller-Rosser et al., 2006). As a result of similar situation mentioned above, the nursing students from Bahrain claimed that “nursing is not very well accepted by their society” (Tawash et al., 2012, p.87). Al-Aitah et al. (1999) argued that “cultural taboos” against gender-mix in work places affected the status of nursing; which is similar to Okasha & Ziady (2001) who reported that Qatari female participants found dealing with male patients to be a difficulty. Female participants in a study by Gazzaz (2009) reported that they experienced social pressure associated with having to cover long hours of unfavourable night and weekend duties, and working in socially unacceptable mixed-gender environments. The pattern of working hours and nurses having contact with the opposite sex; whether patients or colleagues, were not only reported in the GCC, but also in Jordan (Al Jarrah, 2013; Ahmad & Alasad, 2007) and Egypt (Abd El Rahman & Abou Shousha, 2013; Mohamed & El-Sayed, 2013). There is evidence in the literature that the factors related to gender mix and the working hours of nurses were not unique to the Arab countries. In Pakistan, for example, there is a general discernment that daughters of respectable families would not get their family’s approval to join nursing. The main reason is that nursing work brings women into contact with male non-family members (Gul, 2008). Additionally, in investigating the reasons for experienced nurses from North America and Europe leave nursing, Tumulty (1992) found that the perceived negative community attitudes were related to working hours.

Tumulty (2001) reported that, on a list of appropriate occupations for women in KSA, nursing was ranked last. The reasons for this low rank included the inadequate financial rewards, the type of work nurses do and long working hours; which are very similar to studies done in Western societies, which were believed to prohibit women from fulfilling their role obligations as wives and mothers. In
countries like KSA, nurses are not easily acceptable by mothers as wives for their sons (Miller-Rosser et al., 2006), and any issue that could interfere with marriage becomes very serious, as marriage is a high priority for people in the Middle East (Batarfi, 1997). According to Jackson & Gary (1991) 64% of the participants in their study claimed they would not marry a nurse, citing social reasons as the main determinant. El-Gilany & Al-Wehady (2001) reported the same findings for 69% of their participants. The findings of Batarfi (1997) and El-Gilany & Al-Wehady (2001) demonstrated that female nurses are perceived by the society as unsuitable marriage partners. Consistent with Gazzaz (2009), Al-Omar (2004) reported that females themselves believed they will not be “marriageable” and this is mostly attributed to rotating shifts, long working hours and working with the opposite gender, which render nursing as socially unacceptable.

Touch is another act which is strictly prohibited with members of the opposite sex, even shaking hands (Rassool & Sange, 2014). During hospitalization, for a male Muslim patient, there is an overriding objective of modesty and privacy. They may prefer having a male to assist in more “personal care”. The dress code for male Muslims, is to cover the region between the waist and knees at all times. A Muslim man may be reluctant to expose this area even to a male nurse (Rassool & Sange, 2014).

According to the literature, other factors have also contributed to the poor image of nursing in the Arab Middle East countries, and so discouraged families from approving their children to be nurses. A study of the perceptions of HSS in KSA of the nursing career established that family disagreement, the community image, as well as communal and cultural values were the main reasons why Saudi females did not choose nursing as a career (Al-Omar, 2004). In addition, a Saudi male nurse reported that, his mother refused telling her friends that her son is a nurse, and claimed he was a doctor when seen in the hospital (Miller-Rosser et al., 2006). Miligi & Selim (2014) stated that Saudi men who choose a nursing career faced criticism from their family and friends.
Similar to experience from other GCC, nursing was not considered an attractive job for Kuwaitis because of a diversity of sociocultural factors including disapproval from the family, peer pressure and shift rotation requirements (Atkinson, 2015). In most health care settings, shift duties are mandatory, and nurses are expected to provide 24 hours coverage, rotating three shifts, however Dalayon (1990) reported that due to patterns of social life, most families in Kuwait still do not view afternoon and night shift as desirable, which applies to other GCC countries. According to Al-Kandari & Ajao (1998) almost two thirds of the nursing students in Kuwait stated they left their nursing programmes because they will be required to work night duty. In Tawash et al. (2012, p.87) nursing students in Bahrain reported that, “it is difficult for females bearing children to work shift duty”. This was congruent with the findings by Harban (2014) who found that staff nurses from Bahrain were unable to cope with the inter-role responsibility of working shift, and caring for their family. In addition, a study undertaken in KSA showed that HSS showed very little interest in nursing, compared to medicine, teaching and computer science, because nursing was associated with long and unsocial working hours (Al-Omar, 2004).

Al-Aitah et al. (1999) also identified many factors that are believed to have contributed to the perception of low status and moral compromise of nurses. These include the medical profession’s supremacy over nursing, and the confusion of multiple entry levels into practice; researchers argued that the process of nursing professionalism has been restricted by continuing to produce nurses with associate and diploma degrees (Karaoz, 2004), especially with the existing perception that education at diploma level is “technical’ and low level (Lamadah & Sayed, 2014). The low academic achievement of those entering nursing was mentioned as another factor by Al-Aitah et al. (1999) with evidence that girls are sent to study nursing when they are unable to join medicine, due to lower academic achievement. Lovering (2012b) adds another factor related to poor perception; the history of nurses coming from lower social classes in the
Congruent with Lovering, Anurag et al. (2011) found that students coming from rural areas were interested in nursing because they belonged to poor families, while middle class urban students were reluctant to join nursing. Lamadah & Sayed (2014) claimed that because of the negative public image of nursing that is influenced by strong sociocultural traditions, nursing functions are performed by women of lowest social classes. Even if they like nursing, females are afraid to join nursing because the society views nurses with some suspicion and disrespect. This poor image of nursing did not only affect female nurses, but was also reflected on male nurses.

3.3.4 Nursing Shortages and the Cultural Impact

Within the context of nursing care, Arab Muslim nurses are able to consider own culture and religion to place their nursing role within the cultural and religious framework of their societies, which positively impacted on the acceptance of nursing profession. The participants in Mansour (1992) thought that, Saudi nurses are needed in the nursing taskforce because they were perceived to be more loyal to Islamic principles, and that their understanding of the culture and psychology of patients is better. The identity of nursing in the religious values shared between nurses and patients is grounded in the history of nursing in Islam (Lovering, 2014). Although the perceptions of the Middle East societies have started to change, many families continue to be reluctant to allow their children, especially girls to join nursing (Lovering, 2012b). Culture then becomes one of the major factors for the severe shortages of nurses in the Middle East.

To overcome these shortages, many countries, especially in the GCC including Bahrain, has depended on importing expatriate nurses to provide nursing care. Consequently, a wide range of the nurses are recruited from other countries with the majority coming from India and Philippines, and few from South Africa, UK and US. These nurses come from diverse socio-cultural background, have varied training and clinical experiences which suggest different levels of skills (Aldossary, 2013). As there are no established standards of practice for nurses in the majority
of the GCC countries, this has impacted on the quality of health care services in these countries. In addition, an essential component for the provision of quality nursing care is the type and level of communication (Mebrouk, 2008); this means that the ability of these nurses to communicate to patients and families with Arabic as their native language was also a major concern. The participants in Mansour (1992) claimed that Saudi nurses communicate with patients easily. The expatriate nurses are not competent in Arabic, and many of them don’t speak English as their first language, however they usually communicate in English (Simpson et al., 2006). Surveys of patients and health providers point to high levels of dissatisfaction from both which stems from language barriers and communication problems (Khaliq, 2012). Okasha & Ziady (2001) stated that expatriate nurses and Qatari patients often experience extreme frustration due to language barriers. On the other hand, in a study by Mebrouk (2008), it was evidenced that using the Arabic language by the local nurses to communicate with patients had a positive impact. This was found to improve the outcomes of nursing care and increase the satisfaction of patients and their families.

In Bahrain, there are 2,800 nurses with 50% of them are nationals (MOH, 2009). The expatriate nursing workforce in some countries of the Middle East, may be as high as 80% (Cowman, 2014). For example, in KSA, only 31.8% of nurses are Saudi nationals (MOH Saudi Arabia, 2010) and in Qatar only 6% are nationals (Okasha & Ziady, 2001). Because of this situation, non-Arab, non-Muslim nurses provide nursing care to Arab Muslim patients. Nurses from diverse cultural and religious backgrounds care for Muslim populations from a distinctive perspective based on their worldview (Lovering & Rasool, 2014). This results in presenting care that is lacking the perspectives of care that is based on the Muslim worldview (Lovering, 2012a).

**Summary**

For many years, the nursing profession has been striving to build its status within a set of sociocultural contexts. Nursing evolution has been presented by many
countries all over the world with different histories, cultures and societies. However, nurses have always suffered from a poor image and were confronted with many challenges in efforts to shape a realistic image for nurses. Nursing has developed, grown and changed along with the enormous social and technological changes of the time, however the image and shortages of nurses has always been an issue (Wallace, 2007). While spirituality was part of the nursing role in both Arab Muslim nurses and Western nurses’ traditions, nursing in the West has evolved towards a materialistic orientation, moving away from its spiritual foundation (Lovering, 2012b).

At present, nursing has not been attractive in the West, mostly because of factors related to administrative and financial circumstances; including low salaries, poor benefits, lack of promotional opportunities, medical/legal problems (Tumulty, 1992), however, the predominant negative images and perceived low status of nursing were found to be greatly influenced by religious and sociocultural factors in the Middle East. There is evidence that the negative images and stereotypes about nursing existed in American, European and Australian societies in the past and they still pervade some segments of these societies, however, by educating the public about what constitutes nurses’ work, many of these images have been overturned (Darbishire, 2000). To some extent, this reflects the difference between the West and the Middle East with regards to community attitudes towards nursing.

Nursing can influence the gendered constructions of itself that pervade the society. Actions from nursing; such as protesting the inaccurate and unflattering media portrayals of men in nursing, can facilitate progress in neutering the image of nursing (O’Lynn, 2007a). As the nursing profession continues to suffer from a negative public image in the Arab world (Shukri, 2005), Okasha & Ziady (2001) suggested that awareness about the nursing profession should be increased to change the negative attitudes of community towards nursing and improve the nursing image. While improving the image of nursing is very essential, one must note that this requires an enormous amount of collaborative efforts, and great
sensitivity as it is not easily accepted to question the socio-cultural foundations of the society.

Despite greater efforts to reinforce the view that nursing is a profession with increased academic requirements for registration, negative views of nursing and worldwide shortage of nursing persist (Keogh & O’Lynn, 2007a). Nursing continues to attract far more women than men. Nursing has strived for a diversity in its workforce and active attempts has been made to attract people from a wide variety of ethnic, racial, cultural and religious backgrounds into the profession (Sullivan, 2000) and only a token effort has been made to attract more men into nursing profession (Keogh & O’Lynn, 2007b). Nurses do not necessarily support each other as they should.
Chapter 4: Perceptions of Nursing and Nurses

The public perceptions of nursing have been of concern to the nursing profession for many years, as these perceptions represent a central factor in the recruitment of students into nursing. A perception is a person’s “awareness and understanding of sensory information conquered through interaction between past experiences, culture and the interpretation of the perceived” (Safadi et al., 2011, p.421). Mason-Whitehead et al. (2008) stated that nursing as a concept is more than a definition; it is part of a particular group’s language and communication framework, and therefore, a reflection of who nurses are, and how they are viewed by themselves and others.

In this chapter, the perceptions of middle and HSS (giving more focus to research on HSS) of nursing are discussed. These perceptions were examined in relation to how students view nursing from three different perspectives; nursing as a caring profession, the socioeconomic status of nurses, and nursing education and career aspiration. It was interesting to explore the perceptions of those who made decisions to join nursing programmes. This chapter will also examine the nursing students' perceptions of nursing as a future career and motivations to join nursing, the impact of nursing programmes on their perceptions and their future intentions in relation to the nursing career.

4.1 High School Students’ Perceptions of Nursing

In light of the seriousness of the worldwide nursing shortages, recruitment and retention of qualified professional nurses takes an increased priority in many countries, and the image of nursing becomes even more important (Murray, 2002). Natan & Becker (2010) identified a positive correlation between nursing image and the decision to choose a career in nursing. That is, the chances of students choosing a career in nursing becomes higher when they have more positive perceptions of nursing.
Throughout the years, adolescents have expressed both positive and negative opinions about nursing (Al-Kandari & Lew, 2005). According to Foskett & Hemsley-Brown (1998), the perceptions young people have about nursing are highly individualized, and are created by three types of images: those seen for oneself (contracted), those passed on from parents and friends (delegated) and those from the media (derived). However, the desire to join nursing is based on students’ perceptions of nursing, perceived behavioural control to enter the field of nursing, and perceived social pressure to select nursing as a career (Hoke, 2006). Because HSS are potential candidates for the nursing programmes, many international studies were conducted to explore the perceptions students held about nursing as a career choice and help estimate future enrolment in nursing education, however no similar studies have been conducted in Bahrain, so far.

Katz (2007) claimed that the most studies related to the choice of nursing as a career showed that, generally HSS have little interest in nursing. The work of Law & Arthur (2003) is seminal with regards to the choice and perceptions of HSS of nursing and has been frequently quoted in the literature. Law & Arthur reported that only 28% of the participants in Hong Kong, considered nursing as a career possibility. Achilles (2010) indicated that 10% of their participants from Tanzania stated they would select nursing as a first choice. This was congruent with another study in India showing that only 3.9% of the participants rated nursing as first priority (Dave, 2007), and a study in Pakistan showing that only 5.5% of the participants wanted to enter nursing (Jan & Sikander, 2012). Thus, despite the variety of demographics of participants in the literature, it has always shown that very few HSS expressed interest in joining a career in nursing.

Despite the low percentages of students choosing a career in nursing, research demonstrated that students choose nursing for a variety of reasons, which represent their perceptions. Stevens & Walkers (1993) reported that the decision to choose nursing as a career was significantly influenced by intrinsic factors related to demographical characteristics; such as age, gender and ethnicity,
experiences with illness and nurses, as well as preferred characteristics in a future career. Participants who chose nursing in Stevens & Walkers mentioned the wish to help people, work with a variety of people and doing important work as significant reasons for their choice, whereas participants who did not choose nursing indicated the law salaries and dislike of dealing with dying people as the main reasons for not selecting nursing.

Based on the international literature, the HSS’s perceptions of nursing can be summarized into three major themes. These themes include nursing as helping and caring, socioeconomic status of nursing, nursing education and career aspiration.

4.1.1 Nursing as Helping and Caring
The overwhelmingly positive images of nursing as a caring and helping profession reinforce the public’s long held views about the role of nursing in society (Grossman & Northrop, 1993). As observed in literature examining the perceptions of nursing, the majority of respondents continue to identify nursing as caring (Degazon et al., 2015; Al-Kandari & Lew, 2005; Law & Arthur 2003). Comments about caring included responses such as helping, nurturing, serving, supporting and sharing (Law & Arthur, 2003). Al-Kandari & Lew (2005) found that being honest and caring were considered by Kuwaiti participants as the most important attributes of nurses. Law & Arthur (2003) found that the majority of HSS held a positive attitude related to caring for sick people; a major reason for students joining the nursing profession. This finding supported the results presented earlier by Stevens & Walker (1993) which showed that willingness to work with sick people and help people received the highest ratings for choosing the nursing as a career. According to Natan & Becker (2010) interest and enjoyment were factors to drive the decision to choose nursing as a career, although students who selected nursing were more likely aspired by the wish to help people. Rognstad & Polit (2002) also suggested that applicants wishing to study nursing shared a wish to
help others and desire for human contact, combined with the feeling of doing something useful.

The above findings were not different from earlier studies examining HSS’s perceptions of nursing. Grossman & Northrop (1993) indicated that majority of the participants (74%) believed that nursing careers provide opportunities to care for people and help them lead healthy lives. Another study by Barkley & Kohler (1992) indicated that 91% of the participants who identified the caring role of nursing, rejected the idea that nurses do not care or being mean. The study showed that majority of participants believed nurses were compassionate and kind.

The attraction to nursing because of its reputation as a “caring” profession should be exploited in the recruitment process. More importantly, these qualities must be articulated in the design of nursing roles (Law & Arthur, 2003). However, other studies clearly showed that other non-medical professions; such as radiography and physiotherapy were also perceived by students as caring professions. Therefore, nursing is not the only option for someone interested in caring for others. This reinforces the importance for the nursing profession to have a realistic view in relation to other non-medical professions (Miers et al., 2007).

Despite the above mentioned positive findings, HSS don’t seem to be very interested in nursing careers. This is most probably related to the negative perceptions possessed by the majority of HSS. The nature of some nursing functions associated with caring has been cited as negatively affecting the image of nursing by participants in other studies. Working with people who are sick or dying, as an example, were negative perceptions reported by a number of studies (Katz, 2007; Rossiter et al., 1999; Foskett & Hemsley-Brown, 1998). Another factor that provided a negative impression of nursing was the belief that nurses perform unpleasant tasks; such as providing care for patients with communicable diseases, and handling blood and bodily waste (Rossiter et al., 1999; Tang et al., 1999).
4.1.2 Socioeconomic Status of Nursing

In Al-Kandari & Lew (2005), the majority of respondents viewed the nursing profession as necessary and respected in Kuwait society. Other Arabic students in a study by Tang et al. (1999) agreed with the Kuwaiti students by reporting that nurses are respected and appreciated by others, as well as know a lot, and are powerful. Jan & Sikander (2012) agreed with these findings in that, nursing is perceived as a respected profession more than being a technical occupation.

Native American HSS in Katz (2007) saw that nurses had power and influence. For these participants, a salient and culturally related reason for choosing nursing was to be important to their ethnic groups. They also believed being a nurse was professionally similar to being a lawyer. Similarly, an earlier study by Kohler & Edwards (1990) found that 30% of the participants believed that the status of nurses and physicians was equal, although the same percentage of participants perceived nursing as a low status occupation.

The perception of nursing as a financially rewarding career was shown to be significant in many studies. According to the researchers, this trend was not surprising, given the overall reports in the literature about increases in nursing salaries. Participants in Katz (2007) claimed that a nursing salary would enable them to attain their financial goals; such as buying a house and a car. Law & Arthur (2003) reported that nursing was perceived by the majority of participants as a financially rewarding career with job security; which was in contrast with Bakalis et al. (2015), where respondents thought nursing did not offer job security.

Interestingly, the findings of these two studies are incongruent with other studies which reported that HSS were not interested in nursing because of their perceptions about salary (Degazon et al., 2015; Achilles, 2010; Unholz, 2003; Moore, 2001). For example, participants in Achilles (2010) stated that the salaries earned by nurses are very low. They added that they would join nursing if they were guaranteed to get jobs outside their country, where they would get higher salaries.
Comparing early research by Grossman et al. (1989) with more recent research, Katz (2007) and Warda (2001) showed that the socioeconomic status of nurses was not always positive; nurses were seen by HSS to lack power and influence. This reflects a general perception about nursing also held by participants in other studies. Law & Arthur (2003) also reported that negative perceptions held by students were related to nursing having a lower status compared to other professions. Students think nurses do not belong to an important profession (Unholz, 2003). Many students also thought nurses did not have a university degree, and did not “use their brains” at all (Tang et al., 1999). In contrast to the findings by Katz (2007), Tang et al. (1999) found that the majority of participants believed nursing did not fit their ideal career, primarily because they did not see nursing as influential. In many studies nursing was seen as a “customary job” with the characteristics of passivity, powerlessness, lack of independence, lack of knowledge and clearly defined career pathways, and inadequate long-term compensation (Trossman, 2003; Moore, 2001). This was very similar to findings reported by Achilles (2010) in which participants did not see nurses as capable of making decisions for themselves, or having independent practice.

Other negative perceptions the students held towards nursing also included working irregular times and a lack of support for family commitments (Jan & Sikandar, 2012; Law & Arthur, 2003; Moore, 2001). Students perceiving nurses as having no decision making power, even in matters such as their working hours and vacations as factors opposing their choice of nursing as a career (Rossiter et al., 1999; Stevens & Walker, 1993). These results were similar to Al-Kandari & Lew (2005) who claimed that 50% of the participants disagreed that nurses can choose their hours and vacations.

In addition, students in previous studies were concerned that nursing was for women (Katz, 2007; Law & Arthur, 2003; Sherman, 2000). Hoke (2006) stated that, long seen as an occupation for females, nursing is perceived as a supportive, subservient role and as a reciprocal job with skills mainly used at the bedside. In
addition, Trossman (2003) reported that the stereotypical picture of the public about a nurse is one of a “female in a white cap” who follows doctors’ orders unquestioningly (Chapter 3).

4.1.3 Nursing Education and Career Aspiration
Factors providing a positive impression of nursing included acquiring technical and interpersonal skills (Rossiter et al., 1999). Marriner-Tomey et al. (1990) reported that students thought a nursing career fulfilled the following criteria; care for people, work with hands and use high tech equipment, work very hard and very busy. This was supported by participants in Al-Kandari & Lew (2005) reporting that nursing is a profession requiring the use of advanced technology and a broad knowledge base. In addition, students in Tang et al. (1999) also perceived nurses as people who use their brains a lot, work very hard and work in a wide variety of settings. This last fact was not supported by Achilles (2010) where participants perceived nurses to always work in hospitals. Students with an interest in science has also been found attracted to nursing (Law & Arthur, 2003; Beck, 2000). However, the difficulty of science subjects was perceived as one of the strongest barriers for the participants to attain careers in the health professions (Thomson et al., 1992).

Other studies reported that, despite the declining proportion of negative opinions in areas of leadership and career advancement, there still persist a lack of knowledge about nurses’ involvement in college or university teaching, scientific research and executive roles (Degazon et al., 2015; Unholz, 2003; Law & Arthur, 2003). Sherman (2000) reported that students seen nurses to have a supportive role to physicians, were not aware of nursing career advancement, and could not envisage the different areas where nurses work. Yeager & Cheever (2007) demonstrated that a high percentage of HSS did not know that nurses engaged in high technology work, directed programmes, or held leadership positions.
The training cost was perceived as one of the strongest barriers to attaining health professions careers, including nursing (Thomson et al. 1992). According to Kohler & Edwards (1990) participants perceived nursing education as costly and too difficult for the potential return on their investment in status or monetary compensation. According to Law & Arthur (2003) the highest negative response reported in their study perceived the Bachelor programme to be too expensive. This was followed by students perceiving the nursing programme to be too difficult to study. These negative perceptions of nursing were similar to other studies (Katz, 2007; Kohler & Edwards, 1990). Participants in Achilles (2010) wished for the possibility of decreasing the number of years spent in nursing education. This might indirectly reflects the financial burden as students opting for nursing do not receive grants in Tanzania.

Grossman et al. (1989) reported that students lacked knowledge about opportunities for advancement in nursing and the expanded roles of nurses. The participants reported negative opinions of nurses managing large groups of people. They did not view nurses’ role in influencing national health policies or their impact on international health. The results reported by Tang et al. (1999) and Natan & Becker (2010) indicated inaccurate perceptions about the job context and career opportunities in nursing. Tang et al. (1999) identified that although unemployment of nurses is relatively low, more than half of the participants believed that nurses could not attain employment locally, overseas or outside of nursing. Nursing is also seen as having restricted autonomy and positions of seniority (Natan & Becker, 2010).

4.2 Nursing Students’ Perceptions and Motivations to Enter Nursing
According to the ICN (2005) the number of nursing students must increase to meet health care needs, considering the worldwide nursing shortages. Nurse educators have an obligation to maintain, or even increase the numbers of new students enrolling in nursing programmes, in order to help keep abreast with the public’s need for an adequate nursing workforce (Beck, 2000). Thus, knowledge of why
students choose nursing as a career becomes essential. O’Brien et al. (2008) suggested that, because individuals’ preconceived ideas of a particular career influence their decision to pursue that career, it is important to determine how students perceive nursing. It has been proposed that positive images of the nursing profession attract potential applicants into nursing, while poor images have negatively impacted recruitment into nursing (Seago et al., 2006; Hoke, 2006). Spouse (2000) found that students who enrolled in nursing programmes with clearly defined conceptions of how they should practice as nurses remained in the programme. The researcher claimed that awareness about the roles of nurses, inform students’ choice and the way in which they will engage in it.

4.2.1 Perceptions and Definitions of Nursing
Researchers indicated that nursing students had varied pre-existing perceptions about nursing (Cook et al., 2003). However, Holmstrom & Larsson (2005) claimed that the image of nursing among new recruits varies greatly, and will affect their attitudes toward their future role as nurses. This makes it even more important to closely examine these perceptions, and make efforts to influence them positively. In addition, Matutina (2008) suggested that conducting longitudinal studies is needed to follow students who joined nursing at an early age, in order to determine if their interest in nursing as a career resulted in their enrolment in nursing schools.

Several studies have described nursing students’ perceptions toward nursing and reasons for why students choose nursing as a career. To develop a framework for fostering student nurses’ professional identity, Cook et al. (2003) analysed students’ definitions of nursing. The research revealed three major themes of personal definitions of nursing; nursing as a “verb” (which included nurturing, caring, assessing, implementing, teaching, managing and advocating), nursing as a “noun” (which included profession, discipline, delivery system, holistic system, and connecting system), and nursing as “transaction” (which included promotion of health, promotion of self-care, prevention of illness and treatment of illness). The
researchers concluded that students had a wide range of pre-existing perceptions about nursing.

Granum (2004) described the perceptions of nursing students about nursing as a “theoretical subject”, and as a “function” at the beginning and at the end of their studies. Students perceived different forms of knowledge in the subject of nursing relating to various fields of knowledge within the discipline. Two main categories were identified; “patient-centred knowledge” which refers to knowledge that is directly relate to the patient; such as the knowledge of human being, caring, ethics and practical procedures, and “patient-peripheral knowledge” which refer to nursing theories, natural science and social science subjects. The functions of nursing consisted of two categories, direct-patient activities and indirect-patient activities. Direct activities refer to intimate nursing of patient like caring and helping, holistic approach and practical procedures, while the indirect activities related to administrative duties and patient education. In general, the direct patient activities, which represent caring, were more evident in the students’ descriptions of the functions of nursing. Despite the difference in geographical location, and the focus of both studies, Cook et al. (2003) and Granum (2004) agreed that the nursing students perceived nursing mostly as a caring profession. The participants in both studies could also see the other aspects of the nursing profession, when they referred to nursing knowledge as well as administrative roles.

Lyckhage & Pilhammar (2008) described Swedish nursing students’ image of the nursing profession. Three themes were disclosed; the nurse as an “idealistic helper”, the nurse as a “realistic developer”, and the nurse as a “young seeker”. In the first two themes, nursing occupation was connected with an intention to work as a nurse, and the students identified themselves as future nurses. The third theme reflected the attitude to lifelong learning. The theme related to the nurse as an idealistic helper corroborates earlier research by Cook et al. (2003) and Granum (2004) in that, the altruism and care is found to be central in students’ narratives. The idea of nursing as a vocation is represented in the first theme, and
the difference in students’ attitudes between this and the second theme, which focuses on professionalism, can be defined through the distinction between occupation as something to live by and vocation as something to live for (Lyckhage & Pilhammar, 2008).

An older study by Watson et al. (1999) found that caring and nursing were considered increasingly identical during the course of students’ educational experience. Similarly, Cook et al. (2003) found that caring was a dominant theme, which is consistent with more recent studies (Wilkes et al., 2015; Jirwe & Rudman, 2012; Roberts & Ward-Smith, 2010). In general, nursing was perceived by nursing students as a caring profession in many studies (Sand-Jecklin & Schaffer, 2006).

A study in China (Zhang & Petrini, 2008) found that more than half of the students held positive perceptions about nursing. The top highest positive perceptions were: nurses require strength, wisdom and love, not everyone is suitable for nursing, the words and actions of nurses influence patients’ health, nurses share the same importance in hospitals as doctors. In contrast, the four highest negative attitudes were the social prejudice; which has great influence on how nurses form their perceptions of the profession, the harmful effect of a long-term of three-part shift work on nurses’ health and family life, not choosing nursing if they were given a second choice, and that nursing work was always ignored by patients. The findings related to how a career in nursing can influence the social life of nurses provide strong evidence that culture plays a vast role in forming the perceptions of students about the nursing profession.

Negative attitudes were also reflected in a previous study done in Kuwait, where nursing students believed that nurses were physicians’ subordinates, and that their duties were similar to those of domestics (Al-Kandari & Ajao, 1998). Nurses seen as physician assistants was not unique to this study as it was also found by Lyckhage & Pilhammar (2008), except that it was seen positively as part of the important helping role of the nurse. In other studies, students also believed nursing
education is very difficult, and in some countries an expensive investment, given the low salary nurses receive after graduation (Kohler & Edwards, 1990; Grossman et al., 1989). Struggling with the theoretical elements of nursing education is not a constraint to these students only. Other studies identified that student nurses were dissatisfied with the academic components of their programmes (O'Brien et al., 2008).

Marriner-Tomey et al. (1990) reported positive perceptions by the participants in their study, however nursing was found to be lacking in these attributes: always have job, make a large amount of money, be appreciated; which was also reflected in Zhang & Petrini (2008), have respect, know a great deal, be a leader, be powerful, make decisions and work in a safe place. The participants in Seago et al. (2006) also raised a concern about the lack of independence at work, job pressure, and nursing being perceived as a women's occupation. Nurses seen to lack independence and decision making is of high concern for the potential effect on the safety of the public. Some students also perceived nursing as strenuous, underpaid and lack prestige (Rognstad, 2002). The findings of Seago et al. (2006) indicated that the image of nursing as a profession continues to be vulnerable, as it was considered by the majority of students to be associated with significant risk of injury, which is consistent with Marriner-Tomey et al. (1990).

4.2.2 The Impact of Nursing Education on Students’ Perceptions
According to Dal et al. (2009) undergraduate nursing students are prepared for their future work as registered nurses. Although education is important, individual characteristics and clinical settings are also essential to develop the knowledge of nurses. Many nursing literature focused on pre-registered student nurses’ images of nursing at entry, and how they subsequently change (Spouse, 2000). In General, literature suggested that nursing students exhibited limited awareness of what nursing programmes involves, and elementary concepts of professional identity (Harvey & McMurray, 1997). Educational systems that prepare future nurses include experiences that are important in the early development of nursing
identity. Cook et al. (2003, p.331) defined nursing identity as the “development of an internal representation for people-environment interactions in the exploration of human responses to actual or potential health problems”.

Attitudes and values can change with time. Studies showed that changes in perception occur during students’ education. It was suggested that students adjust explicit descriptions of their role as nurses, through a socialization process, to be compatible with those of their clinical colleagues (Spouse, 2000). Vanhanen & Janhonen (2000) maintained that students’ perceptions of nursing change as they progress through the learning experiences in their nursing programmes. Furthermore, Bolan & Grainger (2003) revealed that, as students went through the nursing programme, they identified discrepancies in what is actually involved in the educational experience and their pre-entry perceptions. This was cited by students as a major reason for withdrawing from the programme, which clearly emphasize that students’ perceptions reflect the educational experiences they go through during their nursing programmes.

The perceptions of nursing students were examined at different points in their nursing programmes; at entry to nursing, after clinical practice and before graduation. In addition, longitudinal studies were conducted to explore and explain changes occurring over time. It was reported that after their first clinical experience, the perceptions of nursing students about nursing changed. They suggested that the changes resulted from an improved understanding of the nurses’ role, the complexity of nursing and the high level of work involved in nursing (Sand-Jecklin & Schaffer, 2006). Tseng et al. (2012) found that after completing their clinical experience, students were better able to appreciate the essence and fundamentals of nursing, distinguish real situations from misconceptions of nursing, and realize that nursing was not a job for financial profit, but rather a career of morality and respect for life. After being challenged with ethical issues; such as facing end of life situations and reflecting on patients’ autonomy, students adjusted their values. An interesting conclusion from the
findings of this study was that, the clinical experience facilitated nursing students’ professional knowledge and mental growth.

Karaoz (2004) found that, at the commencement of their programme, students expressed narrow, traditional perceptions of the nursing profession. These students changed their definitions of nursing to reflect broader understanding of the caring role of nursing and its role in improving and protecting health, after completing their nursing course. Interestingly, Grainger & Bolan (2005) found that, students in their first year perceived nurses as compassionate and kind, much stronger than the students in fourth year. Miers et al. (2007) also suggested that commitment to clients amongst nursing students increased on qualifications.

Comparing the perceptions of first and third year students, Granum (2004) reported that as students moved to third year, they viewed nursing as holistic and became more professional; which is consistent with Safadi et al. (2011), with the patient as the focus. When it comes to describing the subject of nursing, the perceptions of first year students were limited to understanding the knowledge essential to treat patients, while the third year students defined other features of nursing; such as “different dimensions of being human” and “human being’s reactions” (Granum, 2004). Students usually come into nursing education with innate lay beliefs about nursing that require years of education to change, allowing them to socialize professionally into nursing (Cook et al., 2003). In Jordan, a study of nursing students’ perceptions over four years of the programme found that, nursing students’ perceptions changed from “lay altruistic” beliefs, to “theoretical medical technological” views of the nursing profession. Nearby graduation, perceptions of nursing as a science, human service and performing technical tasks became more predominant (Safadi et al., 2011). Contemporary nursing programmes provide particular emphasis on the concepts of caring and the description of emotional and behavioural responses that draw on interpersonal and technical knowledge and skills. Students observed this after leaving their
classrooms to clinical practice, which denotes a theory-practice gap (Mason-Whitehead et al., 2008).

Furthermore, Grainger & Bolan (2005) demonstrated that, when compared to students in first year, students in fourth year were more positive when regarding nurses as resource persons, patients’ advocates who protect patients, integrate theoretical knowledge into practice, capable of independent practice, value time at the bed side, and question physicians’ orders. Although the first year students strongly agreed that nurses update their practice constantly, the fourth year students held stronger beliefs that nurses make important contributions to patient care when having advanced degrees. These findings explain the fact that, as students progressed with their education, they develop a better professional self-concept, which refers to recognising the nursing profession with knowledge, skills and expertise, a finding consistent with Vanhanen & Janhonen (2000).

4.2.3 Career Intentions of the Nursing Students
Career plans of nursing students are of policy relevance in that they provide information about actual and potential retention in the health services. As university graduates, the nursing students have many career choices. An important goal for nurse educators is to retain students entering nursing programmes through graduation and entry into the nursing workforce (Sand-Jecklin & Schaffer, 2006). In Sand-Jecklin & Schaffer (2006) the majority of students had clear career goals of advanced practice in nursing with 47% expressing interest in pursuing further education and getting specialization in nursing fields. The attitude towards lifelong learning as reflected by nursing students revealed that the students viewed undergraduate nursing education as a platform (Lyckhage & Pilhammar 2008).

Studies from China, found that nursing graduates cited further study more frequently in their career plans, followed by joining nursing service and working abroad. Many nurses also joined venture medical supply, pharmaceutical companies or pursue advanced education in a medical specialty (Zhang & Petrini,
2008). These findings echo O'Brien-Pallas et al. (2001) and an earlier study by Williams et al. (1997) indicating that nursing education is used by some nursing students as a foundation course for other careers. Sometimes, nursing students select careers outside nursing as a result of gaps between their nursing education and clinical practice (Tseng et al., 2012). Zhang & Petrini (2008) reported that more than 50% of the participants chose to pursue a nursing career after graduation while 36% indicated that they would continue their studies. Another study by Dal et al. (2009) revealed that 63% of the students wanted to work in treatment services, while a minority wanted to work in education.

Anderson & Kiger (2008) stated that in nursing programmes, clinical practice is considered the bridge by which student nurses become real nurses. Lai et al. (2008) also found that perceived professional support and value proved to be important predictors of nursing students’ career intentions. It is also important to note that, the students who intended to leave did not experience hospitalization or being ill. The researchers proposed that the attitudes of staff nurses toward nursing students have visible influence on their career decisions.

In contrast with the above study, Tseng et al. (2012) showed that, after being exposed to the reality of nursing through the practicum experiences, nursing students become hesitant to decide on a career in nursing. Important factors to influence their decision include the unsatisfactory nursing work environments and negative perceptions toward nursing. The findings of this study showed that, although clinical experiences help students gain more confidence and become committed to nursing, being exposed to challenges and stressful situations in their clinical experiences, as well as their sense of increased accountability make them feel overwhelmed. Transitioning from academic knowledge to clinical practice is commonly identified as a period of challenges, stress, role adjustment and reality shock (Casey et al., 2011).
Summary

In this chapter, perceptions of HSS of nursing as a career were examined. According to the reported literature, the HSS have expressed both positive and negative opinions about nursing. The most positively identified perception was the images of nursing as a caring and helping profession. There were contradicting findings in relation to the socioeconomic status of nurses. While some HSS perceived nursing as respected, appreciated, knowledgeable and powerful, other students perceived nursing as a low status occupation, which does not satisfy their requirements of an ideal career. The HSS had contrasting opinions about nursing being a financially rewarding career and the availability of jobs. Based on the literature discussed in this chapter, it appeared that recruitment efforts should be focused on increasing school students’ awareness of contemporary nursing. Students also need more accurate and informed views of the nursing profession. Hook (2006) recommended that one way to help younger generations distinguish nursing as a career worthy of consideration, is through using research, modern technology and informatics to show that nurses are authorised to address worldwide problems.

The chapter also examined the perceptions of nursing students and their intrinsic and extrinsic motivations to join a nursing programme. The perceptions of nursing students are the result of complex processes including reasons for joining nursing education, understanding the connotation of nursing as a profession and planning careers (Zhang & Petrini, 2008). To strengthen the profession, Lyckhage & Pilhammar (2008) suggested that nurse educators and clinical nurses should use the students’ perceptions of nursing as starting points in nursing education and develop them in diverse contexts. The literature advocated that, in general nursing students believed that nursing is a desirable and financially rewarding career, yet it was perceived less attractive on some essential professional features; such as job independence and decision making. There is no doubt that the nursing
programmes and types of clinical experiences the students get exposed to have a
great impact on their decision to remain in or leave nursing.
Chapter 5: Significant Others and Media Portrayals of Nursing

The influential effect of parents, friends, Career Guidance Counselors (CGC) and nurses are fundamentally related to students considering a career in nursing (Miers et al., 2007; Al-Kandari & Lew, 2005). Miers et al. (2007) claimed that perceptions of young people about nursing have been positively and negatively influenced by the perceptions of parents, friends and by nurses themselves. However, the influence from CGC and friends were relatively less as compared with parents’ influence (Law & Arthur, 2003).

Neilson & McNally (2013) found that the influence of significant others; such as parents, guardians and CGC was very superficial with regards to advising high academic performing students about a career in nursing. Students reported that, they were strongly advised and influenced by significant others against choosing a nursing career. Students were regarded as being able to do something better than nursing as a career. This had an obvious effect on the decision of students not to consider a career in nursing. In addition, a previous study of Kuwaiti nursing students found that peer pressure and disapproval from family members negatively affected some students, who subsequently withdrew from their nursing programmes (Al Kandari & Ajao, 1998).

With regards to the middle school students, Matutina et al. (2010) claimed that, they are highly influenced by CGC, parents and peers, but also affected by teachers, role models and their environment at home, at school and in the community. Hoke (2006) supported this by proposing that middle school students formed their views of nursing based on their parents and friends’ perceptions.

On the other hand, many studies reported that the media has been identified as a prominent factor in the representation of the images and work of nurses, and subsequently on one’s decision to select a career nursing (Grainger & Bolan, 2005; Godfrey, 2000; Cunningham, 1999). The media provide information that
reflects positively, or negatively on students’ perceptions of the nursing profession (Al-Kandari & Lew, 2005). This chapter will explore the influence of significant others; including parents and nurses on the career choice of HSS and specifically with regards to the choice of nursing. The influence of CGC is examined in Chapter 6. This chapter will also examine the images of nurses and nursing as portrayed in the media. It will also reflect on literature examining the influence of media representation of nurses on the perceptions and status of nursing as a profession. There is a growing body of research analysing the image of nursing in the media in the West, however, no relevant literature has been identified from the Middle East or Bahrain.

5.1 The Influence of Parents and Family

It is the case that in Arabic society the influence of parents and families on children’s and young persons’ choice is more profound than in Western society. Abudabbbeh (2005, p.430) stated that “unlike in Western values, major decisions; such as the choice of a partner or a career, are impacted by family expectations”. Studies related to parents’ perceptions of nursing, and the influence they have on the choice of their children of nursing as a career is sparse and less well understood. Existing literature showed that parents, guardians and families play significant role in the career choices and occupational aspirations of their children (Nota et al., 2007). Children and young adults are often uncertain about pursuing, or even exploring diverse career opportunities without the support, or approval of their parents (Taylor et al., 2004). In Palestine, a survey found that only 7% of the youth participants said they were ready to make their own career decisions against the will of their parents, and 35% said that their parents make decisions on their behalf. In addition, a study in the UAE asked students to indicate whether they have accessed careers advice, and if they have, how effective was this advice in terms of helping them to decide on their study and career intentions. The majority of students reported that they mainly access careers advice from family and friends (Haukka, 2013).
Romem & Anson (2005) contended that support of a parent or spouse, as well as early exposure to nursing are important determining factors for decisions to study nursing. Other studies have also established that young adults cited parents to have central influence on their career choices (Wolfe & Betz, 2004; Knowles, 1998). Studies indicated that nursing applicants often make decisions to join nursing without the support, or against the wishes of their families or schools (Spouse, 2000). According to Law & Arthur (2003) two thirds of the respondents stated that their parents influenced their career choice positively. Unfortunately, school students reported that they were not encouraged by their adults to enter nursing (May et al., 1991). In KSA, Mansour (1992) identified that although parents perceived nursing to be a humanistic profession and that it is acceptable for men to be nurses, they did not approve of nursing as a career for their sons and daughters. The parents believed that nurses work harder than other health care professionals, are mainly carrying out doctors’ orders and cannot make critical decisions.

According to Knight et al. (2011) careers such as law, medicine and engineering are perceived by parents as more prestigious than nursing. Mansour (1992) reported that parents perceived nurses to be much lower than doctors and pharmacists, and slightly higher than secretaries and laboratory technicians. School students and their parents may not be aware of the knowledge required for making critical decisions about patient care, the many specialty areas in nursing, and the ability to practice at the advanced level. Mansour (1992) indicated that, parents had inaccurate information about nurses and that they did not know that nurses can work in administration, education and research. The findings by Williams et al. (1997) were not in agreement with the above findings. The researchers found that a minority of students considered the influence of their family and professional experience as important motivational factors in selecting a career. In addition, Kohler & Edwards (1990) suggested that parents, friends and CGC did not demonstrate significant influence on students’
perceptions of a career in nursing, except when a mother or a close relative was a nurse. A study conducted in Turkey by Baykal & Altuntas (2011) reported that parents perceived nursing positively as a helpful, sacred profession which has high probability of employment. They also recommended nursing to others and had no problem with males joining nursing. Although the majority of mothers and fathers favoured not to get involved in the career choice of their children, they still had a significant influence. The role of parents and other family members in influencing the career choice of their children is not very clear with regards to whether they positively or negatively influence this decision. Thus, it is very crucial that accurate information about the nursing profession and the opportunities available within the profession be made accessible and visible for potential nursing students and their parents to help them make informed decisions about a career in nursing.

5.1.1 Parents’ Education, Occupation and Family Income
It is believed that the occupation and educational level of parents introduces a level of influence on students’ career choices. Research have been conducted on the demographical characteristics of students’ parents receiving education in different fields and levels, however research related to the parents of nursing students is very limited. Baykal & Altuntas (2011) reported that the majority of fathers graduated from secondary schools, while students’ mothers were mostly graduates of elementary schools. Fathers were typically civil workers, servants, or old age pensioners and mothers were unemployed. In addition, parents mostly lived in urban areas. This was congruent with the findings by Aslan et al. (2005) who demonstrated that the parents who participated in their study, particularly mothers, were mostly of low educational level, and that the majority of families (92.6%) came from a moderate economic status.

May et al. (1991) identified the variable related to parents’ education in their study. They showed that parents with a bachelor degree, or above had significantly less positive perceptions towards nursing than those with high school education, or less. It was concluded that parents with lower educational levels usually have more
positive perceptions towards nursing as a career. Lerner (1991) however, disagreed with this study in claiming that, students' interest in a career in nursing increased as their parents’ educational level increased.

A cross sectional study by Grossman & Northrop (1993) found that the occupations of students’ mothers influenced their career choice more significantly than the occupations of their fathers. Law & Arthur (2003) found that fathers’ occupations had no significant influence on students’ decision to consider a career in nursing. The influence of mothers’ occupation on students’ choice of a nursing career in Law & Arthur validated Borrill's (1988) observation in that, interest in a nursing career can most frequently be inspired by having family members or friends who are nurses.

Family income was also identified as a predictor of students’ intention to study nursing. Researchers found that families who were in the lower economic levels held significantly more positive attitudes towards a nursing career than those in the higher economic levels (Law & Arthur, 2003; May et al., 1991). Hollup (2012) in a study of 47 nursing students coming from different age groups, genders, ethnic and religious backgrounds, found that the majority came from families with lower-middle, or lower socio-economic status. In addition, an earlier study reported that most nursing students in Nigeria were primarily females, and that the majority came from families with lower-middle to lower status (Adejunmobi, 1986).

Law & Arthur (2003) concluded that the ratios of students considering nursing decreased as their family income increased. The majority of students who considered nursing were from families in the low-income group. In contrary, Tang et al. (1999) stated that participants perceiving their parents’ annual income falling into the lower-income group were less likely to study nursing than those who were perceiving their parents’ annual income falling into the middle-income group. Unlike in previous studies, parents’ education, fathers’ occupation and family income were not found to be predictors of intention, which defies the findings that
students joining nursing come from low socioeconomic background (May et al., 1991).

5.2 The Influence of Nurses

According to Cohen et al. (2004) having a friend or relative as a nurse did not encourage students to join nursing. The researchers concluded that nurses themselves redirected adolescents from nursing or served as a “sharp warning” inviting caution. This was supported by Schnautz (2003) who indicated that nurses actively discouraged nursing as a career choice, and often contributed to propagating the negative images of nursing, portraying an unenthusiastic depiction of nursing. According to Mansour (1992) participants who had a lot of negative perceptions about nursing, indicated that personal experiences with nurses were the main source for their perceptions. Brodie et al. (2004) revealed that because of the over increasing stress, many nurses acknowledged they would leave nursing if they could. In addition, Pickersgill (2001) claimed that nurses who were parents vigorously stated that they would not encourage their children, or others to consider nursing as a career. These findings project negative images of nursing as a career choice to their children and others (Neilson & McNally, 2013).

In contrast, other studies indicated that students who knew a nurse had more positive perceptions toward nursing and slightly higher intentions to attain a career in nursing (Al-Kandari & Lew, 2005). Law & Arthur (2003) reported a significant relationship between students having a nurse role model, and considering a career in nursing. Students who had their mothers, or close relatives working in nursing scored significantly higher on perception for nursing as a career.

Kersten et al. (1991) found that nurses influenced nursing students’ images of the nursing profession, and henceforth making their career choice. In addition, other studies found that the choice of nursing was influenced by personal interactions with nurses (Yeager & Cheever, 2007; Stevens & Walker, 1993). Kohler & Edwards (1990) claimed that positive perceptions of nursing were significantly
associated with knowing a nurse, but not with selecting nursing as a career. The effect of having a role model cannot be underestimated. Adolescents tend to idolize successful people, hoping to be like them someday (Al-Kandari & Lew, 2005). Studies have shown that having past experience with nurses or illness, and knowing a nurse role model have positively affected students’ choice of nursing as a future career (Rossiter & Yam, 1998; Stevens & Walker, 1993; Mendez & Louis, 1991). These findings are consistent with Kohler & Edwards (1990) who indicated that having prospective nurses in practice may help attract more adolescents to choose nursing careers.

A number of international studies also reported that previous experiences, from own or family members’ illness, part-time work in health care services, encounters with patients and nurses, are influential factors in students’ choice of a nursing career. For example, Larsen et al. (2003) found that past experiences with self or a loved one being ill or hospitalized, past experience with working in health care, and having a family member or friend who is a nurse motivated students and influenced their decisions to become nurses. In confirmation of this research, many respondents in McLaughlin et al. (2010) conferred that caring for a sick relative stimulated them to apply for nursing or strengthened existing thoughts. Having a friend or family member working as nurses and experiencing caring for others influenced students’ images of nursing, and contributed to their decision to join nursing (Hollup, 2012).

5.3 The Influence of Media

Representation is defined as the way people create meaning of the world around them, through images, language and sound. When referring to media specifically, representation refers to how images are created through popular narratives that portray people, events and actions (McHugh, 2012). Nurses have long been concerned about the portrayal of nursing in the media. Summers (2010) stated that the way nursing is portrayed in the media failed to provide a fair and accurate reflection of what nursing really is. Hall et al. (2003) reported that by examining the
media images of nursing for more than two decades, researchers recognized the need to communicate more realistic representations of nursing; as “what nursing is said to be, constitutes what nursing is” (Kelly et al., 2012, p.1804).

The images of nurses in the media changed with time to reflect the historically changing image of nursing. The portrayals of nurses in the media have always been questionable with regards to their accurate representation of the nursing profession, however researchers found that nursing image was more positive during the war periods (Luchesi et al., 2013; Lusk, 2000). Wallace (2007) indicated that, during World War II, the mass media recognized nursing as a profession that required skills and knowledge. Nursing was shown in most British, Hollywood movies and recruitment material as an honourable profession, with high moral (Luchesi et al., 2013).

According to Summers (2010) the roots for the constant failure of the media to represent a more realistic picture of nursing extends back to the start of the modern profession. Nurses in the media have been depicted with many images that rarely represented what nurses really do, or what they really are. Luchesi et al. (2013) reported that, at a period of time post-war, nurses were portrayed by the media as heroic, yet feminine and willing to serve the medical profession. The medically subordinate image of nurses has also been described by Summers (2010) who reported that traditionally, nurses were represented as highly submissive to physicians, and that they were portrayed as angelic and relatively low-skilled. The feminist portrayal of nurses in the media characterized nurses as nurturing, altruistic, duty-bound, compassionate, dedicated, and self-sacrificing (Wallace, 2007). From these characteristics, it appears that media narratives frequently represented nursing as a spiritualized calling rather than a profession (Gordon, 2006). Additionally, Masters (2005) reported that nurses have been portrayed in the media either as young, seductive females, or on the opposite as being rough and threatening. Harding et al. (2008) specified that the “non-sexual”
touch that is often part of nursing care has been instilled in the media with sexual meaning. Until the 1990s, novels, films, cards and jokes disseminated the image of young nurses as objects of sexual desire, and male nurses as objects of sexual threats. This type of stereotyping and associated assumptions does not only make male nurses feel vulnerable, but also affects the patients and other health care providers (Martin & Ebrahimi, 2013).

### 5.3.1 The Impact of Media Images on the Nursing Profession

Several publications have been identified that explored the impact of media on the image of nurses, and the nursing profession. Summers (2010) believed that what we see and hear affects what we think, and that affects what we do. Wallace (2007) adds that what comes to mind when the term “nurse” is read or heard depends on prior experiences or associations with the term. If the association has been primarily with the media, a variety of images might be recalled. Turow (2012) argued that media images, lead many people to develop expectations of those professions that are similar to media portrayals, especially with professions such as nursing, with which the viewers have had few personal experiences. Consequently, images of nurses portrayed by the media resulted in the formation of the overall public image of nursing (Takase, 2005). Once the public’s images of nursing have been formed by a “fictional nurse” portrayed by the media, this image will serve as a basis for other fictional nurse images (Takase, 2005). These stereotypes may enhance, or alternatively degrade the value and status of the nursing profession (Weaver et al., 2013). According to Berry (2004, p.14) “a profession’s media image can be a measure of its political, social, and economic value”. The media portrayals are accused of creating an “image crisis” for the nursing profession (Wallace, 2007).

Nursing images generated by the media have the power to mediate dominant ideas and values about nursing, which may have social implications on the profession (Kelly et al., 2012). Unluckily, the inaccurate images about nursing in the media predisposed public perceptions and diminished nurses’ respect among
the public and other health professionals (Heilemann et al., 2012). They have also led to a poor public understanding of the important roles of nurses in the delivery of health care, and affected the numbers and quality of people choosing a career in nursing (Luchesi et al., 2013). The societal image of nursing have been very much linked to successful recruitment and retention of nurses (Cabaniss, 2011). Nursing shortages were linked to the failure of the profession to attract talented recruits to nursing, as well as increased attrition rates by nursing students, which allied with the misrepresentation of nursing in the media (Heilemann et al. 2012, Godfrey 2000).

According to Czarny et al. (2008) there have been continued concerns about the influence of media images on undergraduate nursing students. Since media images are readily available, it is conceivable that these are the images that comprise the source of perceptions of nursing for a majority of perspective nursing students (Wallace, 2007). Weaver et al. (2013) explored the perceptions of nursing students about the portrayals of nursing on medical television programmes. The participants acknowledged some educational and recruitment values in television programmes, and indicated that watching these programmes helped them make the decision to become a nurse, however they reported concerns about the television having negative influences on the nursing image. Students noted that nurses were invisible on screen; that is television programmes often featured doctors rather than nurses, and that nurses were often represented negatively while doctors were represented positively. They believed that the programs did not illustrate the extent of influence nurses have on patient care, safety and rehabilitation. Donelan et al. (2008) pointed that the media will continue as an important tool engaging the population to consider a nursing career; however, the findings in other studies (O'Brien et al., 2008) reported that students considered the media to be less influential. Similarly, the 495 nursing students in Larsen et al. (2003) indicated that television/media was the least influential factor in their choice of a nursing career. Weaver et al. (2013) established that nursing students
believed there are no modern nurse role models to market nursing, and help increase the awareness of the public about nursing.

Nevertheless, there was anecdotal and research evidence suggesting that negatively stereotyped images of nursing lead to a negative impact on the nursing profession itself and its practitioners (Wallace, 2007). Berry (2004) argued that demeaning press coverage can undermine nurses' morale. It can also undermine nurses' self-image, their self-confidence, beliefs and values, which consequently impact on the effectiveness of patient care (Heilemann et al., 2012; Fletcher, 2007; Takase et al., 2006). Furthermore, Ferns & Chojnacka (2005) anticipated that the inappropriate portrayals of nurses can contribute to verbal and physical mistreatment of nurses while in the job.

Assumptions related to class, power and economics has always underpinned the public narratives concerning nurses (Fealy & McNamara, 2007). It has been contended that media stereotyping eventually influence government and policy makers’ decisions about resource allocation for research, education and service (Luchesi et al., 2013; Heilemann, et al. 2012; Kelly et al., 2012). These negative images may lead to problems related to inadequate staffing in hospitals, which can set up unsafe conditions for nurses and patients (Heilemann et al. 2012). Buresh & Gordan (2006) added that the poor depiction of nurses in the media has resulted in the unsatisfactory salaries that are not proportionate with the nursing expertise.

These findings lead to conclude that, the role of different media; including television, magazines, and newspapers in reflecting positive attitudes related to the nursing profession needs to be strengthened (Al-Kandari & Lew, 2005). And because the nursing organizations have expressed constant concerns about the portrayal of negative nursing images in the media, this dual weapon should be monitored carefully to ensure a positive image of nursing is always portrayed. Wallace (2007) proposed that, the media with its “agenda-setting” capabilities can be used to reconstruct the nursing images. To influence recruitment to the
profession, presenting nurse role models is essential, whether real or fictional. Weaver et al. (2013) established that nursing students believed there are no modern nurse role models to market nursing, and help increase the awareness of the public about nursing. According to Mansour (1992), Saudi parents and university students suggested the need for mass media education as a strategy to improve recruitment in nursing. They stated that mass media education is essential in correcting the misconceptions about nursing. The care provided by nurses need to be visible in the context of other health professionals care and distinct from culturally gendered, familial forms of personal care (McHugh, 2012). Heilemann et al. (2012) suggested that media writers can be attracted to stories produced by nursing experts, because they are captivating and realistic. However, nurses need to have better knowledge about the media to improve their collaborations with media professionals.

**Summary**

The expected future demand for nurse labour challenges the health professionals to look more closely at potential students’ perceptions of nursing and nursing careers, and consider how these perceptions are shaped. The literature strongly suggests that nurse leaders and educators must know the reasons why students choose nursing as a career and who, or what influences their decision in order to achieve effective recruitment and retention of nursing students (Cho et al., 2010). This will support the development of recruitment strategies that are more appropriate than just following a general approach, which is typically used in recruitment.

Students perceptions of nursing were found to be influenced by personal experiences, significant others, and socio-demographic factors. Although the decision to choose nursing as a career is determined by many factors among which the desire to help and care for others is predominant (Hollup, 2012), the influence of parents' and significant others opinions about nursing appeared to have a great impact on students' choice of a nursing career. This suggests that
aggressive marketing and recruitment efforts by schools of nursing be targeted not only at the students themselves, but to the students’ parents, peers, and CGC. The important influence of nurses acting as role models and for students in their career choice should not be ignored. Nurses need to take part in recruitment strategies planned to promote the nursing career amongst school students.

The media is believed to underrepresent professions who do not possess equal standing or visibility in the public sphere, including nursing (McHugh, 2012). Kelly et al. (2012) encouraged that nurses use their power to challenge any negative stereotypes that damage the identity of nurses. For many years, nursing leaders, researchers and activists have called to change the negative stereotypes of nurses in the mass media, however there is a need for stronger actions to be taken. Nurses also need to be motivated to acquire skills and think creatively and collaborate with other professionals to influence the ways that nursing is represented in the media (Heilemann et al., 2012). Researchers have called for the education of the public about the realities of the nursing profession, and to reduce the gap between the inaccurate media images and scientific knowledge of nursing (McHugh, 2012).
Chapter 6: The Role of Career Guidance

Career guidance counselors and advisors have been identified in a number of studies as important influences in HSS’s career decisions (Cohen et al., 2004; Borycki & Samuel, 2001; Alexander & Fraser, 2001). It was shown that, as students progressed through the school system, their attitudes towards nursing grew more negative (May et al., 1991). In addition, Grossman & Northrop (1993) indicated that young students often have false perceptions about nursing that are not favourable to the choice of nursing as a career. Therefore, ensuring that CGC are sufficiently informed and have realistic perceptions of nursing as a career choice is fundamental (Bolan & Grainger, 2005). Furthermore, improving the awareness of CGC of the expanded roles of nurses and opportunities available within the nursing profession also becomes vital.

In this chapter, light will be shed on the background of career guidance, perceptions of CGC and awareness of nursing as well as evaluate the influence the CGC have on students’ choice of a nursing career.

6.1 Background of Career Guidance

Career guidance, career counselling and career coaching are often used interchangeably worldwide. In dictionaries, career counselling is defined as coaching or mentoring on issues related to individuals’ career choices. Career counselling is also defined as the process of helping individuals understand themselves and the world of work in order to make decisions related to education, career, or life. They also refer to the professional counselling activities provided by practitioners, who combine their knowledge with counselling techniques to provide advice to individuals and support them to face difficult situations and make complex decisions. With the emergence of more diverse professional opportunities and career options, career counselling supports individuals in making the right choices about career development, career paths, and career change. Hughes & Karp (2004, p.3) defined career counselling as “providing access to information
regarding career awareness and planning with respect to an individual’s occupational and academic future that shall involve guidance and counselling with respect to career options, financial aid, and postsecondary options”. CGC on the other hand, help individuals with tasks related to self-analysis and self-assessment. They then match individuals’ interests, abilities and skills with a variety of occupations. They also assist individuals in identifying available job opportunities and clarify diverse job roles. Overall, they support individuals in making informed career decisions, and defining appropriate career paths in order to maximize their chances for career choice success.

According to Hughes & Karp (2004) career guidance as a profession got its start at the beginning of the 20th century with the obligatory education movement. Vocational education in general was strongly supported at the time, as high schools became institutions for the masses that required training for their future industrial roles. Hence early guidance and counselling were vocational in nature, with the additional aim of assisting new Americans in entering the workforce. The father of the vocational guidance movement, Frank Parsons, became known for applying a more scientific model to career guidance than had been done previously. The 1920s and 30s saw an expansion of counselling roles from the strictly vocational to the social, personal and educational. The diversification of the school counselors’ role continued in the 1970s, with the special education movement. At this time, the role of counselors increasingly focused on serving the needs of disabled and special education students. In the current century, career guidance has been introduced to schools and the roles of counselors have shifted and become more miscellaneous (Hughes & Karp, 2004).

Today, career development is extremely important for young people, who are more than ever motivated, but have no clear directions (Schneider & Stevenson, 1999). Giving the youth the knowledge and tools to plan for their future realistically should be a primary goal of education. According to Hughes & Karp (2004) nearly two-thirds of former students join colleges immediately after high school; however more
than one third leave within two years, without receiving any degrees. Therefore, students should be provided with the necessary tools to set their career goals. Career guidance can help them understand the skills and education they need to meet their goals. According to Hendrickx & Finke (1994) career counselling has long been a function designated to CGC in high schools. CGC are a key source of information for students deciding on a future career path (Mignor et al., 2002; Alexander & Fraser, 2001). Because career counselors are relatively readily accessible to students, they are believed to have long term influence on students’ decisions regarding continuing learning, and are considered to play a substantial role in their future career choices (Fraser et al. 2003). Therefore, they are valuable “recruitment targets” for nurse educators. It is vital that CGC have positive perceptions about nursing and better awareness about the opportunities available in nursing (Hendrickx & Finke, 1994).

6.2 Career Guidance in the Middle East
Carson & Altai (2011) reported that, career guidance, or what was so called “vocational guidance” was discussed by Muslim scholars 1,000 years before it was founded by Frank Parsons in the West. However, according to the limited available literature, career guidance is still in its infancy developmental stage, and is still facing difficulty to establish its firm position (Sultana, 2014). According to Edge (2013) career guidance is practically unknown in the Arab world, with many youngsters uninformed about career opportunities available in the public and private sectors. A very recent study by Sultana (2014) compared the development of career education and guidance in eight Arab countries from the Middle East and North African (MENA) region. At present, career guidance is being given increasing attention by policy makers in many of the MENA countries. However, most of the career guidance programmes available for young people are provided by private secondary schools and universities. That is mainly because private institutions consciously benchmark themselves with their counterparts in the West (Sultana, 2014).
Jordan was one of the pioneers to develop career guidance when compared to other MENA countries (Hansen, 2006). A web-based career guidance system called “Al Manar” was established to meet the needs of the young Jordanians to select the specializations that suit their interests and even find jobs. Al Manar project opens a whole new world of career opportunities for the young generations and provide them with a career road map to facilitate their job searching and career decision making (http://www.almanar.jo).

The United Nations Development Programme (UNDP) (2012) report has led to the initiation of career guidance in many of the MENA countries; such as Syria and Lebanon. The UNDP report provided an objective analysis of the status of career guidance in the Arab region, and stressed the urgent need for effective intervention for the establishment of proper enabling environments stimulating the future generations and their preparation for the knowledge society. The first Career Guidance Centre in Syria was launched in 2010 as part of the “Establishment of a Pilot Career Guidance Centre in Syria” project. The center aimed to tackle the issues related to unemployment, and introduce the concept of career guidance and counselling (UNDP, 2010). Furthermore, Career guidance was established in both Universities and in several public schools across Lebanon, as a result of the psychological consequences of social change resulting from political instability in the country (Ayyash-Abdo et al., 2010). Egypt set up a national task force that aims at proposing a national strategic plan to promote career guidance (European Training Foundation, 2010), and following French models of orientation, Tunisia and Morocco have developed trained cadres of career guidance specialists who provide services to schools (Sultana, 2014).

It is unfortunate that most of those initiatives are precarious and short-lived, first because of the recent political instability across the region, and second because most of them are dependent on external, time-bound funding (Sultana, 2014). Sultana & Watts (2008) suggested a number of interrelated economic, social, cultural and political challenges facing the development and sustainability of career
guidance in MENA countries. One of the key problems is related to the unavailability of reliable, up-to-date and easily accessible information about the labour market needs, which much of the career guidance is built on.

Another highly important obstacle is related to the cultural construction of the traditional family system, where the individual is viewed as part of a group (Chapter 3). According to Sultana & Watts (2008) the notion of career guidance might be seen as inappropriate by some families, as respect towards elders and parents induce young people to follow pathways decided for them by the family. This has implications for the concepts of self-efficacy and self-determination when it comes to career choices; many of the young members are obliged to join medicine and engineering which are believed to provide high social status and financial security (Sultana, 2014). Moreover, young family members are expected to commit themselves to family business (Sultana & Watts, 2008). In addition, gender has represented another concern for career guidance. Choices for the young females are restricted by their families refusing to permit them to enrol in distant institutions that require daily travel, or to work in predominantly male environment (Nasser & Abouchedid, 2006). So, many individuals may not bear in mind their own preferences and personality when considering a potential career, despite their awareness of various job opportunities.

In the GCC countries, governments have considered several initiatives to develop career guidance. As an example, a nation-wide comprehensive research project has been conducted in Bahrain to identify existing, evolving and future labour market requirements and skill deficiencies in terms of individual occupations, occupation sets and skills groups. The project aimed to serve as a basis for career guidance and awareness activities by academic and training institutions across Bahrain (Tamkeen, 2009). Bahrain has developed a number of initiatives to reinforce career guidance in the country. Tamkeen (http://www.tamkeen.bh), is a government organization that aims at supporting the youth with the education and skills they need to enable them to assume jobs required by the labour market in
the country. Tamkeen, in partnership with other organizations in Bahrain, is offering Bahraini secondary school students unique opportunities to develop a strong vision of higher purpose in choosing careers by underwriting the “Careers with a Purpose” module. The programme, which is integrated into one academic semester in secondary schools, is designed to reach Bahraini HSS. “Careers with a Purpose” helps the youth understand career opportunities, and highlights the importance of seeking careers that are suitable for their potentials and goals (Tamkeen News, 2010a). In addition, Tamkeen publishes “Discover Life after School”, which is intended to improve the awareness of different economic sectors in Bahrain through the provision of guidance and advice about appropriate fields of study to students, and promote their understanding of educational endeavours (Tamkeen News, 2015). In recognition of the important role of nursing in the health services, and in response to the high demands for more national nurses, Tamkeen took a distinguished initiative to support nursing in Bahrain, by sponsoring more than 379 nursing students since 2008 (Tamkeen News, 2010b).

Donn & Al Balushi (2013) reported on career guidance initiatives in Oman. The authors recommended that career guidance in Oman cannot function without linking capital between industry sector organizations and schools. More innovative initiatives have been reported by Qatar, KSA and UAE. Led by the National Human Resource Development fund, KSA is implementing a major career guidance project. The “National Labor Gateway” is a nationwide government initiative to create a central access point for all participants in the Saudi labor market, including universities and schools. The project launched ‘Doroob’, a web portal offering Saudis free access to a selection of e-learning courses, which cover a broad range of career education topics from self-discovery and assessment to specific skills; like writing curriculum vita and interview preparation (Taibah & Kattan, 2015).

Edge (2013) identified an initiative taken by Qatar to invest in career guidance. Qatar-based “Silatech” is an effort to help young people in the region find possible
career opportunities. The initiative created the “Tamheed” programme, an expert system to help CGC identify personality strengths and provide personalized advice in relation to education, training or career paths. “Tamheed” is an online psychometric assessment tool that supports young people in making more informed and objective decisions in many areas; including career guidance, training and recruitment. “Tamheed” has been introduced to a number of secondary schools and colleges in Qatar. Efforts are also in place to develop a skilled workforce within Qatar and throughout the Arab world.

Realizing the significant role of career guidance, the Ministry of Education in the UAE took an unprecedented step in the Arab world by launching the “Vocational Education Guidance” project in general education, and unveiled the national document for career guidance. For the first time, the project created the position of academic counselors in public schools, with a fundamental mandate to advise students on careers and specializations in high demand in the local labour market (Gulf News, 2012). According to Haukka (2013) 64% of the students participating in the survey stated they received career guidance which they considered to be effective. The participants indicated that the career guidance they received provided them with knowledge about their preferred future job and industry sector of employment.

In addition to these broad country initiatives, career guidance has been introduced to schools and universities in a number of GCC countries, including Bahrain. These initiatives are led by both Ministries of Education and the private sector. In schools, career guidance has been included in the curriculum as discrete subjects allocated weekly slots in the timetable. The integration of career guidance in the curriculum is increasingly on the agenda of many Arab countries (Sultana, 2014). However, there was no literature, or information related to career guidance focusing on nursing available from any one of the above mentioned countries.
6.3 Career Guidance Counselors’ Perceptions and Awareness of Nursing

In general, the literature contains more studies on HSS’s knowledge and perceptions of nursing than it does on high school career counselors. Bolan & Grainger (2005) conducted a study in Canada to determine high school CGC’s attitudes regarding nursing. Generally, CGC had realistic attitudes of nursing and recognised personal and cognitive characteristics of students that would support success in nursing. Junior and senior high school CGC perceived nurses as being more professional, having more responsibility and credibility as a health care team member, they were better educated, have expanded roles that are more specialized and involve advanced technical skills. It was found that while CGC recognized the advances in nursing, they perceived this somewhat negatively, as it has resulted in increased demands, workload, and stress, and less time for caring.

Hendrickx & Finke (1994) examined the attitudes of high school CGC about nursing as a career. CGC perceived the profession positively, and the majority stated they were well informed about nursing. They viewed nursing as a career that helps people live healthy lives and care for individuals, families, and communities. Nurses were also viewed as having leadership roles, and that a career in nursing provides the opportunity to have financial success, to teach in a college, to manage large groups and to influence national health policy. Research was seen by the CGC as an opportunity in nursing, and so was becoming a master at technical instrumentation.

Opposing perceptions were presented by a number of other studies. Hendrickx & Finke (1994) claimed that CGC frequently expressed negative perceptions of nursing as a career, and lacked awareness regarding the opportunities available in nursing. These findings are congruent with Mignor, et al. (2002) who reported that school CGC rated nursing lowest as a profession. In addition, Blasdell & Hudgins-Brewer (1999) demonstrated that CGC described potential nursing candidates as kind, compassionate and obedient. They also viewed them to have moderate academic aptitudes, minimal leadership and decision making abilities. The CGC
identified assertiveness, leadership and decision-making as skills not required for nursing, but are important for professions; such as medicine, engineering and education. This was further endorsed by Naish (1996) who found that generally, CGC held negative perceptions of nursing, and felt that nursing was for females with limited academic abilities; which was prejudiced by media representation of nursing.

Mignor et al. (2002) conducted a survey to evaluate the knowledge of high school CGC in Mississippi about different aspects related to nursing; including the educational processes and potentials for ascending mobility in nursing. The majority of CGC reported having good knowledge about the nursing profession to accurately counsel their students. They viewed nursing as a profession that offered both career diversity and upward mobility. Lippman & Ponton (1993) investigated the image of nursing amongst 313 high school CGC in the United States. They found that 88% of the participants valued the nursing profession. The CGC were able to recognize the different levels of nursing education, and identified that the Bachelor of Science in nursing was required to provide quality nursing education.

Hendrickx & Finke (1994) suggested that, as important influences to prospective nursing students, CGC have been identified as an important link in the provision of an accurate picture of nursing to HSS. However, CGC may not always have the accurate picture themselves. The awareness of the CGC about what nurses do was examined in Bolan & Grainger (2005), where the participants identified the roles and responsibilities they believed nurses to have. The roles included administrator, coordinator, teacher, and case manager while responsibilities included health promotion, prevention, patient education, and family counselling. However, it was interestingly noted that, the majority of nurse responsibilities identified focused on the direct caregiver role; such as meeting clients’ physical needs and administrating medications.
King et al. (2007) conducted a study in Australia to identify the perceptions and awareness of high school CGC of nursing as a career choice. The study aimed to replicate another study by Bolan & Grainger (2005). The findings suggested that, CGC recognized the collection of qualities required for nurses, and the complexity of nursing practice in the provision of direct patient care. The personal attributes identified most frequently included caring, interpersonal and leadership skills, strong work ethics and being able to think independently. CGC recognized the need for strong academic ability to become a nurse. While the majority of these attributes were provided in Bolan & Grainger (2005), team player was a new attribute emerging in the study. There was diminutive awareness of role diversity and opportunities presented by nursing, and few CGC revealed awareness of the scope of nursing practice encompassing roles related to research, education or management.

6.4 The Influence of Career Guidance on the Choice of Nursing
There is evidence in the literature that CGC have a remarkable influence on students’ choice of nursing careers (Kersten et al., 1991). King et al. (2007) proposed that CGC influence HSS’s perceptions of nursing, and therefore may influence their choice of a career in nursing. This was supported by Hendrickx & Finke (1994) who found that 96% of the CGC suggested nursing as a career to their HSS. On the other hand, King & Sherman (1990) reported that students claimed that their CGC were not actively promoting careers in nursing, despite being well informed about the national shortage of nurses, and the diversity of nursing education programs and nursing practice roles.

The role of CGC is not only critical in supporting the recruitment of school students into nursing programmes, but also in providing them with accurate information. It was suggested by Mignor et al. (2002) that there are no clear mechanisms through which potential nursing students receive appropriate and accurate career guidance about nursing, which was also reflected in other literature. According to Cohen et al. (2004) the majority of CGC indicated having insufficient knowledge about
nursing. Further support for this comes from Matutina (2008) who found that CGC were not knowledgeable about the roles of professional nurses. Larsen et al. (2003) surveyed 495 nursing students attending three types of programmes to obtain data about the effect of CGC on students selecting nursing as a career. The researchers found that students perceived their CGC as having little influence on their decision to become a nurse. In addition, nursing students indicated that, only after they joined nursing programmes, they became aware of the opportunities available in the nursing profession (Evans, 1998).

King et al. (2007) indicated that few HSS enquired about nursing careers, and that CGC did not actively endorse nursing for their students as a career option. This suggested that CGC did not influence significant numbers of students to consider nursing, despite the variety of efforts to promote nursing as a career choice in Australia. These facts reinforce the importance of educating CGC regarding nursing as a career option (Mignor et al., 2002; Alexander & Fraser, 2001; Blasdell & Hudgins-Brewer, 1999).

According to Evans (1998) nursing students reported receiving misperceptions about nursing from their CGC. In their study, Neilson & McNally (2013) found that CGC actively steered high achieving students away from nursing. The researchers claimed that the CGC strongly promoted the perception that nurses were equivalent to office workers and hairdressers. May et al. (1991) suggested that CGC discouraged intelligent young females from considering nursing, because they did not value nursing as an intellectual enterprise. Furthermore, Williams (2001) found that many CGC thought nursing lacked academic challenge. That was similar to Neilson & McNally (2013) who found that, students who were academically high performers were advised by their CGC that choosing a career in nursing would be a waste of the good grades they have achieved. Perceptions related to low status and low pay in nursing may also explain the evidence that CGC do not promote nursing as a positive choice for HSS (Boughn, 2001).
Summary
The literature advocates the need to both inform and involve CGC, at any educational level, about nursing as a career. As HSS continue to represent the majority of potential nursing students, high school CGC need to hold more positive perceptions, and retain accurate information about the nursing profession (Hendrickx & Finke, 1994). High school CGC can be employed to positively influence the career choices of students by equipping them with more accurate understanding of the changing nursing roles and qualities that may promote a successful career in nursing (Bolan & Grainger, 2005).

The CGC’s perceptions and information about nursing appeared particularly negative and outdated. Consequently, CGC should be provided with sufficient and accurate information about nursing (Neilson & McNally, 2013). To improve school students’ perceptions of nursing as a career, nurse educators need to address the CGC by acting as positive nurse role models and supporting them with information about opportunities available in nursing. Nurses involved in students’ recruitment need to ensure that CGC have more positive perceptions of the changing roles of nurses, the importance of leadership skills and problem-solving abilities for nurses, and opportunities to practice outside hospital settings (Bolan & Grainger, 2005).
Chapter 7: Current Career Promotion Practices and Strategies

According to the literature there are a number of factors influencing nursing manpower; including the aging nurse workforce, the large numbers of nurses retiring, and a low number of young persons joining nursing programmes. Such factors are threatening the profession's ability to develop its potential to meet health care needs. Miers et al. (2007) claimed that one of the keys to ensuring adequate supply of nurses is through the addition of newly qualified nurses to the workforce. In opening the debate to improvements in nursing education, one of the earlier studies by Hardy (1943) perceived that, nursing is a domestic and practical profession, rather than academic, and nurses do not need a university education. Noteworthy this argument still exists today (Harrison & Journeaux, 2011). Nursing issues related to salary, benefits, working conditions, autonomy and status have also been a concern in terms of professional image, and its effect on recruitment into the profession and retention in the workforce (Buerhaus et al., 2005a). The array of perceptions about nursing as an occupation and profession, is likely to influence potential students when making informed decisions about entry to nursing as a career choice.

It is important to enable potential students to become aware of the skills knowledge and attributes required to become nurses. Given the contemporary developments in nursing roles and responsibilities, the profession should be perceived as a meaningful and attractive career. However, research suggests that nursing may be an unattractive career choice because of the opposing and indistinct images held by the public (Harrison & Journeaux, 2011). This fact makes it essential to implement recruitment strategies, in order to promote a more positive image of nursing, and attract more school students to the profession.

In this chapter, literature related to sources of information from where young students gain information about nursing will be discussed. In addition, the chapter will explore a variety of international innovative recruitment strategies and efforts that have been taken to promote nursing, and identify ways of adopting some of
these to promote nursing in Bahrain. It is important to note that there has been no published research or reports on recruitment strategies related to nursing from Bahrain.

7.1 Sources of Information about Nursing
To effectively accomplish recruitment strategies and promote the nursing profession among prospective nursing students, it is essential to acquire an insight into how these students become aware of nursing and understand the underlying motivations to pursue a career in nursing. Somers et al. (2010) claimed that getting information about the resources from where students learn about the nursing profession is critical in targeting these students, positioning and branding nursing, as well as enhancing its image. Nurses, nursing faculty staff, nursing students, parents, family members, friends, recruiters, the media, the internet, career days and schools have been mentioned as sources of information about nursing (Somers et al., 2010; Hayes, 2007; Law & Arthur, 2003).

Almost half of the respondents in Law & Arthur (2003) indicated that the main source of information about nursing was the mass media, and one quarter considered career days and hospital visits. It was observed that hospital visits were cited by respondents as their source of information, in many studies (Rossiter et al., 1999; Stevens & Walker, 1993). Al-Kandari & Lew (2005) advocated that students receive information about the functional aspects of nursing through contact with nurses during hospital visits. Barkley & Kohler (1992) survey of male HSS found that subjects’ responses were fairly evenly divided among three of the five available resources: television, reading, school-based learning, knowing or observing a nurse. Somers et al. (2010) indicated that the majority of nursing students become aware of nursing and learn about the profession through family members who are nurses, or through contact with nurses in clinical settings who are caring for friends or loved ones. They reported that only one third of the participants conducted formal career research, or used the career services available in their high schools. In addition only one respondent noted the mass
media as an influence in the decision to become a nurse. Hayes (2007) proposed that current nursing students are also considered one of the best sources of information about nursing, because they are often close in age to the prospective applicants.

While some studies showed that there is a significant correlation between the choice of nursing as a career and school as a source of information, Al-Kandari & Lew (2005) reported that school was cited by only 9% of the respondents as their source of information about nursing, while television was one of the main sources of information cited by 27% of the participants. Therefore, it is strongly suggested that the role of school nurses and CGC should be more visible and positive. School nurses can also act as role models, and valuable sources of information about the nursing profession. Although students use a variety of sources to gain knowledge about nurses and nursing, in many times, these sources constitute reasons for the misconceptions. These can include media depicting nurses in a negative way, CGC’s unfamiliarity with the nursing roles, and the parents perceiving nursing as being more secondary, care giver role and less professionally independent (Bolan & Grainger, 2005; Larsen et al., 2003). These facts strengthen the need for recruitment and marketing strategies to reinforce a more positive perception of nursing as a career choice, strategies that target not only school students, but also their parents, friends and CGC.

7.2 Marketing and Recruitment Strategies
The UK National Nursing Research Unit (2009) concluded that, nursing no longer attracts sufficient numbers of school leavers, and that much more needs to be done to change the image of nursing among school age children (Rush et al., 2012). A survey of teenagers in the UK showed that only 2% were interested in a career in nursing (Rush et al., 2012). A review of the international literature revealed that this problem exists worldwide. Given the multifaceted nature of the existing nursing shortage, novel, proactive measures must be implemented to prevent an impending health care crisis (Yeager & Cheever, 2007). It was
proposed that nursing is not easy to describe, a high level of skills and understanding is required to do that. It is believed that engaging school students in activities related to nursing, in which they interact with nurse practitioners, in non-threatening and informal settings can provide them with a better insight of what the nursing profession entails, and encourage more students to join the profession. HSS can be guided to explore the vast opportunities and contributions that can result from a career in nursing (Gormley et al., 2009). Recruitment strategies targeted at the populations of HSS could serve a vital role in assuring adequate nurses for the provision of health care.

It is important to identify how the nursing profession can respond to the need for nurses who are intellectually and emotionally mindful, and who can combine technical clinical skills with the ability to care when there are a small number of people joining the profession (Harrison & Journeaux, 2011). Some initiatives appeared in the literature related to attracting school students into nursing in the US (Knight et al., 2011), UK (Rush et al., 2012) and other Western countries, but, there was no literature found on such efforts from the Middle East or Bahrain. In addition, those initiatives were criticized in that the researchers interested in marketing the nursing profession, mostly used concepts drawn from theories of occupational socialization, vocational choice as well as decision-making and focused on the consequence of those marketing strategies in choosing a career in nursing, rather than the process by which those decisions were made. In order to better address the current and projected shortfall of nurses, and increase the numbers of students joining the profession, Peltier et al. (2008) reported recent calls in the nursing literature for research that uses concepts and models from business and marketing. It was proposed that using marketing and business models could shed light on marketing issues that are critical to ensuring a steady stream of high quality applicants to nursing programmes (Somers et al., 2010).

The concepts from business and marketing were integrated with those from the traditional nursing literature in order to gain insights into developing relationship-
based, integrative marketing programs designed to increase the stability and quality of applicants to nursing degree programmes (Somers et al., 2010). The findings of the research proposed that, matching the appeal of nursing as a caring or helping profession with a second factor affected the appeal of nursing, which is the tangible rewards of the profession. Research indicated that, a good employment picture is an important factor in the choice of nursing as a profession. This is supported by Seago et al. (2006) in a comparative study of nursing students with students from non-nursing programmes, where nursing students reported to be more significantly viewing nursing as having good job security with good income, more interesting work that make a difference, and better status than the other students.

In summary, researchers proposed that to increase the attractiveness of nursing as a career choice, it is necessary to implement marketing strategies that develop messages beyond the general image that cast nursing as a helping profession, which represent intrinsic factors only. Combining intrinsic and extrinsic factors; such as economic rewards, job security and flexible work schedules to promote nursing could be more effective. For students described by Somers et al. (2010) as “instrumental” who are interested in upward mobility, variety and flexibility, promotion strategies need to convince them that a career in nursing offers many of these characteristics. Awareness of broad career ladders of nursing, and career options for nurses need to be reinforced. Miers et al. (2007) also suggested using the effect of graduate level programmes on recruitment, as there is an evidence of increased interest and in number of nursing students following degree rather than diploma programmes. Literature suggested that marketing strategies; such as career days, campaigns, campus visits, work experience, publications, direct mail and electronic media provide publicity for the nursing institutions, and motivate prospective students to request more information and submit their applications to study nursing. Hayes (2007) stated that recruitment efforts by schools of nursing
that target not only HSS, but their parents, peers and CGC enable more informed decisions to be made.

7.2.1 Recruitment Campaigns

One goal of nursing campaigns is to bring the profession of nursing to students and introduce students to the exciting roles nurses play in health care and in the community. Campaigns focus on recruiting more people into the nursing profession, helping resolve the current nursing shortage and preventing an even more severe shortage of nurses from developing in the next decade (Donelan et al., 2005). Research suggests the need for campaigns to promote a more realistic and positive image of nursing in order to make nursing a more attractive career option for school leavers. However, Harrison & Journeaux (2011) stated that, the success of such campaigns depend on a review of the current workforce, and the ability of nursing professionals to advocate nursing as a career. To overcome the increasing problem of nursing shortages in the US, and being aware that the demand would outpace entry into the profession, many US organizations implemented campaigns to promote nursing as a career choice among young students. Examples of these are, the “Campaign for Nursing’s Future”, one of the largest campaigns introduced by the National Student Nurses Association (NSNA) (2000) to increase recruitment into the profession of nursing, and “Johnson & Johnson’s Campaign” that reached out to potential students and adults. The “Kids into Health Careers” project was also initiated by teaming with school nurses (Cohen et al., 2004). Activities organized by these campaigns included participating in school health fairs, interacting with students and playing games that highlighted the characteristics of a nurse, settings where they work, and education needed to become a nurse. The Johnson & Johnson developed a Web site (www.discovernursing.com), produced a variety of recruitment materials including videos, brochures, pins and posters, awarded students scholarships, raised fund to support nursing education and sponsored nursing research (Donelan et al., 2005).
A number of research activities were carried out to examine the awareness and attitudes of nursing students, registered nurses and chief nursing officers about initiatives related to nursing recruitment, and retention campaigns (Buerhaus et al., 2005a; Buerhaus et al., 2005b). Donelan et al. (2005) surveyed 496 nursing students to assess the visibility and impact of the Johnson & Johnson Campaign within the nursing profession. The results indicated that the campaign had an immediate and far-reaching influence. The nursing students expressed strongly positive attitudes with 81% reporting the campaign had a positive impact. Eight in ten students felt the campaign made them feel positive about being a nurse, this is important because students are the future of the profession, and anything that reinforces their participation in the workforce is critical to resolve the nursing shortage. Because registered nurses are critical in influencing the young students to become nurses, it is an important benefit that these nurses are positively influenced by the campaign’s portrayal of the nursing profession as reported by Buerhaus et al. (2005a). Donelan et al. (2005) also claimed that another key result of the campaign was improving the image of nurses in the general public, which respondents in the study perceived as being very visible and positive. As reported by the American Association of Colleges of Nursing (2005) enrolments to the nursing programmes increased impressively after the Johnson & Johnson Campaign was launched in 2002. Although it might be difficult to determine whether all the enrolments are attributed to the Campaign, evidence from Donelan et al. (2005) indicated broad awareness of the Campaign, and the strong likelihood that it exerted a meaningful impact on the decisions of people to enrol in nursing programmes in the US.

7.2.2 Summer Camps and Nursing Career Days

Summer camps are another method that offers opportunity for several contacts over a short period of time (Redding et al., 2004; Randall, 2002). “Pathways to Nursing” by Gormley et al. (2009) and “Lehigh Valley Nursing Camp” by Yeager & Cheever (2007) were projects implemented to increase HSS’s interest in nursing
as a career, in order to impact the nursing shortage, and improve the health of the public. The “Pathways to Nursing” project activities allowed students to explore nursing education by participating in a nursing career day and a summer nursing camp, which involved nurse shadowing days in the hospital. Students were exposed to various clinical experiences, diverse nursing roles, nursing skills laboratory activities and simulation activities, which was very similar to what the participants in Yeager & Cheever (2007) and Cluskey et al. (2006) experienced earlier. Gormley et al. (2009) found that 93.6% of the students who attended the career days in “Pathways to Nursing” project stated they would “probably” or “definitely” want to be a nurse, and 62% reported that they “definitely” want to be a nurse, after attending the Summer Nurse Camp.

“Insight” days was also an innovative approach that has been developed to encourage school leavers to consider a career in nursing or midwifery (Harrison & Journeaux, 2011). Through two-day workshops, students were offered opportunity to interact with nurse practitioners, who provided an insight into the diverse roles and responsibilities of nurses and midwives, and opportunities available within the nursing profession. The programme was positively evaluated by 126 students, with some students’ expressing preference to see the real working environment. The researchers did not have data on the actual numbers of students who joined nursing after attending the campaign, but they reported that some students revealed they have taken up university places as a result.

Furthermore, career days and visits to universities provide students with opportunities to speak to nursing educators and nursing students. Hayes (2007) suggested that the primary goal of the campus visit is to enable students to explore all aspects of the institution, and gain an understanding of the academic, cultural and social aspects of the campus. In addition, nursing academics in the university are in a favourable position to ensure that potential nursing students receive relevant and accurate information to promote realistic expectations of nursing education and practice, which may minimize student attrition and early withdrawal.
from nursing practice. These research findings provide evidence on the importance of providing students with opportunities to explore nursing through active learning experiences that enhance career and academic interest. Through these activity-based, hands-on approaches, students gain insight into nursing that could influence their commitment to and enthusiasm for the nursing profession (Gormley et al., 2009).

It is believed that implementing nursing camp experiences qualify adolescents who were interested in health care careers to consider pursuing a career in nursing more preferably. After attending a recruitment camp, participants in Yeager & Cheever (2007) found no tangible difference between nursing careers and their ideal careers in terms of job opportunities, flexibility, earning more money, being smart and respected. An explanation of this is that the campers gained a more realistic understanding of the diversity of nursing roles, besides that of direct caregivers. In addition, 18% of the summer camp participants in Cluskey et al. (2006) returned to the University to study nursing.

7.2.3 Work Experience and Shadowing Staff Nurses

Neilson & McNally (2010) reported that emphasis on work experience of school students can be seen as part of a movement to construct a relationship between the workplace and education. Additionally, Shah (2005) concluded that, work experience was a major factor in the students’ subsequent occupational choice. And according to Rush et al. (2012) exposure to work is described as a significant step in preparing young people for adult and working life. However, there is no sufficient literature available related to the impact of work experience on school students’ career choice.

Yeager & Cheever (2007) found that, exposure to nursing instructors and nursing students can improve the attitudes of adolescents toward nursing careers. They added that, having previous positive exposure to nurses was positively correlated with students’ views of nursing as an enjoyable occupation. In addition, Wells et
al. (2000) found that for nurses, providing work experience in hospitals would improve recruitment, which echoes an earlier study by While & Blackman (1998). Studies indicated that, direct contact with nurses, or other health care providers created interest in the nursing profession, and provided high HSS with insights into the roles of nurses (Larsen et al., 2003). Somers et al. (2010) suggested that, this anticipatory socialization presented prospective nurses with first-hand knowledge of nursing practice, including a sense of efficacy and empowerment. Contact with nurses also reinforce the helping aspect of the profession, and exert a lasting influence in choosing nursing as a career.

Porter et al. (2009) conducted a study to gain insight into HSS’s perceptions of the role of nurses, and explore students’ impressions of nursing following a nurse-shadowing intervention. They believed that, by providing school students with chances to shadow a nurse, a more accurate view of nursing opportunities and professionalism may be fostered. By the end of the programme, all participants indicated that their views of nursing had changed, noting that nursing was much more complex and challenging than they had realized. Out of the 16 students who completed the study, 50% indicated nursing as a top career choice, compared to the 33% who considered nursing a one of three top careers prior to the intervention. The findings of this study are consistent with Daumer & Britson (2004) who suggested that HSS who are interested in health care careers are poorly informed about the nursing role. Findings were also similar in both studies in that, the use of technology was one of the biggest areas of increased awareness and growth among all participants.

There is evidence that nursing students and post-registration attrition rates are making the problem of shortages even more complex, and that is mainly because of the disparity between students’ expectations and reality. It has been reported by Godfrey (2000) that, some entrants to nursing education are surprised that they have to undertake tasks; such as handling soiled linens, and sensitive work; such as bathing patients, which suggests that they expect to be carrying out more
glamorous and high technical work. Wilson et al. (2011) found that there was a statistically significant difference in terms of attrition between those who had undertaken work experience prior to entry into nursing and those who had not.

Because of its distinctive influence on career choice, nursing work experience has been introduced as an elective course with deadlines and responsibilities, like other classes, by high schools in some areas of the world. Timmons (2007) reflected on her experience working with HSS who attended an internship programme in a perioperative placement. The students worked side by side with their mentor 2-4 days a week for the entire year. Allowing the students to spend time in the perioperative setting gave them an up-close view of the many roles that are integral to the delivery of nursing care. And although participating in this programme did not guarantee that students would choose nursing as a career, Timmons believed the perioperative nurses can play an important role in students’ career choice. Such study clearly identifies the importance of nurses’ partner with schools and the community with whom they can positively promote nursing as a career.

To conclude, it has been evident that, experiential knowledge of nursing is a central need for students to gain interest in nursing careers. These findings suggest that a nurse shadowing programme may positively influence perceptions of nursing and may result in improved recruitment of students. However, researchers highlighted evidence suggesting that although providing opportunities for work experience is important to attract potential students into nursing, it has a limited capacity to provide appropriate opportunities for clinical experience (While & Blackman, 1998). In trying to find alternatives, Rush et al. (2012) proposed that as simulation is deemed to be an acceptable form of practice experience of nursing students, it is suggested that they could also be an acceptable form of providing work experience for school students.
7.2.4 The Use of Simulation Teaching

Engaging school students in simulation activities provide them with opportunities to interact with nurses and nursing students in an informal and non-threatening setting, allowing them to explore nursing as a career and build a positive image of nursing. Somers et al. (2010) suggested that personal contact can be emphasized by simulations that allow potential nurses to experience patient care as part of the anticipated socialization process. They added that, the tangible effect of nursing practice provides a strong competitive advantage over other helping professions and thus, can be an effective strategy for both positioning and image building of nursing.

Rush et al. (2012) reported on a project that was designed to engage year 10 and 11 students in a clinical skills laboratory to learn a range of clinical skills, alongside first year nursing and medical students. The aim of the project was to provide new insights into the impact of clinical skills sessions on school students. The researchers found that, students valued their experience in the simulation laboratory and viewed it very positively, as it helped them learn skills and affirm positive career choices for nursing. It was observed that 12 out of 30 students who participated in the project applied for nursing in the university, where the project took place.

The importance of having hands-on activities that would engage the student, introduce accurate and interesting information about areas of nursing employment, and the multifaceted role of the nurse needs to be emphasized during the development of the promotion programs. The “Nurse Anaesthesia Program” at the University of Pittsburg embarked on a major initiative in 2001 titled “Your School Goes to the Operating Room” (Sell & Palmer, 2004); this project targeted kindergarten through middle school, using operating room scenarios. Students observed a mock surgery, and practiced skills at stations set up around the classroom. “Mr. Thompson’s Heart” was another initiative that introduces nursing as a career choice (Knight et al., 2011). Inclusion of information about the heart
and the promotion of heart health was a creative avenue to emphasize important healthy lifestyle tips while promoting nursing as a career.

Multiple hands-on activities create excitement and interest in the nursing profession. Students who participated in “Mr. Thompson’s Heart” experienced measuring vital signs, calculating and preparing simulated medications, working with simulation mannequins, and listening to heart and lung sounds using a stethoscope. Students were exposed to the many roles and practice areas where nurses work (Knight et al., 2011). These fun activities drives home the point that, to provide safe patient health care, successful nurses need to study hard, think smart, and really focus on academics. Overall, students had an increased interest in nursing as a career choice following the workshops. Most of the students identified that they learned new information about what nurses do, they would recommend nursing as a career to others. Students also stated that because of the program, they would think about becoming a nurse. A conclusion from the above research can be that the experience of simulation helps promote a positive image of nursing.

### 7.2.5 The Effectiveness of Videos in Marketing

Building on Peltier et al. (2008) suggestion of the importance of developing nursing recruitment strategies based on business and marketing models, it was found that the use of videos has been supported by many business and marketing experts. Trimble (2014) proposed that online videos are becoming key means for people to satisfy their information needs. Celi (2014) on the other hand, advised that many people are more visually-oriented, which means that they are able to learn and comprehend information better if presented in visual formats, specifically videos. According to Follett (2015) it would take 150 days of writing to achieve the impact of one minute video. He claimed that 80% of the internet users recalled watching a video, of which 46% took some action after viewing the video. Cote (2014) highlighted a multitude of video marketing trends around the growth of video for mobile devices, in addition to the impact videos have on search engine results.
She claimed that 33% of the tablet owners watch videos on their device for one hour every day, and that 72% of the smartphone users watched videos at least monthly in 2013. Cote added that videos are becoming the preferred communication style compared to text-based content. Videos can be linked easily to websites, emails and other modes of the social media; such as Twitter, Facebook and Instagram. Celi (2014) reported that more than four billion people view videos on YouTube every day. For these reasons, and recognizing the effectiveness of videos for marketing, it has been indicated that the percentage of senior marketing executives using online video content in their marketing programmes increased from 70% in 2011 to 81% in 2014. In addition, Trimble (2014) claimed that videos are used in marketing campaigns by 93% of the marketers.

The National Student Nurses Association (NSNA) was one of the first organizations to respond to the nursing shortage through media that would appeal to young students. The NSNA (2000) produced the video “Nursing: The Ultimate Adventure” introducing students to the excitement of a nursing career. The video emphasizes the difference nurses make in people’s lives, as it depicts a fast paced, but thoughtful portrayal of a career in nursing. In addition, Johnson & Johnson’s campaigns used series of videos extensively in their efforts to market nursing. According to Smith (2005) Johnson & Johnson spent more than $30 million on their campaign of which approximately 50% were spend on video and printed media.

Hoke (2006) also used a video to promote nursing as a career choice, and found that 7th and 8th grade students’ perceptions were influenced positively through a simple classroom presentation. In addition, Balogun et al. (2005) used videos and lectures to promote health professions career awareness to 133 African American school students, following the program, 55% indicated interest in pursuing a career in a health profession, yet only 11% selected nursing. Lohri-Posey (2005) criticized the role of media in promoting nursing by stating that, some efforts to change the
image of nursing through television media have been effective, albeit not directly targeted to HSS. As a result, these efforts were less able to affect change early in the career decision trajectory. In conclusion of this, and based on findings from Porter et al. (2009), while media programmes have influenced public perceptions to a large extent, it is suggested that more work is still needed.

### 7.2.6 Lectures and Educational Materials

Presentations to HSS can be very effective in fostering more positive perceptions of nursing, and may attract them into the profession. Knight et al. (2011) reported the development of a PowerPoint presentation used in a lecture to introduce “Nursing as a Career” to encourage school students to consider nursing. Stories from many volunteered nurses were portrayed in the presentation. The use of PowerPoint allows time for actual discussion and interjection of information when each frame is delivered, however research showed that psychomotor learning activities work best, and enhance learning, and that lecturing should be kept to a minimum to maintain interest and enthusiasm. Young students need to be stimulated frequently with hands-on learning activities to enhance engagement. Furthermore, because of the lack of information about nursing available to students in schools (Al-Kandari & Lew, 2005), prospective students tend to depend highly on information available from the internet (Tawash et al., 2012) it is important to ensure that positive and accurate information is presented to these students. For this reason, it is important to have written materials and handouts with information about nursing available in all schools. Handouts provided to prospective students aim at promoting nursing programmes as well as creating cohesive appearance for the institutions. However, it is important to note that the development of recruitment materials need to be closely monitored to ensure content accuracy, this is why these handouts need to be developed by nurse educators and nurses themselves. Hayes (2007) suggested that to attract interest in nursing, bullets, short paragraphs and fast facts to highlight acquired skills leading to positive career opportunities and introduce the programme are very
effective when designing recruitment handouts. Students’ testimonials are also commonly used in the handouts because potential applicants find students’ perspectives very valuable.

7.2.7 Nurse Ambassadors and Group E-mentoring

The idea of using nurse ambassadors (nursing students and alumni) to help with nurse recruitment programmes was introduced in the US in response to the increasing difficulty to recruitment into nursing programmes. The idea was then adopted in UK, which was also facing significant reduction in the number of applicants to nurse education (Durkin, 2002). The aim of these projects was to increase the number and diversity of students entering nursing careers. Rhodes et al. (2006) reported that nursing students have always participated in recruitment promotions, which prospective students rated very positively. It was suggested that people appreciate their questions be answered by those undertaking the nursing course, as they believe they can get more honest responses. In this type of recruitment programmes, student ambassadors work with individuals and groups and undertake a group of recruitment promotional activities. Curtis (2000) reported on a nurse ambassador programme in the US that focused on increasing the profile and awareness of nursing by training nurses in presentation and media skills.

“The Higher Education Full Circle” project implemented in the UK recruited and paid two student ambassadors to contribute to in-house recruitment events and activities (Rhodes et al., 2006). The students acted as role models and shared their positive experiences with nursing, which were balanced with some of the challenges they faced. They also outlined the nursing course, giving examples of coursework, assessments, hours and structures of the terms and subjects for study and demonstrated some nursing skills. They answered questions to provide realistic picture of nursing without being too negative, and shared their own coping strategies. By this, these nurse ambassadors were able to provide realistic perceptions of nursing and reduce negative stereotypes and social exclusion. They
have undertaken considerable health awareness and recruitment activity in the community and aided informed choice which is likely to increase retention. An initial evaluation of the project was very positive, however long term evaluation is needed to indicate whether recruitment and retention of students is significant.

Another recruitment strategy that has not yet been utilized very often in nursing is group electronic mentoring (GEM). This is a unique approach of merging mentoring with electronic communications, an effort to interest young people in the nursing profession. E-mentoring offers flexible communication environment independent of time and space, which provides opportunities for mentoring that is not possible through the face to face mentoring programmes. GEM is determined to be a promising strategy for recruitment into nursing given the fact that Internet ranks as a top information source among high school students (Tawash et al., 2012). GEM has been utilized in other disciplines in the US, and has been found to be a valuable tool in promoting careers. Kalisch et al. (2005) reported on a GEM-Nursing programme which was developed to educate and motivate school students to consider nursing as their career choice. It linked potential students with volunteer nurse mentors via email and a website. Many of the nurse mentors participating in the programme expressed their excitement at the ease of being able to provide public service time to help address the nursing shortage. The use of GEM allowed students from different cultures to feel free to ask questions that they may not possibly ask in open communication. This approach also allowed mentors to interact with many more students than would be possible in the traditional face to face setting. Even though the GEM programme seems to be effective in increasing the awareness of students of the benefits of working in nursing, additional research needs to be conducted to compare this approach with other recruitment strategies in terms of costs and benefits.
Summary
Faced with the anticipated continued shortage in nursing, it is important to look for creative strategies to interest HSS in nursing careers. Hoke (2006) noted that 33% of those who ultimately choose nursing do so at an early age, and their choice is often based on stereotyping instead of awareness of the opportunities. Orientating potential students to the realities of being nurses and of working in the health care arenas is a shared responsibility between universities, health care services and schools. Large-scale initiatives are critical if nursing is to attract students in high schools. Because parents and CGC play a major role in guiding children toward careers; their lack of knowledge regarding the profession can hinder recruitment, and so, parents and CGC also need to be appraised of the scope of the profession and the opportunities it provides. Research shows that adolescents want more education, leadership, power, money and respect, which can all be accomplished by joining a career in nursing.

Collaborations between schools and universities are essential to implement recruitment strategies that introduce HSS to diverse career options in nursing and prepare them for the challenging nursing career. Creative introductions about nursing as a career are clearly needed, if we are to impact the projected shortage. Accurate information-based programmes are essential in creating interest in nursing as a career, yet the programs that stand out use activities that are engaging, active, and hands-on. It is suggested that the message to potential students should include the likelihood of shift work, and the need for lifelong learning, advanced education and specialization to maintain competence and progress in the career. Knight et al. (2011) concluded that, while a variety of recruitment programme models exist, none have described outcomes beyond interest in nursing as a potential career.
Chapter 8: Theoretical Framework for the Study

Stearns & Marchione (1989) claimed that career theorists described career choice as a process and not a single decision, as it is not certain how a career choice is made. In addition, the developmental theories view career choice as a series of decisions made over time (Hayes, 2007). Accordingly, individuals progressively narrow their career choices as they pass through each decision making stage and continue to develop perceptions about careers until they arrive at the career choice stage (Maloney, 1995).

The theoretical model developed for this study is based on Deci & Ryan's (1985) Self-Determination Theory. The decision to select a suitable theoretical framework for this study was difficult considering the existence of many theories focusing on career choice and career development. A thorough review and exploration was undertaken of the most relevant theories and frameworks for their suitability and relevance to the scope of this study. The most common career choice theories considered included Holland’s Theory of Career Choice, Bandura’s Social Cognitive Theory, Super’s Developmental Self-Concept Theory, Krumboltz’s Planned Happenstance Theory, Parson’s Talent-matching Approach theory as well as Deci & Ryan’s Self-Determination Theory. After careful analysis, the list was then narrowed down to the two most relevant theories; Deci & Ryan’s Self-Determination Theory and Bandura’s Social Cognitive Theory. The final decision to use Deci & Ryan's (1985) Self-Determination Theory theoretical framework was based on the postulations enclosed in the theory, as well as the focus of this research study.

The decisions of students to enter a nursing programme are influenced by intrinsic and extrinsic rewards that are linked to area of specialization, marketing and job availability (Hickey et al., 2012). Deci & Ryan’s (1985) Self-Determination Theory explained the intrinsic and extrinsic factors that motivate individuals to choose a career. It is believed that this theory could be adapted to serve a useful model for
inquiry into factors affecting nursing as a career choice for the HSS. The theory also guided the research toward developing a recruitment strategy that could motivate the students to choose nursing as a career. Understanding career development and career decisions is an essential component of recruitment and retention strategies (Hickey et al., 2012).

This theory explained the motivated behaviour, and how the participation in a planned educational nursing recruitment programme produced desired behavioural patterns reflected in students’ career choice of a nursing profession. In this chapter, the Nursing Career Choice Model (NCCM) which was developed by the researcher on the bases of Deci & Ryan’s (1985) Self-Determination Theory will be discussed. To facilitate a better understanding of the NCCM model, the concepts related to the Self Determination Theory will be explored first.

8.1 The Self-Determination Theory (Deci & Ryan, 1985)

The Self Determination Theory (SDT) developed by Edward Deci & Richard Ryan (1985) is a macro theory of human motivation and personality. The theory proposed that when people choose their life career, they are motivated to seek positive experiences and avoid negative experiences (Natan & Becker, 2010). To be motivated means “to be moved” to do an action. According to Ryan & Deci (2000a) a person who is activated toward an end is considered motivated, whereas a person who feels no inspiration to act is unmotivated. In this essence, a person who takes any action is said to be motivated, however it is difficult to measure how much motivation the person have, and how different he/she is from others who do the same action. Most theories of motivation reflect this concern by viewing motivation as a “unitary” phenomenon that varies from little motivation to a great motivation to act (Ryan & Deci, 2000a). Ryan & Deci (2000a) also claimed that people not only have different amounts of motivation, but also different types. That is, people have different levels and orientation for the motivation. Orientation of motivation concerns the underlying attitudes and goals that give rise to action. In the SDT, Deci & Ryan distinguished between different types of motivation based
on the reasons or goals that give rise to the action. The theory presents two major motivations; intrinsic motivation and extrinsic motivation.

Intrinsic motivation refers to doing an action because it is inherently interesting or enjoyable. It is a motivational behaviour aimed at achieving a feeling of competence and control. It refers to initiating an activity because it is satisfying in itself and not to obtain an external goal (extrinsic motivation). It includes eagerness and seeking challenges and opportunities to excel. Developmental theorists; such as Harter (1978) claimed that, from birth onwards, humans are active, inquisitive and curious, displaying readiness to learn and explore with no requirement for external incentives to do so. This natural motivational tendency is important for the individual to act on one’s inherent interests that one grows in knowledge and skills. Guided by the SDT, Deci and Ryan focused on the social-contextual conditions that may facilitate or undermine the natural processes of self-motivation. Their findings lead to three main innate psychological needs that are involved in self-determination, these include the need for competence, autonomy and relatedness (Ryan & Deci, 2000b). According to Archer (2003), competence involves understanding how to, and believing that the individual is capable of achieving the outcome, autonomy involves initiating and regulating one’s own actions, while relatedness is about developing a satisfactory relationship with others in the social group. The theorists specify that feelings of competence are required to be accompanied by a sense of autonomy to be able to enhance intrinsic motivation. The SDT is framed in terms of social and environmental factors that may facilitate or undermine intrinsic motivation. This reflects the postulation that intrinsic motivation is “catalysed” when individuals are in conditions that conduce toward its expression (Ryan & Deci, 2000a).

Extrinsic motivation on the other hand, refers to doing an action because it leads to a distinguishable outcome. It is a motivational behaviour aiming at achieving tangible reward or avoiding punishment. When the activity is the means of achieving another goal and not a goal per se, motivation to act is extrinsic (Natan
& Becker, 2010). In contrast with the classic literature that characterize extrinsic motivation as pale and deprived, SDT proposed that there are varied types of extrinsic motivation of which some represent “active, agentic states” (Ryan & Deci, 2000a). Individuals can perform extrinsically motivated tasks or actions with resentment and disinterest, but they can also do them with an attitude of willingness that reflects an inner acceptance of the value or the task. Thus, both situations involve external motivation to do an action, yet in the former case the individual’s compliance to the task was merely as a result of external control, while the latter case entails personal endorsement and a feeling of choice. SDT proposed that extrinsic motivation can greatly vary in the degree of feeling of autonomous experienced by the individual. Deci & Ryan emphasized that understanding the two types of extrinsic motivation is important for educators who cannot always rely on intrinsic motivation to foster learning.

It is important to mention the fact that, many activities might not be perceived by individuals as intrinsically interesting, and a lot of concern is raised on how to motivate individuals to value such activities without external pressure. This problem is described within the SDT in terms of fostering the internalization and integration of values and behavioural regulations (Deci & Ryan, 1985). Viewed as a continuum, the concept of internalization describes how one’s motivation for a specific behaviour can range from the absence of motivation, to passive compliance, to active personal commitment (Ryan & Deci, 2000a). However, individuals don’t have to progress through each stage as one can adopt a new behavioural regulation at any point along the continuum depending on prior experiences and situational factors (Ryan, 1995).

Within the SDT, Deci & Ryan (1985) described the Organismic Integration Theory (OIT), which detailed the different forms of extrinsic motivation and the contextual factors that either stimulate or obstruct internalization and integration of a given behaviour (Deci & Ryan, 1985). The OIT identified four categories of external motivations arranged in terms of the extent to which the motivation for one’s
behaviour originates from one’s self. The first category is referred to as “external regulation” which represents the least autonomous form of extrinsic motivation. Behaviours in this category are performed to satisfy an external demand, or obtain an externally imposed reward. External regulation is the only type of motivation recognized by operant theorists (Skinner, 1953). The second category is “introjected regulation” which describes a type of internal regulation that is still controlling because individuals perform behaviours with the feeling of pressure in order to enhance or maintain self-esteem, or the feeling of worth. “Identification” is the third category that is more autonomous and self-determined. The individual in this category performs the behaviour because he/she identified the importance of the behaviour and accepted it as his/her own. The fourth and last category is “integrated regulation” which is the most autonomous type of extrinsic motivation. Integration takes place when identified regulations have been fully assimilated to the self. Integrated motivation share many qualities with intrinsic motivation, however they remain as extrinsic because the behaviour is done for its presumed instrumental value (Ryan & Deci, 2000a). Increasing internalization is thought to bring greater persistence, more positive self-perceptions and better quality of engagement. Ryan & Deci (2000a) claimed that the process of internalization is developmentally important as social values and regulations are continually being internalized over the life span. As extrinsically motivated behaviours are not inherently interesting, the primary reason people are likely to be willing to perform a behaviour is because they are valued by significant others to whom they feel connected including their family, peers or society. Ryan & Deci (2000a) suggested that the groundwork for facilitating internalization is providing a sense of belongingness to the person, group or culture disseminating what the SDT described as a sense of “relatedness”.

In conclusion, the SDT made clear distinction between behaviours that emanate from individual’s sense of self, and are escorted by the experience of freedom and autonomy, and those that are not representative of individual’s self and are
escorted by the experience of pressure and control (Ryan & Deci, 2000a). However, it clearly acknowledged extrinsically motivated individuals can still be committed and authentic to a behaviour, and this happens through internalization and integration. Studying the conditions that may foster or undermine positive human potentials is important because they provide formal knowledge of the causes of human behaviour and support the design of social environments that optimize people’s development, performance and wellbeing (Ryan & Deci, 2000b).

8.2 Application of the SDT to Nursing
Considering nursing shortages and the great difficulty faced in attracting more candidates to enter the nursing profession, the SDT provides clues on the key concepts related to how people are motivated toward a specific occupation such as nursing. Many studies focusing on career choice highlighted the influence of intrinsic and extrinsic motives that supported the individuals’ career choices. The nursing literature interested in studying factors affecting the choice of nursing as a career identified a variety of intrinsic and extrinsic motives that influenced career decisions, which is the notion of the SDT.

Earlier studies concluded that choice of a nursing career is influenced more by intrinsic factors related to students’ professional career (Maurer, 1994). Kersten et al. (1991) for example, identified students’ emotional needs as the underlying reason for their career choice. The researchers identified self-esteem, fulfilment, challenge, excitement, and emotions as intrinsic attraction for students. In addition, Evardsen (1995) identified interesting work, contact with people, and helping others as crucial factors affecting the choice of a nursing career. Williams et al. (1997) identified other motivating factors; such as scientific interest and personal suitability as reasons for choosing nursing career. In addition, more recent studies reported that the wish to work at a job with social utility and the opportunity for self-development, were important for students (Natan & Becker, 2010).
In contrast, Natan & Becker (2010) indicated that extrinsic factors have a greater influence on career choice than intrinsic factors. They conducted a descriptive survey with a convenience sample of 309 self-identified adults (18-50 years old). Although the findings of the study represented the two types of motivation; intrinsic and extrinsic, the participants appeared to be more influenced by the extrinsic motivations; which included job security, flexible hours, high salary, promotion and responsibility, comfortable working conditions, short training and studying concurrently. Job security as an extrinsic factor affecting students’ choice of a career was also identified in other studies (McCable et al., 2005; Kersten et al., 1991). The findings were also congruent to another study by Hollup (2012) which aimed to describe the factors and circumstances that influenced the decision of male and female nurses in Mauritius to choose nursing as a career. Findings revealed that the most important factors in attracting the participants were extrinsic rewards; such as job security, good income, government employment (with all relevant privileges and social status that it entails), paid education and possibilities for international migration. This supported Cho et al. (2010) who found that employability was the most influential factor in choosing a nursing major as reported by 55% of the nursing students in Korea, followed by aptitude (20%).

Students’ intention to study nursing was also significantly affected by extrinsic factors pertaining social influence; advice from family, friends, relative nurses and school career guidance counselors. Adding to this, interaction with nurses in practice, interaction with sick people, interaction with students already enrolled in a nursing education programme, participation in career activities and working in hospital were also found to be common major influencing agents for a student’s image of the nursing profession and career choice in nursing (Law & Arthur, 2003; Williams et al., 1997). The media, as an extrinsic factor was also found to be of a great influence. Kohler & Edwards (1990) survey of HSS showed that direct encounters with nurses and watching television were found to be very influential in shaping their opinions about nursing.
8.3 The Nursing Career Choice Model (NCCM)

According to Hickey et al. (2012) career development and career choices occur over time, and as a result of the interactions between the person and their environment. Understanding career development and career decision is a crucial component of recruitment strategies. Drawing on Deci & Ryan’s (1985) Self-Determination Theory, the researcher developed a Nursing Career Choice Model (NCCM) for the purpose of this research (Figure 8.3). This framework supported the study of intrinsic and extrinsic factors affecting the HSS choice of a career in nursing, as well contributed to the development of a nursing career recruitment intervention for the HSS that aimed at influencing their interest in nursing as a career choice. The NCCM focused on the HSS and situated their development and career choices in a wider context of influences. These influences were empirically evaluated and their contributions to the career choices of HSS were explored.

The premise of the NCCM is that career development and career choice occur over time, and as a result of a group of intrinsic and extrinsic motives (Deci & Ryan, 1985). The internal motives may include the students’ demographic data, interests, academic performance, perceptions and past experiences. While the extrinsic motives include what is called as the “Microsystem” and “Macrosystem” (Hickey et al., 2012). The Microsystem includes the students’ family, their neighbourhood setting, work experience and friendship. The Macrosystem, on the other hand consists of overriding societal culture, beliefs, values and practices, in addition to government policies related to funding of educational programmes and wages, curriculum requirements and accreditation, staff and resource shortages and job vacancies, as well as marketing forces and the media.

Psychologists use the concepts of motivation when describing processes that can energize and give direction to a specific behaviour (Archer, 2003). These assumptions about factors affecting career choices and decisions have been supported by a number of other researchers. Hayes (2007) for example, claimed that personal traits; such as caring, altruism, kindness, helping others and interest
in science have been influential factors in the process of career decision making. On the other hand, Merriam & Caffarella (2006) reported that individuals are motivated to choose a career, if it meets their need for financial and job security, while others choose the career because it meets their social need for belonging.

All these motives are believed to act as factors to facilitate the HSS’s choice of a specific career. These career choices in most instances will not include nursing as an option, which is unfortunate considering the severe nursing shortages all over the world. The introduction of a nursing recruitment strategy is believed to influence the career decisions of students by increasing their awareness about the nursing profession and making it one of the preferred career options. According to Turner (2011), Super’s Theory of Vocational Development indicated that most children have passed through the fantasy vocational life stage of career development by age 10, moving into the interest stage. During the interest stage, children’s dreams of occupations are influenced by information about the world, some of which they might get from the media or television programmes (Chapter 5), and others represented to them by their sociocultural systems and beliefs (Chapter 3). As a result, these children develop interest in certain occupations. So having a better sense of how a specific career can help these students achieve their personal goals (Deci & Ryan, 1985) was considered as an important motive when developing the nursing recruitment strategy. Motivation determines whether or not students will engage in a given career (Archer, 2003).

Career theories provide direction on approaching different groups for the purpose of recruitment. These theories agreed on the view that career choice is a process that takes place over a period of time rather than as a single event (Stearns & Marchione, 1989). The underpinnings of the SDT also provided a theoretical framework for a nursing recruitment intervention for HSS, intended to positively influence interest in nursing as a career choice. Motivation for exploring a specific career such as nursing, is manifested in intrinsic and extrinsic sources of motivation. As it is strongly believed that career strategies may encourage
applicants to consider nursing over other careers, the recruitment strategy implemented in this research targeted intrinsic and extrinsic motivators to positively influence students’ decisions to choose a career in nursing. It is hypothesized that improving the awareness of these students about nursing will help initiate their internal interest, self-satisfaction as a result of helping others and meeting their personal goals. It will also provide the students with an opportunity to visualize the extrinsic motivators available in nursing, such as financial security and feeling of social belongingness and appreciation by others.
Deci & Ryan’s (1985) Self Determination Theory

Intrinsic Factors
- Demographics
- Academic performance
- Perceptions and experiences

Extrinsic Factors

Microsystem
- Family
- Neighbourhood setting
- Work experience
- Friendship

Macrosystem
- Culture
- Beliefs
- Values
- Practices
- Governmental policies
- Curriculum requirement

Nursing Recruitment Strategies

Choosing a Nursing Career

Figure 8.3 Nursing Career Choice Model (NCCM)
Summary

The motivational orientation described in Deci & Ryan’s (1985) SDT can assist in understanding students’ sources of motivation when choosing a future career. Motivation to join a specific career is a goal oriented, intrinsic act by students and one that is undertaken to obtain external rewards and gain social acceptance and satisfaction. Employing these sources of motivation in developing nursing recruitment strategies is believed to encourage the HSS to consider nursing as a career choice when they develop a better idea of what the nursing profession entails, and how it can help them accomplish their goals.

The NCCM employed the concepts related to intrinsic and extrinsic motivation discussed in the SDT in two ways. First to explore the factors affecting the perceptions of HSS about nursing and their decisions to choose the profession as a future career, and second by using the factors identified to promote nursing, and encourage these students to consider it as a career option. Considering that it is not easy to influence the intrinsic motivations, the information and activities introduced through the recruitment strategy developed for this research applied the SDT concepts related to the extrinsic motivation. We aimed at fostering the HSS’s internalization in relation to nursing from being in the “external regulation” category to the “integrated regulation” category.
Summary of the Literature Review Section

Nursing shortage have profound effects on the quality of health care services. Encouraging high numbers of young candidates to enrol into nursing programmes is considered a pivotal solution to overcome the nursing shortage. However, it was evident that achieving this presents a great amount of challenge to both nursing education and practice. Reviewing the international literature provided an insight into a multitude of factors that influence the choice of nursing as a career. These factors varied between intrinsic and extrinsic motivations. Amongst the factors that influenced the career choice of nursing was culture. The literature showed clear evidence that nursing has gone through a long history striving to enhance its professionalization and status within a set of sociocultural contexts. Regardless of the status that nurses reached with their profession, the image of nursing continues to struggle to oppose the negative sociocultural stereotypes. These negative and unrealistic images of nursing further impacted the nursing shortage worldwide.

The perceptions of HSS and nursing students with regards to nursing and nurses was also explored. The students exhibited a wide range of perceptions about nursing that ranged between positive and negative perceptions. The literature proposed that recruitment efforts should focus on increasing the awareness of HSS of contemporary nursing as a career. It also emphasized the importance of nursing education programmes in positively socializing nursing students into their professional roles. Literature related to the role of parents and significant others was also explored. It was apparent that parents have a great deal of influence on the career decision of their children in general. Parents’ education and occupation introduced a level of influence on students’ career choices. The literature also showed that nurses had clear influence on the way nursing is perceived by students and the general public. It was strongly proposed that nurses should have a stronger role in promoting nursing, and to act as role models for HSS and nursing students. Literature related to the portrayals of nursing in the media
showed that nurses were not fairly represented. Nurses have always shown concerns with regards to the way nursing was represented in the media. The literature inferred to the influence of media in promoting negative perceptions about nursing. It also proposed that nurses should take a better role in redirecting the media into presenting more positive images of nursing, and making nurses more visible.

The role of career guidance in schools was also examined. The literature highlighted the critical position of CGC in directing career choices of the students. It was suggested that, it is important that the CGC have positive perceptions about nursing, and that they possess accurate information about the strengths and opportunities available in nursing, in order to influence the career decisions of students towards a career in nursing. The section also looked at literature presenting current promotion practices and strategies to enhance the recruitment into nursing. A number of strategies were examined for their level of effectiveness in improving the awareness of participants about nursing as a career, and their ability to help students make informed decisions about joining nursing. The last chapter of this section presented the theoretical framework which was developed for the purpose of this study. The framework was based on Deci & Ryan’s (1985) Self Determination Theory.
SECTION 3

RESEARCH DESIGN AND METHODOLOGY
1 Introduction

It was suggested by Crow et al. (2005) that nursing career should be studied as a process with identifiable stages progressing from the time the individual considers nursing as a career, through the student process to graduation and the first year post qualification, finally to the stage where the nurse is fully realized as a practicing nurse or has decided to leave the profession. From the perspective of the above study, this research focused on studying the perceptions of HSS of nursing as a career choice, and the factors that influenced their perceptions and choices of a career in nursing. Moving to exploring initial decisions made by undergraduate nursing students to enrol in a nursing programme, and the factors that influenced these decisions, to studying their perceptions after one year of graduation. In addition, the influence of students’ parents and CGC on the students’ decisions was also examined.

This section contains eight chapters and will provide an overview of the research paradigms underpinning this research study, the research designs adapted, methods of data collection used to collect data from the different participants, and relevant strategies used to ensure and enhance the validity and reliability of these methods. The section will also explore sampling techniques used in both the quantitative and qualitative approaches, and highlight the data analysis techniques used by the researcher to analyse and interpret the findings of the study. The final chapter will highlight the recruitment intervention implemented for the purpose of this study.

1.1 Research Plan

This research was undertaken in three stages:

Stage 1 - Exploratory: The first stage of the study examined the perceptions of the HSS of nursing, and the factors that influence their choice of nursing as a career. The perspectives of HSS’s parents and high school CGC’s practices were investigated. In addition, the perceptions of the first cohort of RCSI Bahrain nursing
students of nursing were examined throughout the course of their programme, and one year after work experience as nurses.

**Stage 2 - Intervventional:** The second stage of the study involved setting out, implementing and evaluating a strategy to promote and enhance nursing career choice among HSS. Based on the findings from students, parents, CGC as well as the literature, an intervention for the promotion of nursing among HSS was drawn up, and introduced to a sample of HSS. After implementation, the intervention was evaluated for its effectiveness in changing students’ perceptions and promoting the nursing career. A retrospective pre-test design was used to collect data during this stage.

**Stage 3 - Developmental:** During the third stage the evidence from stages 1 and 2 was synthesised, and a best practice evidence based model, in promoting nursing as a career choice in Bahrain was recommended.

Figure 1.1 below illustrates the three different stages of the research study plan.
Figure 1.1 Stages of the Research Study Plan

Stage 1: Exploratory
- Data collection from high school students, their career guidance counselors and parents (mixed methods study).
- Data collection from the nursing students (longitudinal study).

Stage 2: Interventional
- The development of a nursing career promotion intervention.
- Implementation of the intervention and evaluating its effectiveness.

Stage 3: Developmental
- Recommendation of a best practice model for nursing recruitment in Bahrain.
Chapter 9: Research Paradigms

A research paradigm can be described as the beliefs and values which particular research communities share about the type of phenomena, which can or cannot be researched, and methodologies to be adopted (Parahoo, 2006). The research paradigm worldview shapes the researchers’ approach to a variety of research related activities (Whitehead, 2007), thus paradigms are used by researchers to systemize the gathering, interpretation and application of knowledge (Nieswiadomy, 2012). Researchers use various different approaches and methods to gather information and conduct research (Begley, 2008). According to Polit & Beck (2008) a number of paradigms have evolved since 1970, including the Positivism and Naturalistic paradigms, which most commonly influenced the nursing research.

In recent years, researchers identified the benefits of joining both the positivism and naturalistic paradigms by acknowledging and understanding their inter-related nature and processes (Whitehead, 2007). Pragmatism, the paradigm that is mostly associated with mixed methods research considers the research question to drive the inquiry and that the question is most important than the method. From this, the pragmatist researchers reject a forced choice between the positivist’s and naturalist’s methods of inquiry (Polit & Beck, 2008). According to Armitage (2007) research is often multipurpose, and should allow the researcher to address questions that do not sit comfortably within a completely quantitative or qualitative approach to design and methodology. So, an emerging trend is the planned integration of qualitative and quantitative methods within a single study. Some researchers believe that many areas of inquiry can be enriched through the judicious use of quantitative and qualitative data (Polit & Beck, 2008). The strongest argument for the use of mixed methods research is that certain questions require a mixed methods approach, which is the case represented in this research study.
Traditionally, quantitative and qualitative research approaches were always presented by researchers as they opposed one another (Begley, 2008). But more recently, there is recognition that the two approaches can be used to supplement and balance each other (Moule & Goodman, 2014). The quantitative research paradigm or approach comes from a philosophical paradigm which views human phenomena as being measurable through the application of objective study. These studies include systematic processes which use rules to assign numbers to persons, objects or events which represent the amount or kind of attribute. By doing this, the researchers expect some observable improvement or change that can be quantified (Parahoo, 2006). The process of quantitative research echoes that of the traditional scientific or imperial methods used in the natural sciences, as they depict reality as something that is objective and external to the researcher (Whitehead, 2007). The main purpose of quantitative research is to measure concepts or variables objectively and accurately, as well as to examine the relationship between them.

As the quantitative research approach is criticized for its relative rigidity and limitation in providing a meaningful understanding of human phenomena (Parahoo, 2006), combining it with qualitative approaches is thought to close the gaps. The goal of the qualitative research paradigm or approach is to gather verbal or observational data that help understand people’s experiences, and present the uniqueness of each participant’s individual situation (Begley, 2008). It has been argued that qualitative researchers also use measurement in their studies. However, qualitative researchers concentrate more on language, perceptions and experiences that help in explaining and understanding people’s behaviour, rather than quantifying them. According to Moule & Goodman (2014) qualitative research acknowledges that there is no single truth or one understanding, rather it revels individual differences.

In this research, it was believed that neither the quantitative nor the qualitative approaches on their own can provide complete and accurate answers to the
research questions under investigation. As Parahoo (2006) indicated, different methods bring different perspectives to what is being studied. Trying to explore the factors that influence the choice of HSS of nursing as a career is complex, as it involves multidimensional forces. The study aims to examine the perceptions related to the nursing profession from different points of view involving HSS, their parents, CGC, as well as nursing students. The pragmatic paradigm implies that the overall approach to research is that of mixing data collection methods and data analysis procedures within the research process that best addresses the research questions (Armitage, 2007). And so, combining both quantitative and qualitative approaches in this study is believed to provide more complete and comprehensive answers to the research questions that are also considered to be valid, reliable and generalizable knowledge (Parahoo, 2006). In this research, mixed methods research approach has been identified to be appropriate to answer the research questions. Cowman (2008) stated that using mixed methods is ideal when studying complex concepts that contain many dimensions, which applies to this research.
Chapter 10: Research Design

This research study aims to identify factors that influence the HSS and their parents in Bahrain to choose the nursing profession as a future career, as well as to explore strategies of best practice to promote nursing as a career in Bahrain. A mixed methods research approach was employed in the study incorporating quantitative and qualitative approaches, including a one-group pretest-posttest.

10.1 Mixed Methods Research Approach

Following the philosophies of pragmatic paradigm, which advocates the combination of quantitative and qualitative approaches, a Mixed Methods Research Approach was implemented in this study. Mixed methods is an approach to research that combines multiple research strategies, or perspectives in a single study for the collection and interpretation of data about a phenomenon, in order to address research questions (Parahoo, 2006). Mixed methods aims to enhance the process of empirical research by using multiple approaches to address research problems (Cowman, 2008). The use of mixed methods has been found to be very relevant to nursing research.

Proponents of mixed methods recognize that the application of multiple approaches to an investigation can improve reliability, validity and trustworthiness of a research study and its overall quality, because the limitations of one method may be counterbalanced by the strengths of another (Speziale & Carpenter, 2007). Thus, nurse researchers choose mixed methods approaches to address complex nursing problems, and combine a study of relationships and human experience with measuring casualty or correlation (Moule & Goodman, 2014). The ultimate goal of mixed methods is to overcome the intrinsic bias that comes from depending merely on a single-method, single observer, and single theory (Speziale & Carpenter, 2007). Mixed methods is used to ensure completeness of findings or confirm findings and conclusions. Completeness increases when one part of the study presents results which have not been found in other parts. The new
information can be complementary to other results, or it may present different information (Cowman, 2008). Confirmation of findings occurs by comparing and contrasting the information from different points of the study (Speziale & Carpenter, 2007). As richness of data comes from diversity (Parahoo, 2006), uncovering the same information from more than one point helps researchers describe how the findings occurred under different circumstances, and help confirm the validity of the findings (Speziale & Carpenter, 2007). Mixed methods approaches reveal the varied dimensions of a phenomena and help to create a more accurate description (Speziale & Carpenter, 2007).

According to Cowman (2008) one of the main strengths of mixed methods is to serve as a means of overcoming the methodological divide between quantitative and qualitative paradigms. Incorporating quantitative and qualitative approaches provide a comprehensive insight into a research problem (Cowman, 2008) and can be particularly valuable in providing detailed descriptions of phenomena and strengthen the research results (Speziale & Carpenter, 2007). Using a variety of methods can help gain in-depth understanding as each yield different picture and slice of reality (Parahoo, 2006). Using a combination of methods can also limit the potential deficits and biases of one particular method (Moule & Goodman, 2014).

In this study, mixed methods approach was used. Data were collected from HSS, students’ parents, CGC and nursing students, in order to reach into a complete and accurate picture of what factors influence the choice of HSS of a career in nursing. It was believed that combining different types of research methods would allow a comparative framework to emerge from the data (Cowman, 2008). Quantitative and qualitative approaches were employed in this study. It is believed that many areas of inquiry can be enriched through the sensible combination of qualitative and quantitative data (Polit & Beck, 2008). Qualitative research is concerned with how people understand their experiences, while quantitative research is concerned with detection of general rules and the examination of combined views. In this research study, qualitative techniques included interviews,
focus groups and written students’ reflections (narratives), while quantitative methods included self-administered questionnaires.

10.1.1 Longitudinal Research Design

In addition to the use of quantitative and qualitative methods through the mixed methods design, a longitudinal research design was also used in this study. It is believed that some phenomena evolve over time, and it is more appropriate that data should be collected at intervals, in order to capture any change that may take place (Parahoo, 2006). Longitudinal research design is used to measure the effect of changes over time as a result of intervention, or for no other reason than the passage of time (Watson, 2008a). It involves the collection of data at various points, sometimes from the same participants (Moule & Goodman, 2014).

Longitudinal research design is used to measure the effect of changes over time as a result of intervention, or for no other reason than the passage of time (Watson, 2008a). It involves the collection of data at various points, sometimes from the same participants (Moule & Goodman, 2014). Longitudinal studies are essential to study the dynamics of phenomena over time (Watson, 2008a). According to Polit & Beck (2008) longitudinal design may be used in four situations; study time related processes, determining time sequences, making comparisons over time and enhancing research control. There are several ways for implementing longitudinal studies, however the strongest design is one where the same people are included throughout the study (Watson, 2008a). These are called cohort studies (Parahoo, 2006). In cohort longitudinal studies, data are mostly collected retrospectively and follow up the same group at several data collection points (Moule & Goodman, 2014). The cohort study selects either an entire cohort of people or a randomly selected sample of them as the focus of data collection (Bryman & Bell, 2007).

Although the cohort longitudinal design is more reliable in suggesting the direction of cause and effect associations (Moule & Goodman, 2014), one of the main problems with this type of design is attrition, which is the loss of subjects throughout the study. Attrition is problematic because the drop out of people who often differ in important ways can potentially result in biases and difficulty with generalizability (Polit & Beck, 2008). This is why it is important to make it clear for the participants that they will be required for a period of time, which might take
years.

It is also imperative that meticulous planning for data collection methods to be used at each point of time is put in place at the beginning of the study (Watson, 2008a). Researchers need to make decisions about the number of data collection points and the intervals between them based on the nature of the study (Polit & Beck, 2008). It is important that the intervals at which data are collected be justified and this should be based on the most appropriate times to capture the phenomena under investigation (Parahoo, 2006).

One important part of this study was to examine the perceptions of the first cohort of nursing students enrolled in a new BSc. nursing programme of nursing as a career, and explore factors that influenced their decisions to join and remain in nursing. People’s perceptions, beliefs and behaviours may change over time (Parahoo, 2006). To examine the perceptions and experiences of the nursing students about nursing, and how these perceptions may have changed during the course of the programme of nursing education, and one year after graduation as a nurse, a longitudinal study design was undertaken. It sounded important for the researcher to explore the impact of the education programme on the subsequent perceptions and behaviours of the nursing students. It could also help identify the positive and negative factors related to the work experience on the perceptions of newly graduated nurses. This is believed to assist in identifying strategies to make nursing education and practice more influential in attracting HSS to join nursing. Mixed methods approach was employed in this part of the study including the use of written reflections, questionnaires and focus groups for the purpose of data collection.

The longitudinal element of the study was divided into two stages, the first stage focused on determining the nursing students’ perceptions and experiences of nursing during their study in the programme. The second stage of data collection took place after one year of graduation and working in the hospital as staff nurses. The purpose for using the longitudinal approach in the first stage was to determine the congruence of the nursing students’ perceptions about nursing across time.
rather than determining how these perceptions changed. But, in the second stage, changes in students' perceptions about nursing as a career were studied by comparing initial students' perceptions (during their undergraduate years), with their perceptions one after year their experience of working as staff nurses.

10.2 One-Group Pretest-Posttest

One important objective of this research was to recommend strategies to enhance recruitment to nursing as a career choice in Bahrain. To achieve this objective, a nursing recruitment intervention was developed, implemented and evaluated following the notions of quasi-experimental (one-group pretest-posttest) research. One-group pretest-posttest was adapted that focused on introducing an intervention to produce change.

Compared with true-experimental designs, in quasi-experimental research designs individuals are not randomly assigned to groups, and may not involve comparison (control) groups (Cannon, 2011). In general, experimental research is concerned with cause-and-effect relationships, and although experimental designs are highly respected in the scientific world, controls are difficult to establish when experimental research is conducted with human beings (Nieswiadomy, 2012). In addition, sample randomization is often not possible, consequently, quasi-experimental designs are the most frequently used quantitative research design (Cannon, 2011). According to Nieswiadomy (2012), quasi-experimental designs allow the researcher to conduct experiments with naturally occurring groups, in which the real world is more closely approximated than when subjects are randomly assigned to groups. This fact is considered as an advantage of quasi-experiments on true-experiments.

Types of quasi-experimental design include: nonequivalent control group; one-group pretest-posttest; and time series design. For the purpose of this research, one-group pretest-posttest design was considered appropriate. One-group pretest-posttest measures the occurrence of an outcome in a group of subjects before and
after an intervention is implemented (Thiese, 2014). In this design, the independent variable (intervention) is still manipulated, but there is no randomization or control group (Cannon, 2011). Although the one-group pretest-posttest design is not as strong as other types of quasi-experimental designs, it can still establish strong links (Polit & Beck, 2012). The inclusion of the pretest-posttest design in a mixed methods model may negate some of the weakness of the design. However, pretest-posttest studies do not have control over other factors; such as subject variables (Thiese, 2014).

One-group pretest-posttest design is one of the most widely used designs by nurse researchers (Smith, 2008). For many ethical and practical reasons, it may not be possible to apply randomization or control in nursing research. It is found appropriate to evaluate interventions related to training and educational programmes (Elliott & Thompson, 2007). According to Parahoo (2006) quasi-experimental designs in general are appropriate where the researcher seeks to introduce minimum disruption in a natural setting.

In assessing interventions effects through self-administered questionnaires administered before and after the intervention (pretest-posttest), evaluators ask participants to self-evaluate their knowledge, skills, behaviours or attitudes (Lam & Bengo, 2003). However, when people rate their experience or knowledge before they attend the programme, they tend to underestimate how much there is to know, and so they overestimate their own level of learning or skill. Pratt et al. (2000) indicated that, using the pretest-posttest model to measure programme effects can result in an underestimation, if response-shift is present and that such bias can be avoided with the retrospective pretest methodology (Lam & Bengo, 2003). More recently, researchers have begun to identify reliable ways of measuring the acquisition of skills of participants (Nieswiadomy, 2012). The Retrospective pretest model of data collection, is one way of overcoming the shortfalls of the pretest-posttest design (Chapter 11).
Researchers have proposed the retrospective pretest as a method to control for key factors jeopardizing the validity of change derived from pretest-posttest designs (Nimon et al., 2011). Because the retrospective pretest captures the pretest and posttest responses at the same time, it limits the impact of outside events on the intervention outcomes (Gouldthorpe & Israel, 2013). In addition, the retrospective pretest eliminates the potential for a second, potentially different instrument by using the same instrument (Ary et al., 2006). Furthermore, the retrospective pretest provides a more accurate measurement of the participants’ perceptions of change because both answers are generated within the same frame of reference, and they are able to properly judge their functional baseline (Pratt et al., 2000).

In this research, data related to the research problem was collected from the participants using a mixed methods approach. The findings were then used to guide the development of a nursing recruitment intervention (independent variable) for the HSS, aiming to improve their awareness about nursing and encourage them to consider it as a career choice (dependent variables). One-group pretest-posttest design was used for the purpose of guiding implementation of the recruitment intervention, while using the retrospective pretest model for measuring the outcomes of the intervention.
Chapter 11: Population, Sampling and Data Collection Methods

11.1 High School Students

In this study, the research population consisted of all Bahraini HSS studying in the final year of high schools in Bahrain. The students were aged between 16-18 years from both government (boys and girls) and private schools. In Bahrain, there is a total of 67 high schools, amongst these there are 33 government schools that provide secondary (high school) education for students; 18 schools for girls and 15 schools for boys. In addition, there are 34 private schools providing high school education (MOE, 2010). According to the latest statistics of MOE (2010), there were a total of 12,220 studying in the high schools. This figure includes 10,078 students studying in the government schools (4,663 boys and 5,415 girls) and 2,142 students in private high schools.

To enable generalizability of the findings, the eligibility criteria of the target population must be described (Schneider & Elliott, 2007). The inclusion criterion for the schools was for all high schools to have students in the final high school year (grade 12). For the private schools, an additional inclusion criterion was that, the school follows the national curriculum, where most of the students are Bahraini citizens.

On the other hand, exclusion criteria included the following:

- Schools that don’t have grade 12.
- Government schools that provide vocational and religious education, and not the general stream. These schools were excluded because the students are not eligible to enter a school of nursing.
- Private schools which did not follow the national curriculum.
- Private schools which follow the national curriculum, but separate the two genders of students in campuses.
These criteria left us with a target population of 10 boys’ government schools, 17 girls’ government schools, and 12 private schools.

11.1.1 Sampling Method and Sample Size
To select participants from the HSS, a probability sample was taken into consideration, so that every unit in the target population has a more than zero chance of being selected. When the sample frame contains units that vary greatly in variables; such as age, gender, socioeconomic status, education or experience, stratified random sampling will be most appropriate in order to achieve representation. Stratified random sampling was seen to be appropriate to determine the sample of the HSS. Stratified random sampling consists of separating the units of the sample frame in strata according to the variables the researcher believes are important for inclusion in the sample (Parahoo, 2006). A stratified random sample was taken from the three types of high schools, in order to have a better representation of HSS in Bahrain.

From the target population of schools in Bahrain, a stratified random sampling approach was used to select the required number of schools. The different types of schools were first divided to produce three strata including private schools, government girls’ schools and government boys’ schools. Hallberg (2008) claimed that when specific knowledge is needed, population is organized in strata to a predetermined number, which is in proportion to the actual size of that particular group in the population. Based on Hallberg’s suggestions, a proportion of 25% of each group of the schools was assigned to participate in this study. After identifying the number of schools from each group, a simple random sample was drawn; three boys’ government schools, four girls’ government schools and three private schools. This process resulted in a total of 10 schools, representing the three different types of schools. Simple random sampling is the most basic and most common probability sampling design. The desired sample is selected using tables of random numbers or via computer software (Schneider & Elliott, 2007). According to Parahoo (2006) the random selection of units can also be performed
using more traditional objective methods, such as giving each unit a number, putting all the numbers in a box and picking out blindly one number at a time until the required size of the sample is drawn. This method was applied by the researcher to select the samples from schools.

After identifying the sample of schools, samples from the HSS were identified using systematic random sampling. Systematic and simple random sampling are essentially the same procedure (Schneider & Elliott, 2007), however systematic samples are drawn from a population using fixed intervals identified by the researcher in advance (Parahoo, 2006). The sampling interval width is the standard distance between elements chosen for the sample (Schneider & Elliott, 2007). Figure 11.1.1 illustrates the process followed to identify the sample of the HSS.
Based on statistical advice, a formula \( n = (1.96)^2 \frac{p(1-p)}{d^2} \) was used to determine the sample size of students, which resulted in 384 students. This formula calculated the sample size at 95% confidence level with marginal error of 5%. This ensured that the sample size is large enough to be representative of the population. According to Hallberg (2008) if only 70% of the sample are estimated to respond, the target sample should be increased, so that the final sample is large enough. The larger the sample, the more representative of the population it is likely to be (Polit & Beck, 2008). Furthermore, the probability of choosing a non-representative sample decreases as the size of the sample increases (Schneider & Elliott, 2007). The possibility of internal drop-out was also taken into consideration when the number of sample was calculated for the high school students. Hallberg (2008) suggested that respondents may leave several questions without a
response, which is a threat to the reliability of the findings. In this situation the incomplete questions can be excluded from the study without having to worry about the representation of the sample. Based on these two assumptions, and to ensure having enough numbers of students participating in the study, the researcher decided to double the size of the sample which increased the sample size to 764 (Table 11.1.1).

An approval to include the high schools was obtained from the MOE, which was believed to help guaranty that most schools will participate in the study. Yet, no one could guarantee that all HSS in those schools will participate. For each school, a proportionate sample size was identified, according to the number of students in each school. Table 11.1.1 illustrates the sample size as calculated for each school.
Table 11.1.1 Sample Size Identified for the HSS

<table>
<thead>
<tr>
<th>School code</th>
<th>Sample size identified after doubling the total sample size to 764</th>
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<tbody>
<tr>
<td>1</td>
<td>58</td>
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<tr>
<td>2</td>
<td>94</td>
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<td>9</td>
<td>14</td>
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<td>10</td>
<td>28</td>
</tr>
</tbody>
</table>

11.1.2 Method of Data Collection

Self-administered questionnaires were used to collect data from the HSS about their perceptions of nursing as a career. The content of the questionnaire was developed based on literature related to career choice, and was translated to Arabic to accommodate the preference of students. Majority of the items on the questionnaire were adopted from a similar study by Anderson (1992) (Appendix 4).

The questionnaire consisted of two main sections:

- Section one included demographical data; these included information on age, gender, marital status, occupation of parents, educational level of parents, name of school, year of study, Cumulative Grade Points Average (CGPA), family members employed in health care and occupation or study chosen by siblings.
• Section two included five questions and focused on: perceptions of nursing as a career, sources of information and views about nursing, intentions to study nursing, persons who may influence students’ choice to study nursing and factors that might affect their choice of the university programme.

Question one used Likert scale where the students were asked to indicate whether they ‘4-strongly agree’, ‘3-agree’, ‘2-disagree’ or ‘1-strongly disagree’. The scale was structured in a way that negative items were mixed with positive items. This is believed to prevent respondents getting in a rhythm of ticking boxes in the same column (Parahoo, 2006). Question five also used a verbal rating scale where the students were asked to indicate whether the items listed were: ‘1-Not a factor at all’, ‘2-Not a very important factor’, ‘3-An important factor’, or ‘4-A very important factor’.

The other three questions were multiple choice questions, where students were directed to choose one most appropriate or two most appropriate answers from a list of items.

**The data collection process**

The process of data collection from HSS started by discussing the purpose of the study with the CGC in the participating schools. A systematic random sample was identified using the lists of students provided by the CGC. After assuring consent for participation from the students and their parents, the students were asked to complete the questionnaires during regular class time. The researcher explained the purpose of the study to the students and guided them on how to answer the questionnaire. After completing the questionnaires, the students were instructed to insert them in an envelope that was sealed at the end of the data collection. The sealed envelopes were then collected by the researcher.
11.2 Parents

11.2.1 Sampling Method and Sample Size

The study also included the parents of HSS (Appendix 3 for the inclusion criteria) studying in the above schools. Qualitative methodologies were designed to collect data from the students’ parents, so a non-probability sample was assigned. In qualitative research, the intent is to select participants who can provide information-rich data rather than generalize findings (Murray, 2002), so it is recommended that the researcher selects a very small sample size. This also makes choosing a random sample unnecessary.

A quota sample consisting of eight of the HSS's parents (two from boys' government, two from private schools, three from girls' government schools and one picked randomly from all categories) (Appendix 3) was selected. According to Bryman & Bell (2007) the typical group size for a focus group is six to ten participants. A quota sample is one in which the researcher identifies population strata, and determines how many participants are needed from each stratum (Polit & Beck, 2008). Quota sampling was implemented because the researcher recognized the need for different groups in the sample (government and private schools) to be adequately represented. Parahoo (2006) suggested that as people with different attributes may have different views, quota sampling addresses the issue of appropriate representation for each segment of a population. Potential participants were identified through the CGC working in the schools participating in this study. Nominations of parents were based on criteria provided by the researcher (Appendix 3). According to Polit & Beck (2008) characteristics chosen to form the strata are selected based on prior knowledge about the population of interest. By using information about population characteristics, researchers can ensure that diverse segments are represented in the sample.

11.2.2 Method of Data Collection

Students' parents were invited to participate in a focus group for the purpose of validating the data collected from the students, and further explore the amount of
influence they have on their children’s choice of a career in nursing. A protocol was developed before conducting the focus group interviews to make sure all important details are implemented (Appendix 3). The protocol was developed based on Krueger & Casey (2009) guidelines for conducting focus groups. As there was no intention to compare and contrast the findings of the focus groups based on other characteristics related to high school students' parents, it was planned to use a single-category design (Krueger & Casey, 2009). This means that participating parents of students coming from government boys’ schools, government girls’ schools and private schools were joined together in the focus groups regardless of the type of school, their age, gender or any other characteristics.

The focus group interviews were planned in the evening and took place in RCSI Bahrain campus. The main objective of identifying the time and venue of the interview was to ensure a relatively quiet space to avoid interruptions and provide privacy. The interview took around 90 minutes. Students’ parents were sent letters of invitation through their children, and were asked to respond to the invitation. At the beginning of the meeting, the moderator explained the purpose of the study to the participants, and they were allowed some time to ask questions about the study before they were asked to sign consent to participate in the focus group. A pre-group self-completion questionnaire seeking demographic information was also used (Appendix 3).

To avoid problems that might arise because of the different personalities of the participants, the moderator employed the following methods:

- The introductory part of the focus group suggested that all opinions are important, and that all participants have valid points to contribute.
- Dominant participants were controlled by both verbal and non-verbal constraints.
- All participants were encouraged to talk.
The moderator controlled individual participants when it became apparent to the group that the individual is incoherent (Murray, 2002).

A questioning route was developed by the researcher and used to guide the focus group (Appendix 3). To be consistent with the mixed methods approach, results from the HSS’s questionnaires were used to develop the questions used in the focus group interviews. Sample group questions and probes were developed using Krueger & Casey’s (2009) model of open-ended question methodology: opening questions leading into the subject, introductory questions, transition questions, key and ending questions (Murray, 2002). The questions asked in the interviews were made simple, allowing participants to express their views in a supportive environment. The questions proceed from general overview questions to more specific questions on the study. However, in the flow of the interviews, some unplanned questions were found to be useful in obtaining data related to the study. Because taking notes when many people are speaking is not possible, a tape-recorder was used to record the focus group interviews. The interview was conducted in Arabic to accommodate the parents’ preference.

An assistant moderator was assigned to take notes of the notable, enlightening phrases, and the well said statements that illustrate an important point of view as well as place the name or initials of the participant after the quotation. At the end of the focus group, the assistant moderator provided a short summary of the important themes discussed to get confirmation from the participants as well as add some follow up questions on topics of interest.

The data collection process

The focus group interview started after ensuring consents from the participants, introducing them to the aim of the focus group and agreeing the ground rules of the discussions. The discussion was very interesting, yet very challenging. The researcher, who acted as the moderator tried to ensure that all participants are involved in the discussions. Coming from a nursing background, the researcher
was faced with some questions related to the research question pointed by the participants, in which the researcher redirected the question to them. It was also challenging to keep quiet and accept misconceptions and some very negative comments related to nursing.

11.3 Career Guidance Counselors

11.3.1 Sampling Method and Sample Size

In addition, the CGC working in the high schools were also included in the study. Qualitative methodologies were designed to collect data from the high school students’ CGC, so non-probability sampling was assigned. A purposive sampling technique took place to include all the CGC from the 10 schools participating in the study. It was believed that this group will provide the necessary data required for the study. Parahoo (2006) suggested that, if the purpose of the study is to explore phenomena in depth, researchers need to ensure that the sample has experience and views that can be useful in achieving this objective. The CGC working with the HSS involved in this study were considered to be the most appropriate group to provide information related to career guidance available to these students.

11.3.2 Method of Data Collection

CGC were involved through semi-structured interviews to help identify their role in guiding the students with their career, activities available to help the students with that, and identify whether nursing is considered as a part of their agenda. Face to face interviews were preferred on using telephone and other technologies to make it easier to establish rapport and trust, which may ultimately influence the quality of the data obtained (Jackson et al., 2008). The interviews were audio-taped to have a lasting record of the interview to be used for analysis.

The instrument used consisted of three sections (Appendix 5):

- Section one included demographical data; age, gender, marital status, educational qualification, years of experience, name of school, number of students in the school and number of students in grade 12.
• Section two included the interview question guide, which contained general questions related to career guidance activities taking place in the school, and whether nursing is considered as part of these activities.
• Section three included a self-administered questionnaire examining the perceptions of the CGC about nursing as a career. The instrument consisted of 49 items, and a 4-point Likert scale was used to rate the different items. The questionnaire was adapted from Anderson (1992).

The data collection process
The CGC were first contacted by phone, in order to discuss the purpose of the study and get their permission to participate. An appointment for the interview was also agreed. This was then followed by an invitation letter, which included an outline of the nature and purpose of the study, and indication of how the findings are going to be useful to the researcher. The letter also included the date, time and venue of the interview agreed with the CGC (Appendix 6). All interviews were conducted in the CGC’s offices in their schools, and a convenient time was identified by them so that the interview environment is made free from interruptions, as much as possible. The interviews lasted between 60-90 minutes. The CGC were first interviewed using the interview guide. The interviews were conducted in Arabic to accommodate the preferences of the participants. The interviews were audio-recorded and transcribed in a later stage. After the interview, the CGC were asked to complete the self-administered questionnaire. At the end of the interview, an appointment was agreed for the researcher to collect data from the HSS. A list of the students’ names was also provided to the researcher for the purpose of sampling.

11.4 Nursing Students
11.4.1 Sampling Method and Sample Size
The first cohort of the undergraduate nursing programme in RCSI Bahrain was also a part of this study. The population of students constituting the first cohort of 38 nursing students studying in the undergraduate nursing programme in RCSI
Bahrain participated in the study. According to Parahoo (2006), it is sometimes important to use the entire units of a population in a study. Mixed methods research approach including quantitative and qualitative approaches was employed to collect data from the nursing students. Although the number of students is small to be used in quantitative research, Polit & Beck (2008) argued that, if longitudinal data are collected, fewer participants may be needed because each will provide a greater amount of information at different points in time. A longitudinal research design was also adapted to collect data from the nursing students in this study.

11.4.2 Methods of Data Collection

Data about the perceptions of RCSI nursing students was collected at three points during their study in the programme, and one year after graduation and working as staff nurses. A combination of data collection methods were used including self-administered questionnaires, focus groups, and written reflections. Data collection took place in four stages:

- **Stage One**: Took place in year 1 of the programme, and included analysis of students’ written reflections (narratives) on how they feel about nursing, and factors that motivated them to enrol in nursing education.

- **Stage Two**: In year two, the students were asked to complete a self-administered questionnaire that was based on the findings from stage one (Appendix 7). Consistent with the principles of mixed methods, the data were used to confirm the previous data collected from the reflections. The instrument consisted of two sections; the first contained demographic details including age, gender, marital status, parents’ education, parents’ occupation, name of the school they graduated from, relatives who work in health care, and occupations chosen by siblings. The second section included five questions and focused on: motivation to study nursing, perceptions of nursing as a career, sources of information about nursing, the period of time when thought about joining nursing and future career
intentions. Participants were given instructions to circle one, two or all appropriate items listed under each question.

- **Stage Three**: This stage took place in year three and involved a focus group to further validate and clarify the data collected in stage one and two. The research cohort was assigned randomly into two focus groups of 19 students, and interviews were conducted in English and audio-recorded. The questioning route used to guide the focus groups was developed based on the results of the data collected from written reflections and the questionnaire (Appendix 8). The focus groups were moderated by two researchers. Before the interviews, the facilitators outlined the procedure and process for the conduct of the focus groups.

- **Stage Four**: After one year of experiencing work as staff nurses, the students were asked to complete a self-administered questionnaire (Appendix 9). The questionnaire was adopted from Anderson (1992), and was based on the findings of the first three stages. The instrument consisted of two sections; the first included demographic details including age, gender and marital status. The second section included four questions and focused on: perceptions of nursing as a career, future career intentions and satisfaction with the career decision made after one year of working as staff nurses. Respondents were also asked about important factors considered in selecting the programme of study.

### 11.5 Participants in the Nursing Recruitment Intervention

**11.5.1 Sample used to Participate in the Recruitment Intervention**

Assisted by the CGC, a convenience sample of 90 grade 12 HSS coming from two girls’ government schools and one boys’ government schools participated in the nursing recruitment intervention. The students were selected because they were studying in the science stream (Chapter 15). In addition, the three CGC working with these students participated in this part of the study.
12.5.2 Data Collection Following the Recruitment Intervention

After the implementation of the nursing recruitment intervention in the high schools, a self-administered questionnaire was used to evaluate the intervention (Appendix 10). The questionnaire consisted of two sections; the first contained demographic details including age, gender and marital status, parents’ education, parents’ occupation, name of the school, last CGPA and relatives who work in health care. The second section focussed on evaluating the effectiveness of the intervention and consisted of two parts:

- Part one used a retrospective pretest to determine the knowledge and awareness of the participants about nursing as a career, before and after participating in the intervention.
- Part two contained five questions and focused on evaluating the effectiveness of the individual recruitment elements in improving their knowledge and awareness of nursing, encouraging them to consider nursing as a career, and how much they enjoyed them. A ranking scale was used where students were asked to rank the elements from 1-5 according to most effective to least effective. In addition, the participants were asked to identify their desire to join nursing after participating in the intervention.

Data were collected two weeks after the implementation of the intervention.

The CGC were requested to provide a report in order to evaluate the recruitment intervention, and students’ reactions to the different elements, from their own perspectives and observations. The CGC were provided with a guide to help them provide the necessary information for the report (Appendix 11). The guide was discussed with the CGC before the implementation of the intervention in their schools.
Chapter 12: Reliability and Validity

Advocates of quantitative research have sought to ensure validity and reliability in their data collection methods to maintain the rigour of their study (Moule & Goodman, 2014). Reliability and validity are related to the interpretations of scores from psychometric instruments; such as questionnaires, education tests and symptom scales (Cook & Beckman, 2006). Reliability and validity also relate to the data collection methods and instruments employed in the research, and to the extent that the researcher has been able to limit any bias in the data collection process (Moule & Goodman, 2014). Confirmation of the reliability and validity of these instruments should be considered as a prerequisite for assuring the integrity and credibility of the research findings (DeVon et al., 2007).

It is believed that the effectiveness of an instrument is in large part due to the reliability and validity of the instrument itself (Salmond, 2008). Thus, in the process of constructing a measurement instrument, an important part is to ensure that the data collected are reliable and valid. In quantitative research, if the instruments are considered reliable and valid, then it is assumed that the data they produce should also be reliable and valid (Parahoo, 2008). It is worth noting that reliability and validity are not independent qualities of an instrument. For an instrument to be valid, it has to be reliable (Watson & Keady, 2008). In addition, an instrument can be reliable without being valid, therefore reliability is a necessary, but not a sufficient condition for validity.

12.1 Assessment of Reliability, Validity and Rigour of this Research

In this study, face and content validity of all the research instruments, including the self-administered questionnaires, semi-structured interview guide, as well as the focus group questioning routs were assessed by the use of peer review. Content validity addresses the degree to which an instrument or items in the instrument provide an adequate and representative sample of items to represent the construct of interest (Polit et al., 2007). Face validity is considered by researchers as one
part of the content validity, however face validity implies that the instrument appears, on the face of it, to measure the construct of interest. Because there is no statistical test to determine whether a measure adequately represents a construct, content validity requires expert judgment of other researchers and of experts on the topic under study (Kimberlin & Winterstein, 2008). A group of five content and research experts reviewed the instruments for the relevance and clarity of the items in the instruments. More emphasis was placed on ensuring that the questions were stated in a simple language, clear and easy to be asked. As many of the instruments were translated to Arabic, both the Arabic and English instruments were reviewed by an expert academic from the Language Department. Changes were done based on the feedback received. These changes are believed to enhance the overall content validity of an instrument (Salmond, 2008).

The self-administered questionnaire used for the HSS was piloted using 25 HSS, who were not involved in the study. In addition, the two self-administered questionnaires used to collect data from the nursing students were piloted using a group of nursing students, who shared similar characteristics of the nursing students included in the study. The participants in the pilot studies were asked to comment on the clarity and appropriateness of the instruments. According to Moule & Goodman (2014) a number of participants might be asked to review the questionnaire and identify issues, such as items that do not make sense or those that might be difficult to interpret and answer. Minor modifications were made to the instruments based on the feedback received from the pilot groups. Using the data collected, a Cronbach’s Alpha test was applied to ensure the internal consistency of the questionnaires ( Chapters 16 and 19). Internal consistency (split-half) reliability is the most widely used reliability approach among researchers (Polit & Beck, 2008). Internal consistency measures how well the scores for individual items on the instrument correlate with each other (Cook & Beckman, 2006). The most widely used method for evaluating internal consistency for an instrument which uses a Likert scale is Cronbach’s alpha (Elliott, 2007).
Cronbach’s alpha is also the only reliability index that can be performed with one test administration, thus requiring much less effort than the other tests of reliability (DeVon et al., 2007). An estimate of 0.70 or higher is desired for judging an instrument as reliable (Salmond, 2008).

The semi-structured interview schedule and the self-administered questionnaire were also piloted using two CGC who were not involved in the study. The CGC were also asked to comment on the clarity, readability and content of the instruments. In addition, two parents who were representative of the participants were asked to review the focus group instrument for clarity. Adjustments were done to all instruments accordingly.

The self-administered questionnaires related to the HSS were translated to Arabic. In addition, the semi-structured and focus group interviews were conducted in Arabic, they were transcribed and translated to English. To ensure accuracy and validity of the data after translation, both the Arabic and English instruments and transcripts were reviewed by an expert academic from the Language Department. Changes were done based on the feedback received.

The findings from the nursing students’ focus groups were compared to the data collected through the written reflections and self-administered questionnaires. Just as quantitative data needs to be valid, Moule & Goodman (2014) claimed that the data presented in any qualitative research report has to be credible. That is, the data presented should be seen as a true representation of the respondent’s views, experience and belief. One of the steps that have been taken by qualitative researchers that supported their claims for credibility was the use of mixed methods in data collection. In addition, the findings from the parents’ focus groups were compared with the findings obtained from the HSS students. According to Parahoo (2008), the reliability and validity of the findings from the focus group can be ascertained by comparing them with findings obtained from other methods used in the same study. Using mixed methods is also believed to have the potential to
contribute to the dependability of the findings (Spezial & Carpenter, 2007), which is equivalent to reliability in quantitative research.
Chapter 13: Data Analysis

13.1 Analysis of Quantitative Data

After completing each quantitative data collection process, data were exported for statistical data analysis by the Statistical Package for Social Sciences (SPSS) for Windows. SPSS versions 21 and 22 were used for data entry and analysis. Two experts in statistics and research were consulted at the design phase of this research, and advised on the appropriate approach to the statistical data analyses. The following statistical analysis were performed:

- The instruments used were tested for their reliability using Cronbach's alpha coefficient (Chapter 12).
- Descriptive statistics, including frequency, mean, standard deviation and percentage.
- Inferential statistics; including parametric tests, nonparametric tests and correlations.

Descriptive statistics are used to describe the main features of the data and provide simple summaries about the sample, therefore enabling researchers to present the data in a meaningful way, which allows simpler interpretation of the data.

In this PhD thesis the following descriptive statistics were applied:

- Frequencies and percentages were computed for the categorical variables. A frequency distribution is the most basic way of organizing data. It involves listing every value of a variable and the number of persons who had each value (Fisher & Schneider, 2007). Frequencies were reported in terms of numbers or percentages.
- Mean and standard deviation were computed for the quantitative variables. Mean and standard deviation of the perception scores were computed in relation to the categorical variables. The mean is the most stable measure of central tendency, as it is the least affected by chance (Fisher &
Schneider, 2007). The standard deviation is the most widely used measure for describing the spread of a distribution as it takes accounts all values in the data set (Miles & Banyard, 2007).

Researchers use inferential statistics to identify differences and relationships between variables. Two broad classes of statistical tests are identified; parametric and nonparametric tests.

In this research, the following inferential statistics were applied:

- Independent t-test is the parametric procedure applied when testing the difference between the means of two independent groups (Watson, 2008b). T-test in this research was used to determine whether there was a significant difference in mean scores of two groups, if the sample size in each group was more than 30 (normally distributed).
- Analysis of variance (ANOVA) is a parametric procedure used to test differences between means, when there are three or more groups (Watson, 2008b). In this study, the test was used to determine whether there was a significant difference in mean scores of more than two groups, if sample size in each group is more than 30.
- Kruskal Wallis test is a nonparametric procedure used when ANOVA is not advisable (Polit & Beck, 2008). This test was used to determine whether there was a significant difference in mean scores of more than two groups, if the sample size in at least one group is less than 30.
- Paired t-test is used to find the difference between variables that are related to the same population (dependent groups). In this research paired t-test was used to compare variables related to the same sample.
- The McNemar test is used to analyse pretest-posttest study designs. It is used to determine if there are differences on a dichotomous dependent variable between two related groups (dependent groups). It is considered to be similar to the paired t-test, but for a dichotomous rather
than a continuous dependent variable. In this research, the McNemar test was used to compare variables related to the same sample.

- Confidence intervals are another measure of spread. It is a range of values within which a parameter lies. Researchers commonly interpret a 95% confidence interval as an interval with a 0.95 probability of containing the population mean (Watson, 2008).

- The chi-square test is used to discover if there is a relationship between two categorical variables and is normally used with nonparametric data (Parahoo, 2006). In this study, chi-Square test was used to determine whether there is a significant relationship between two categorical variables.

- Cramer’s V test is based on the chi-square statistic. The test was used to determine whether there is a significant relationship between two categorical variables, if more than 20% of the expected values are less than five.

- Pearson’s Correlation Coefficient is a parametric measure and the most frequently used measure of association. It can be positive or negative (Parahoo, 2006). This test was used to measure the correlation between two quantitative variables.

- Spearman’s Correlation Coefficient is appropriate when the assumptions for a parametric test are violated (Polit & Beck, 2008). This test was used to measure the correlation between two quantitative variables, if the data in at least one variable are not normally distributed.

In all statistical tests, \( p \)-value \( \leq 0.05 \) was considered significant.

13.2 Qualitative Data Analysis

Qualitative data collected for this research included the written narratives (reflections) from the nursing students, data collected through the semi-structured interviews with the CGC, as well as data collected from the focus groups.
conducted with both parents and nursing students. These data were analysed using Colaizzi’s (1978) methodology and Krueger’s (1994) framework of data analysis. The two frameworks were very similar in principle with regards to the steps of analysing qualitative data, however Krueger’s (1994) framework was used because it was recommended as one of the most useful starting points for analysing focus group interviews (Rabiee, 2004).

Colaizzi’s (1978) is one of the more common frameworks used in nursing research. Content analysis of the written narratives, semi-structured interviews and nursing students’ focus groups were done using Colaizzi’s (1978) methodology. The following steps were followed in analysing the data:

1. The first step was to read through all the narratives and interview scripts.
2. Read each narrative and interview script again and extracted significant statements that directly pertained to the study phenomena. The repeated statements in both written narratives and semi-structured interviews were calculated for the purpose of identifying frequency.
3. The third step involved formulating meanings from the statements.
4. This step involved clustering the significant data into different categories (themes).
5. The clusters of themes were referred back to the original scripts to validate them.
6. The findings were validated by discussing them with the participants. In addition, the findings from nursing students’ written narratives and focus group interviews were validated through the use of mixed methods (Chapter 12), while the findings from the CGC semi-structured interviews were discussed with them directly.

Content analysis of the parents’ focus group interview was done using Krueger’s (1994) framework of data analysis. The framework provided clear series of steps; which could help first-time researchers to manage large amounts of qualitative data much more easily. In order to minimize the potential bias introduced in
analysing and interpreting focus groups, Krueger & Casey (2009) suggested that the analysis should be systematic, sequential; verifiable and continuous. The following steps were followed in analysing the data:

1. The lines of the transcript were numbered for the purpose of locating the quotes within the transcript quickly.
2. Each of the focus group questions were written on a separate page with the relevant quotes from the transcript. Instead of using coloured papers and flip charts, as proposed by Krueger’s framework, Microsoft Word documents were used.
3. Significant statements were then highlighted and organized under themes. Some data were rearranged between the themes, if they did not neatly fit into the original categories, and to make sure we have all statements that say similar things together. New themes and subthemes were created as appropriate.
4. A descriptive summary of the themes and subthemes identified was written. These summaries were used in the data analysis report. Some quotes were selected from the themes/subthemes and were used as part of the narrative report as evidence. Quotes usually give the reader an idea about how the participants talked.
Chapter 14: Ethical Considerations

Orb et al. (2000) contended that ethical issues are present in all kinds of research, and so they have to be considered by all researchers. The research process creates a challenge between establishing the aims of research to make generalizations for the good of others, and the rights of participants to maintain privacy. Therefore, the researcher has a moral obligation to strictly consider the rights of the participants (Holloway & Wheeler, 2013).

In any research process, obtaining informed consent is an essential element (Jackson et al, 2008). Informed consent is the process by which participants who are recruited for a research study are informed, at their level of comprehension, about the nature of the study, the purpose, demands, the interventions, as well as the risks and benefits to them (Coup & Schneider, 2007). The consent must be provided to adult subjects who must be 18 years of age, and competent to make the decision to participate in a research study (Shahnazarian et al., 2013). Researchers should remember that participants who sign informed consent forms may change their mind about participation for any reason and at any time. The consent form is not a binding document (Polonsky & Waller, 2015).

Before conducting this study, a research proposal was submitted to the RCSI Bahrain Research Ethics Committee and an approval to conduct the study was obtained. A permission to conduct the study on HSS was also obtained from the MOE in the Kingdom of Bahrain (Appendix 12). Respondents in this research were asked explicitly to participate in the research. Informed consents from HSS, students’ parents, CGC and the nursing students to participate in this study were assured (Appendix 13). For the HSS, consents from both students and their parents were signed. Consent was obtained from the HSS’s parents few days before the students were asked to complete the questionnaires, as they were completed in school, while consents were obtained from the HSS before they completed the questionnaires. Consents were also obtained from the HSS and
their parents before participation in the nursing recruitment intervention (Appendix 14).

Students’ parents, as well as CGC were asked to sign the consents on the day of focus group or interview. The nursing students were also asked to sign consent at the beginning of the longitudinal study, and before they complete the self-administered questionnaire during stage 4 of the data collection. The issue of pre-existing power was considered early in the study, and students were assured to be free to withdraw from participation without recrimination or prejudice (Parahoo, 2006).

Permission was taken from RCSI Bahrain and the Bahrain Defence Force Hospital to film the video in their premises. In addition, consents were obtained from all the participants in the video (Appendix 15). These included the nursing lecturers, staff nurses, nursing students, physicians and patients, or their adult relatives as appropriate. Consents were also obtained from the nursing students who were pictured for the “Find yourself in Nursing” booklet, which was also part of the recruitment intervention.

Anonymity of all the participants was assured. HSS were asked to write their students’ identification numbers on their questionnaires in case the researcher needed to return to that specific student in future. No names were written on any of the data collection tools. Initials of the participants were used in the initial process of qualitative data analysis, and the respondents were referred to by numbers whenever they were quoted in the research reports. Confidentiality of the information gathered was ensured by appropriate storage. Destruction of tapes, interview data and completed questionnaires was explained in the associated documentation. No one other than the researcher and the involved persons was permitted to access the data.
Chapter 15: Nursing Recruitment Intervention

When developing activities (including research interventions), it is important to look at a broad range of issues, and so developing protocols becomes essential. Protocols are detailed, step-by-step instructions, instructing how to complete a specific activity. The purpose of protocols is to help define a set of operating boundaries, or procedures that help to provide both a safe and productive educational environment (Curtis, 1999). A protocol should be concise, yet provide enough information, so that others can implement it. Researchers need to write a protocol to ensure that they have both a clear idea of how they will implement their projects/interventions, and that they have all the materials and resources needed.

In this research, the intervention aimed to increase the knowledge and awareness of the HSS, their parents and CGC about the nursing career. The activities employed in the intervention focused on exhibiting the expanded roles of nurses as nurse educators, practitioners, managers and researchers, as well as the opportunities available within the nursing profession and nursing education in Bahrain. The intervention was designed based on the literature, as well as data collected from the participants of this research at an earlier stage of the study. It was hoped that the outcomes of the intervention would improve the awareness of the HSS of nursing as a career, and encourage them to consider joining the nursing programmes. The intervention also aimed to help provide some answers to the following research question:

- What strategies and actions, in terms of best practice, are most effective and should be implemented in order to promote nursing as a career in Bahrain and enhance recruitment to nursing?

15.1 The Intervention

Data collected from the respondents of the study at an earlier stage helped in the development of the recruitment intervention. The data helped the researcher identify information about nursing that is considered important to know by the HSS.
The data also suggested a number of recruitment activities that were thought to be effective in delivering the information to the HSS and raising the nursing profile. In addition, both the HSS and nursing students who participated in the study were asked about what would attract them, or had attracted them to choose a specific university or college to study in after their graduation from the high school (Appendices 4&9). The data obtained from these surveys informed the researcher about what information related to the university and nursing programmes, provided by the university that need to be included as part of the recruitment intervention. Relevant data collected from the HSS and the nursing students are presented in Chapters 16 & 19.

15.2 The Recruitment Protocol
The objective of the nursing recruitment intervention was to provide evidence on which to recommend a best practice model to enhance recruitment to nursing as a career choice in Bahrain. To make the intervention more attractive to the HSS, it was called “Find Yourself in Nursing”. The title was proposed by a group of nursing students who were enrolled in RCSI Bahrain.

15.2.1 Target Group
Recruiting qualified nursing candidates to a nursing school requires marketing to the right audience. The audiences of this recruitment intervention were HSS in their final year (grade 12) in Bahrain. Two girls’ government schools and one boys’ government school from those who participated in stage one of the study were involved in the intervention; this selection ensured representation of the majority of students. One class from each school was selected to participate in the project (around 25-30 students in each class). The CGC were involved in selecting the participating classes. As the students in the final year have been divided in classes based on their subject preference and future career choice (science, commerce or literature), it was believed that involving the students in the science sections would be more appropriate, and will not affect the findings of the research.
15.2.2 Recruitment Activities

The recruitment activities planned to be implemented in this intervention were identified based on the data obtained from the participants of this study. In addition, a literature review was conducted to identify the recruitment strategies used in other research, to enable the researcher to develop the appropriate recruitment strategies that can be most effective to be used for this research. The strategies also considered the cultural background of the target group as well as the feasibility of implementation.

For this intervention, four main activities based on the earlier findings of this study and the literature (Chapter 7) were implemented. The purpose built intervention included the following bespoke initiatives:

- ‘Nursing Career in Bahrain’ promotion video;
- Seminar and Nursing Ambassadors: An interactive seminar provided by a Lecturer in Nursing and including student nurses as ‘Nursing Ambassadors’;
- Hands-on Nursing Skills facilitated by nursing students;
- Information Booklet ‘Find Yourself in Nursing’

The “Nursing Career in Bahrain” Video

To produce a video that reflects the culture of Bahrain, it was agreed that producing a video that shows nurses from Bahrain performing different roles would be the best choice for this intervention. It was believed that the nurses who will appear in the video will act as role models, and will present the professional characteristics of nursing which should attract the young students. A search was done through the internet to identify recruitment videos that were implemented in other parts of the world. One of the best examples that the researcher identified was a series of videos produced by Johnson & Johnson (2002a). The videos were produced as part of the Johnson & Johnson Campaign for Nursing’s Future designed to enhance the image of the nursing profession, recruit new nurses and nurse faculty and help retain nurses currently in the profession. The campaign’s
national commercial advertisements (videos) have successfully motivated more young adults to think about nursing as a career option (Campaign for Nursing's Future, 2013).

The "Nursing Career in Bahrain" video developed for the purpose of this research used the Johnson & Johnson (2002b) Nursing Recruitment Video as a template. The script of the video (Appendix 16) was developed using a combination of local Bahraini statements taken from the interviews conducted for the video participants and some of the quotes presented by the participants in the Johnson & Johnson video, as they perfectly reflected the ideas that the researcher of this study wanted to convey in the produced video.

The video used in this research was filmed on two campuses; one of the main hospitals in Bahrain and the University where the nursing participants were registered as students. The participants in the video included four nurses; Staff nurse Intensive Care, Staff Nurse Emergency Nurse, a Lecturer in Nursing and a student nurse. The criteria used to choose the participants in the video were identified to illustrate that nurses can be of any gender or racial group. The video was funded by a research grant provided by RCSI Bahrain. The video was reviewed and validated by five experts in nursing, education and film production and minor modifications were done in the video accordingly. The video script was also translated to Arabic to satisfy the needs of the audience who come from an Arabic background.

**Seminar and ‘Nursing Ambassadors’**

A 10 minutes interactive lecture was presented to the HSS by the researcher. Information presented in the lecture included nursing education, availability of scholarships, opportunities in the nursing profession, and general nursing duties such as patient management, medication administration and physical assessment (Appendix 17). The lecture also provided information about the university, the nursing programmes available, different aspects of nursing students' life as well as
areas where nursing can be performed such as in the hospital, community, elderly homes, schools, etc. The lecturer aimed to provide support and encouragement to stimulate students’ interest in a nursing career. Nursing Ambassadors (Student Nurses) participated in the seminar and spoke to the HSS about their experience as a student nurse and answered questions.

**Hands-on Nursing Skills**

The HSS were divided into small groups of four to five students. In each group, the HSS were helped to demonstrate a basic nursing skill, such as checking temperature, measuring radial pulse, applying a bandage and doing visual acuity test. All students had time to rotate to all stations. The stations were facilitated by the Nursing Ambassadors (Student Nurses). The Lecturer was involved in arranging the stations and supervising the students as they practice the skills. This activity provided the HSS with an opportunity to learn about some nursing skills and interact with the Nursing Ambassadors.

**Information Booklet “Find Yourself in Nursing”**

The booklet included general information about nursing as a profession, nursing education, different roles of nurses, opportunities available within the nursing profession as well as information about university admission (Appendix 18). The information in the booklet focused on nursing in Bahrain. Parts of the information in the booklet were included in the classroom presentation. The booklets were distributed to the participating students and they were asked to read them and share the information with their parents and close friends.

**15.2.3 Promotional Gifts**

Memorabilia and Tokens were used as another form of promotion during the seminar. Mugs, water bottles, pens and flash memories containing the University Logo and messages about nursing were given to the participating students, CGC and school nurses. They were also given copies of the video and information booklet.
15.3 Timelines and Schedule for Implementation

The four activities of the intervention were run in series and were implemented during the two hours of the regular career and academic advisory sessions in the high schools. The activities were scheduled as follows:

- Introduce the lecturer, student nurses and purpose of the project: 2-3 minutes
- Video show: Around 4 minutes
- Classroom presentation: 10 minutes
- General discussion: 10 minutes
- Hands-on nursing skills stations: 80 minutes (20 minutes/station)
- Conclusion and Presentation of gifts (including copies of the video and information booklets: 10 minutes
SECTION 4

STUDY FINDINGS
1 Introduction

The findings of the research study are presented in this section, which includes five chapters. These findings support the objectives of this research study (Chapter 2). Chapter 16 included in this section will present the findings related to the perceptions of HSS of nursing as a career, their sources of information about nursing, the possibility of them considering nursing as a career and factors that may influence their selection of a university. Chapter 17 will present the career guidance activities in high schools, the role of the CGC in providing career guidance to the HSS and their perceptions of nursing. Chapter 18 will present the influence of parents, friends, culture, experiences with nursing, and other factors on the HSS career choice. Chapter 19 will present the findings related to the perceptions of nursing students about nursing, as reported through the longitudinal study. It will also present findings related to nursing students’ sources of information, motivations to choose nursing, career intentions and satisfaction with their nursing career. Chapter 20 will present findings related to the nursing recruitment intervention implemented in high schools. An evaluation of the effectiveness of the intervention in improving the awareness of HSS about nursing will be presented.

When analysing data related to the 4-point Likert scales used in the study, a point which is above the mid-point of the 4-point scale used in the self-administered questionnaire was considered positive by the researcher, so a mean of 2.5 and above was considered a positive perception, while a mean of 2.4 and below was considered a negative perception. Scores of negative items on the questionnaires were reversed during computer analysis to conform to the above positivity and negativity; as for these items a positive perception would have scored disagreement, and a negative perception would have scored an agreement.
Chapter 16: High School Students Perceptions of Nursing

In chapter 16, the data obtained from HSS is presented and the results partially answer the first research question: ‘What are the factors that influence nursing as a career choice among high school students and their families in Bahrain?’ The factors which arise from data collection with parents will be discussed in a separate report (Chapter 18). Quantitative data using a self-administered questionnaire were collected from final year HSS (Appendix 4). The internal consistency of the two scales included in the instrument was assessed, and a Cronbach’s Alpha of 0.82 and 0.75 were reported repeatedly.

The findings are presented in six major sections; with a section on each of the six major divisions of the questionnaire. The sections include analysis of the demographical characteristics of the respondents, their perceptions of nursing, sources of their views about nursing, considering nursing as a career, influence to choose nursing as a career and factors influencing the choice of a college or university.

16.1 Demographic Characteristics of the Respondents
A total of 708 HSS participated in the study, with a response rate of 87.4%. 17 questionnaires were not completed appropriately and so were excluded; therefore, the respondents as HSS consisted of 685 final year HSS.

Table 16.1a illustrates the demographical data related to the respondents. A total of 463 (67.6%) females and 222 (32.4%) males participated in the study. All the respondents were single. They ranged in age from 16 to 20 years, with a mean of 17.4 years of age. It was observed that respondents from private schools were usually younger than respondents from government schools. This is due to the difference in criteria of registration in both private and government schools, as normally students join private schools as a younger age.
Table 16.1a Demographical Data of the HSS ($N = 685$)

<table>
<thead>
<tr>
<th>Demographic Data</th>
<th>n</th>
<th>%</th>
</tr>
</thead>
<tbody>
<tr>
<td>Gender</td>
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<tr>
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<tr>
<td>Female</td>
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<td>Father's Occupation</td>
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<td>71.4</td>
</tr>
<tr>
<td>Father's Educational Level</td>
<td></td>
<td></td>
</tr>
<tr>
<td>University graduate</td>
<td>255</td>
<td>37.7</td>
</tr>
<tr>
<td>High school graduate</td>
<td>269</td>
<td>39.7</td>
</tr>
<tr>
<td>Below high school</td>
<td>139</td>
<td>20.5</td>
</tr>
<tr>
<td>Not educated</td>
<td>14</td>
<td>2.1</td>
</tr>
<tr>
<td>Mother's Educational Level</td>
<td></td>
<td></td>
</tr>
<tr>
<td>University graduate</td>
<td>194</td>
<td>28.7</td>
</tr>
<tr>
<td>High school graduate</td>
<td>289</td>
<td>42.8</td>
</tr>
<tr>
<td>Below high school</td>
<td>148</td>
<td>21.9</td>
</tr>
<tr>
<td>Not educated</td>
<td>45</td>
<td>6.7</td>
</tr>
<tr>
<td>School Type</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Governmental Boys</td>
<td>210</td>
<td>30.7</td>
</tr>
<tr>
<td>Governmental Girls</td>
<td>448</td>
<td>65.4</td>
</tr>
<tr>
<td>Private</td>
<td>27</td>
<td>3.9</td>
</tr>
</tbody>
</table>

The respondents had a mean CGPA of 78.6 with $SD = 11.44$. At the time of data collection, the respondents were asked to provide their last CGPA. The CGPA provided by the respondents was the accumulation of five semesters only, as the respondents still had to complete a sixth semester, before they can receive their final CGPA at graduation from high school (Table 16.1.b).
Table 16.1b HSS Mean Age and Last CGPA (N = 685)

<table>
<thead>
<tr>
<th></th>
<th>Mean</th>
<th>SD</th>
</tr>
</thead>
<tbody>
<tr>
<td>Age</td>
<td>17.4</td>
<td>0.6</td>
</tr>
<tr>
<td>CGPA</td>
<td>78.68</td>
<td>11.44</td>
</tr>
</tbody>
</table>

The respondents were selected from eight schools who participated in the study; four government girls’ schools, three government boys’ schools and one private school. One of the private schools selected to participate in the study refused to participate, and another responded too late when students started their summer holidays, so it was excluded from the study. This resulted in 448 (65.4%) of the respondents coming from government girls’ schools, 210 (30.7%) from government boys’ schools and 27 (3.9%) from private schools.

With regards to the occupations and educational level of the respondents’ parents it is interesting to note that only 7% of the parents were health care professionals, and majority of the mothers were unemployed (71.4%). The numbers of fathers who were educated at a university level and those who were educated at a high school level seem to be very similar (37.7% and 39.7%, respectively), whereas the majority of mothers (42.8%) were educated at a high school level (Table 16.1a).

Students were also asked to identify members of their family; other than their parents, who were employed in the health care field. Of the respondents, 42.9% stated they have family members employed in the health field (Table 16.1c). During the coding of this question for computer analysis, respondents' responses were transferred to a scale as follows: 1) Health related, 2) Not health related, 3) Both, and 4) No older siblings. Looking at the narratives written by the respondents about the health careers selected by their siblings, they mostly identified medicine, nursing, pharmacy and physiotherapy, which were coded as 1) Health related.
Table 16.1c HSS Family Members Employed in a Health Care Career (N = 685)

<table>
<thead>
<tr>
<th></th>
<th>n</th>
<th>%</th>
</tr>
</thead>
<tbody>
<tr>
<td>Is any member of your family other than your parents employed in the health care field?</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Yes</td>
<td>294</td>
<td>42.9</td>
</tr>
<tr>
<td>No</td>
<td>391</td>
<td>57.1</td>
</tr>
<tr>
<td>What career did your other sisters and brothers take?</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Health related</td>
<td>45</td>
<td>6.6</td>
</tr>
<tr>
<td>Not health related</td>
<td>293</td>
<td>42.8</td>
</tr>
<tr>
<td>Both</td>
<td>26</td>
<td>3.8</td>
</tr>
<tr>
<td>No older siblings</td>
<td>321</td>
<td>46.9</td>
</tr>
</tbody>
</table>

16.2 Students’ Perceptions of a Career in Nursing

The HSS were asked to rate their perceptions of nursing on a 4-point Likert Scale (Appendix 4). Respondents’ perceptions are discussed based on four categories; socioeconomic status of nursing, nursing education and career potential, nursing professionalism and nursing working conditions. Based on statistical analysis, affinity was found between different questions on the scale. These questions were grouped into the different categories specified for better understanding of the findings. The categories were compared to the literature and reviewed by two content experts for feedback.

16.2.1 Socioeconomic Status of Nursing

Table 16.2.1 illustrates respondents’ perceptions of the socioeconomic status of nurses. Overall, the findings were very positive. It was interesting that socially, they view nursing to be respected ($M = 3.42$, $SD = 0.76$), important in keeping people well ($M = 3.33$, $SD = 0.71$), have high status ($M = 3.17$, $SD = 0.84$) and is appreciated ($M = 3.10$, $SD = 0.82$). The most negative perception was related to how respondents compare nurses with doctors ($M = 2.00$, $SD = 0.82$).
Table 16.2.1 HSS Perceptions of the Socioeconomic Status of Nursing \((N = 685)\)

<table>
<thead>
<tr>
<th>Perception</th>
<th>Mean</th>
<th>SD</th>
</tr>
</thead>
<tbody>
<tr>
<td>Nursing is a respected profession</td>
<td>3.42</td>
<td>0.76</td>
</tr>
<tr>
<td>Nurses are important when to keep people well</td>
<td>3.33</td>
<td>0.71</td>
</tr>
<tr>
<td>Nursing is a high status occupation</td>
<td>3.17</td>
<td>0.84</td>
</tr>
<tr>
<td>Nurses are appreciated</td>
<td>3.10</td>
<td>0.82</td>
</tr>
<tr>
<td>Nursing offers job security</td>
<td>2.89</td>
<td>0.70</td>
</tr>
<tr>
<td>Nurses are paid very well</td>
<td>2.66</td>
<td>0.82</td>
</tr>
<tr>
<td>Nurses can always get jobs</td>
<td>2.51</td>
<td>0.83</td>
</tr>
<tr>
<td>Nurses status is same as secretaries</td>
<td>2.05</td>
<td>0.93</td>
</tr>
<tr>
<td>Nurses are equal to doctors</td>
<td>2.00</td>
<td>0.89</td>
</tr>
<tr>
<td>Nursing is a profession only for women</td>
<td>1.70</td>
<td>0.82</td>
</tr>
</tbody>
</table>

Total Mean Score 2.68

16.2.2 Nursing Education and Career Potential

Table 16.2.2 illustrates the perceptions of respondents about nursing education and career potential. It is obvious that the most positive perceptions about nursing are related to nurses as team members with doctors and other health care workers \((M = 3.34, SD = 0.71)\), nurses making important contributions to society \((M = 3.30, SD = 0.78)\) and move down when it comes to the perception of nurses as leaders \((M = 2.66, SD = 0.85)\). It is surprisingly obvious that the respondents have misperceptions or lack of information about nursing when they viewed nursing as a pathway to study medicine, nurses to follow directions from other people they work with \((M = 2.22, SD = 0.76)\), and that they obey all doctors’ orders \((M = 2.06, SD = 0.81)\).
Table 16.2.2 HSS Perceptions of Nursing Education and Career Potential (N = 685)

<table>
<thead>
<tr>
<th>Perception</th>
<th>Mean</th>
<th>SD</th>
</tr>
</thead>
<tbody>
<tr>
<td>Nurses are team members with doctors and others</td>
<td>3.34</td>
<td>0.71</td>
</tr>
<tr>
<td>Nurses make important contribution to society</td>
<td>3.30</td>
<td>0.78</td>
</tr>
<tr>
<td>Nursing can be a pathway to study medicine</td>
<td>3.26</td>
<td>0.76</td>
</tr>
<tr>
<td>There are opportunities in nursing for men and women</td>
<td>3.22</td>
<td>0.70</td>
</tr>
<tr>
<td>Nurses are well educated</td>
<td>3.19</td>
<td>0.69</td>
</tr>
<tr>
<td>Nurses have opportunity for career advancement in nursing</td>
<td>3.10</td>
<td>0.76</td>
</tr>
<tr>
<td>Nursing offers opportunity for personal growth and development</td>
<td>2.99</td>
<td>0.76</td>
</tr>
<tr>
<td>Nurses are effective health teachers</td>
<td>2.97</td>
<td>0.69</td>
</tr>
<tr>
<td>Getting a degree in nursing requires many years of study</td>
<td>2.93</td>
<td>0.80</td>
</tr>
<tr>
<td>Nurses can choose different areas of specialty in nursing</td>
<td>2.84</td>
<td>0.79</td>
</tr>
<tr>
<td>Studying nursing is difficult</td>
<td>2.84</td>
<td>0.87</td>
</tr>
<tr>
<td>Nurses are active in health care research</td>
<td>2.81</td>
<td>0.71</td>
</tr>
<tr>
<td>Nurses can teach in college or university</td>
<td>2.80</td>
<td>0.87</td>
</tr>
<tr>
<td>Nurses are leaders</td>
<td>2.66</td>
<td>0.85</td>
</tr>
<tr>
<td>Studying nursing is reasonably priced</td>
<td>2.41</td>
<td>0.88</td>
</tr>
<tr>
<td>Nurses follow directions from other people</td>
<td>2.22</td>
<td>0.76</td>
</tr>
<tr>
<td>Nurses obey all doctors’ orders</td>
<td>2.06</td>
<td>0.81</td>
</tr>
<tr>
<td>Total Mean Score</td>
<td>2.80</td>
<td></td>
</tr>
</tbody>
</table>

16.2.3 Nursing Professionalism

Table 16.2.3 shows the perceptions of respondents with regards to nursing professionalism. The respondents had very positive perceptions about nursing professionalism. The respondents highly perceived nurses to help people (\(M = 3.38, SD = 0.74\)), that they are important when people are sick (\(M = 3.35, SD = 0.73\)) and that nursing is a caring profession (\(M = 3.34, SD = 0.76\)). Yet it is clear
that the respondents do not value nursing as being independent and autonomous, and perceived nurses to lack control on their practice \((M = 2.17, SD = 0.79)\).

**Table 16.2.3 HSS Perceptions of Nursing Professionalism \((N = 685)\)**

<table>
<thead>
<tr>
<th>Perception</th>
<th>Mean</th>
<th>SD</th>
</tr>
</thead>
<tbody>
<tr>
<td>Nurses help people</td>
<td>3.38</td>
<td>0.74</td>
</tr>
<tr>
<td>Nurses are important when you are sick</td>
<td>3.35</td>
<td>0.73</td>
</tr>
<tr>
<td>Nursing is a caring profession</td>
<td>3.34</td>
<td>0.76</td>
</tr>
<tr>
<td>Nurses are powerful people</td>
<td>3.12</td>
<td>0.77</td>
</tr>
<tr>
<td>Nurses use special skills and knowledge</td>
<td>3.07</td>
<td>0.70</td>
</tr>
<tr>
<td>Nursing is a challenging profession</td>
<td>2.72</td>
<td>0.90</td>
</tr>
<tr>
<td>Nurses influence national health policy &amp; legislation</td>
<td>2.66</td>
<td>0.87</td>
</tr>
<tr>
<td>Nursing is an independent profession</td>
<td>2.61</td>
<td>0.83</td>
</tr>
<tr>
<td>Nurses make decisions about patient care themselves</td>
<td>2.54</td>
<td>0.86</td>
</tr>
<tr>
<td>Nurses lack control of their own practice</td>
<td>2.17</td>
<td>0.79</td>
</tr>
<tr>
<td><strong>Total Mean Score</strong></td>
<td>2.80</td>
<td></td>
</tr>
</tbody>
</table>

**16.2.4 Nursing Working Conditions**

Working conditions here refer to the context, setting, technology and type of jobs performed by the nurses in different health care settings. Table 16.2.4 describes the perceptions of the respondents about nursing working conditions. The respondents realized the facts that nursing is a very busy job \((M = 3.1, SD = 0.89)\). They perceived nurses to manage large groups of people \((M = 3.11, SD = 0.78)\) and that they manage high technological instruments. On the other hand, they didn’t really perceive nurses to be able to choose their days and hours of work \((M = 2.10, SD = 0.90)\), but they viewed the work environment to be dangerous \((M = 2.69, SD = 0.90)\).
### Table 16.2.4 HSS Perceptions of Nursing Working Conditions ($N = 685$)

<table>
<thead>
<tr>
<th>Perception</th>
<th>Mean</th>
<th>SD</th>
</tr>
</thead>
<tbody>
<tr>
<td>Nurses manage large groups of people</td>
<td>3.11</td>
<td>0.78</td>
</tr>
<tr>
<td>Nursing is a very busy job</td>
<td>3.10</td>
<td>0.89</td>
</tr>
<tr>
<td>Nurses master high technological instruments</td>
<td>2.89</td>
<td>0.74</td>
</tr>
<tr>
<td>Nurses work with people rather than things</td>
<td>2.82</td>
<td>0.85</td>
</tr>
<tr>
<td>Sometimes nurses have to perform unpleasant tasks to care for their patients</td>
<td>2.81</td>
<td>1.01</td>
</tr>
<tr>
<td>Nurses are exposed to patients with dangerous diseases.</td>
<td>2.79</td>
<td>0.90</td>
</tr>
<tr>
<td>Nursing includes much technical work</td>
<td>2.73</td>
<td>0.78</td>
</tr>
<tr>
<td>Nurses work in a dangerous environment</td>
<td>2.69</td>
<td>0.90</td>
</tr>
<tr>
<td>Nurses can choose days and hours they want to work</td>
<td>2.10</td>
<td>0.90</td>
</tr>
<tr>
<td>Nursing is easy work</td>
<td>1.81</td>
<td>0.85</td>
</tr>
<tr>
<td><strong>Total Mean Score</strong></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td>2.6</td>
<td></td>
</tr>
</tbody>
</table>

### 16.3 Sources for Information about Nursing

This element of the findings section discusses the sources that the respondents used to gain information about nursing, and construct their views and perceptions about a career in nursing. Table 16.3 illustrates that the majority of respondents stated that they gained the information about nurses and nursing by observing a nurse (68.7%) or by talking to a nurse (44.6%). These two sources were followed by watching a programme about nurses on television (43%). The most discouraging result was the poor role of schools in providing information about a career in nursing, with only 16% of the respondents reporting that they received the information about nursing from school.
Table 16.3 Important Primary Sources for Information about Nursing ($N = 685$)

<table>
<thead>
<tr>
<th>Source</th>
<th>Yes</th>
<th>%</th>
<th>No</th>
<th>%</th>
</tr>
</thead>
<tbody>
<tr>
<td>Observed a nurse</td>
<td>470</td>
<td>68.7</td>
<td>214</td>
<td>31.3</td>
</tr>
<tr>
<td>Talked to a nurse</td>
<td>303</td>
<td>44.6</td>
<td>376</td>
<td>55.4</td>
</tr>
<tr>
<td>Watched a program about nurses on TV</td>
<td>292</td>
<td>43.0</td>
<td>387</td>
<td>57.0</td>
</tr>
<tr>
<td>Read about nursing</td>
<td>183</td>
<td>27.0</td>
<td>496</td>
<td>73.0</td>
</tr>
<tr>
<td>School</td>
<td>111</td>
<td>16.3</td>
<td>569</td>
<td>83.7</td>
</tr>
</tbody>
</table>

* Students were instructed to identify the two most important sources

16.3.1 Comparison between Primary Sources of Information about Nursing and Students’ Perceptions

To get an understanding of how the different sources the respondents refer to in getting their information about nursing affect their perceptions of nursing as a career, a comparative analysis was undertaken.

Table 16.3.1 compares the perceptions of respondents about nursing, depending on the sources of information the students used. Among the five sources of information, two were statistically significant at the level of $p \leq 0.05$, when they were compared against the students’ perceptions. The respondents who received their information through talking to a nurse seemed to have better perceptions than other students who did not ($p = 0.001$). On the other hand, the students who received information from the school had slightly less positive perceptions than those who did not ($p < 0.001$).
Table 16.3.1 Comparison between Primary Sources for Information about Nursing & HSS Perceptions

<table>
<thead>
<tr>
<th>Sources of Information</th>
<th>Perception Score</th>
<th>P-value (t-test)</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>Mean</td>
<td>SD</td>
</tr>
<tr>
<td>Watched a program about nurses on TV</td>
<td>Yes</td>
<td>2.85</td>
</tr>
<tr>
<td></td>
<td>No</td>
<td>2.89</td>
</tr>
<tr>
<td>Read about nurses</td>
<td>Yes</td>
<td>2.88</td>
</tr>
<tr>
<td></td>
<td>No</td>
<td>2.87</td>
</tr>
<tr>
<td>School</td>
<td>Yes</td>
<td>2.77</td>
</tr>
<tr>
<td></td>
<td>No</td>
<td>2.89</td>
</tr>
<tr>
<td>Talked to a nurse</td>
<td>Yes</td>
<td>2.91</td>
</tr>
<tr>
<td></td>
<td>No</td>
<td>2.84</td>
</tr>
<tr>
<td>Observed a nurse</td>
<td>Yes</td>
<td>2.89</td>
</tr>
<tr>
<td></td>
<td>No</td>
<td>2.85</td>
</tr>
</tbody>
</table>

*p ≤ 0.05

16.4 Considering Nursing as a Career

After studying the respondents’ perceptions about nursing, it was interesting to find out the possibility of these respondents selecting nursing as a future career. Despite the overall positive perceptions the respondents held about nursing, only 13.7% of them said they would consider nursing after graduation, with the majority (59%) claimed they will not consider nursing after graduation. Of the respondents, 27% stated they were unsure about whether they would consider nursing or not.

16.4.1 Relationship between HSS’s Demographic data, their Perceptions about Nursing, and Considering a Nursing Career

An analysis of variables was done using different parametric and non-parametric tests to find the relationship between respondents' demographic data, their perceptions about nursing and considering nursing as a career. Some of the variables showed statistically significant difference, which was interesting. A correlation test was used to examine the relationship between respondents’ age
and their perceptions of nursing and was found to be insignificant. This is mostly because the students' ages did not vary a lot.

In general, there were significant relationships between the variables related to parents' occupation and parents' educational level with respondents' perceptions of nursing and considering studying nursing. The results in Table 16.4.1 show that fathers' occupation had an influence on respondents' perceptions of nursing. The data showed that respondents whose fathers work in a health care profession had better perceptions about nursing than other students ($M = 2.93$). Mothers occupation showed similar, but even more significant results ($p = 0.006$). Mothers who are health care professionals had children with better perceptions about nursing ($M = 2.97$). It is also important to note that respondents with unemployed parents had higher perceptions of nursing. Similarly, the results showed significant relationships between parents' occupation and educational level, and students expressing an intention to study nursing.

Respondents' perceptions were also compared against their parents' educational status. Both fathers' educational status and mothers' educational status showed highly significant difference between the different four groups ($p = 0.002$ and $p = 0.006$, respectively). For both variables, the respondents who have parents who have below high school education had better perceptions (fathers $M = 2.92$, mothers $M = 2.94$). The mean score goes down as the educational status becomes higher; this means that the respondents with parents who have better education have less positive perceptions than other respondents.

The perceptions of students were also compared based on whether they have other relatives, or their siblings working in a health care field. The results showed no significant difference between the different groups in both variables. The relationship between the students' last CGPA and their perceptions of nursing were also examined and there was no significant relationship. The test showed a
non-significant negative correlation, which means as the students' CGPA was higher, the students had less positive perception of nursing.

Table 16.4.1 Comparing HSS Demographical Data with their Perceptions of Nursing

<table>
<thead>
<tr>
<th></th>
<th>Perception Score</th>
<th></th>
<th></th>
<th></th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td></td>
<td>Mean</td>
<td>SD</td>
<td>Test</td>
<td>P-value</td>
</tr>
<tr>
<td>Gender</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Male</td>
<td>2.85</td>
<td>0.30</td>
<td></td>
<td>t-test</td>
<td>0.077</td>
</tr>
<tr>
<td>Female</td>
<td>2.89</td>
<td>0.24</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Father's Occupation</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Health care professional</td>
<td>2.93</td>
<td>0.40</td>
<td></td>
<td>Kruskal Wallis</td>
<td>0.011</td>
</tr>
<tr>
<td>Non health professional</td>
<td>2.86</td>
<td>0.26</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Unemployed</td>
<td>2.92</td>
<td>0.24</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Mother's Occupation</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Health care professional</td>
<td>2.97</td>
<td>0.20</td>
<td></td>
<td>Kruskal Wallis</td>
<td>0.006</td>
</tr>
<tr>
<td>Non health professional</td>
<td>2.83</td>
<td>0.28</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Unemployed</td>
<td>2.88</td>
<td>0.26</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Father's Educational Level</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>University graduate</td>
<td>2.83</td>
<td>0.26</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>High school graduate</td>
<td>2.88</td>
<td>0.27</td>
<td></td>
<td>Kruskal Wallis</td>
<td>0.002</td>
</tr>
<tr>
<td>Below high school education</td>
<td>2.92</td>
<td>0.26</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Not educated</td>
<td>2.85</td>
<td>0.31</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Mother's Educational Level</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>University graduate</td>
<td>2.84</td>
<td>0.29</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>High school graduate</td>
<td>2.86</td>
<td>0.24</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Below high school education</td>
<td>2.94</td>
<td>0.26</td>
<td>ANOVA</td>
<td>0.007</td>
<td></td>
</tr>
<tr>
<td>Not educated</td>
<td>2.90</td>
<td>0.28</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>School Type</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Governmental Boys</td>
<td>2.85</td>
<td>0.30</td>
<td></td>
<td>Kruskal Wallis</td>
<td>&lt; 0.001</td>
</tr>
<tr>
<td>Governmental Girls</td>
<td>2.89</td>
<td>0.24</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Private</td>
<td>2.93</td>
<td>0.40</td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

*p ≤ 0.05
16.4.2 Relationship between Students’ Perceptions of Nursing and Considering a Career in Nursing

In Table 16.4.2, the relationship between students’ perceptions of nursing, and them considering nursing after graduation was examined. The results clearly show that the better the perception of nursing, the more likely that students to consider studying nursing. The relationship was highly significant with a \( p \)-value of < 0.001.

**Table 16.4.2 Relationship between HSS Perception of Nursing & Considering Studying Nursing**

<table>
<thead>
<tr>
<th>Perception Score</th>
<th>Considering Studying Nursing</th>
<th>( p )-value (Chi-Square Test)</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>Yes</td>
<td>No</td>
</tr>
<tr>
<td></td>
<td>n</td>
<td>%</td>
</tr>
<tr>
<td>&lt;2.5</td>
<td>3</td>
<td>6.4</td>
</tr>
<tr>
<td>2.5 - &lt;3</td>
<td>42</td>
<td>10.3</td>
</tr>
<tr>
<td>3+</td>
<td>49</td>
<td>21.3</td>
</tr>
</tbody>
</table>

*\( p \leq 0.05 \)

16.4.3 Relationship between Sources for Information about Nursing and Considering Studying Nursing

An analysis of variables was done using chi-square statistics to test the relationship between considering nursing as a career and the sources of information the students used. Surprisingly, the only variable that showed a statistically significant relationship was watching a programme about nursing on television (\( p = 0.003 \)).

16.5 Influence on choice of Nursing as a Career

Regardless of the respondents perceptions of a career, in their age they still tend to ask the opinions of others to help them make a decision. Table 16.5 illustrates very important facts about who, and what, can influence the respondents’ choice for a career in nursing. Majority of the respondents (72.8%) selected “myself” as
one important choice with another 58.8% selecting “parents”. “Relatives” and “nurse I know” came next in the sequence. Noteworthy, both CGC and teachers were rated to have the least important influence by the respondents.

Table 16.5 Important People Influencing HSS’s Decision to Choose a Career in Nursing (N = 685)

<table>
<thead>
<tr>
<th></th>
<th>Yes</th>
<th>%</th>
<th>No</th>
<th>%</th>
</tr>
</thead>
<tbody>
<tr>
<td>Myself</td>
<td>499</td>
<td>72.8</td>
<td>186</td>
<td>27.2</td>
</tr>
<tr>
<td>Parents</td>
<td>403</td>
<td>58.8</td>
<td>282</td>
<td>41.2</td>
</tr>
<tr>
<td>Relatives</td>
<td>93</td>
<td>13.6</td>
<td>592</td>
<td>86.4</td>
</tr>
<tr>
<td>Nurse I know</td>
<td>92</td>
<td>13.4</td>
<td>593</td>
<td>86.6</td>
</tr>
<tr>
<td>Friend</td>
<td>70</td>
<td>10.2</td>
<td>615</td>
<td>89.8</td>
</tr>
<tr>
<td>Doctor I know</td>
<td>49</td>
<td>7.2</td>
<td>636</td>
<td>92.8</td>
</tr>
<tr>
<td>Hospital experience with nurses</td>
<td>135</td>
<td>19.7</td>
<td>550</td>
<td>80.3</td>
</tr>
<tr>
<td>High school counselors</td>
<td>21</td>
<td>3.1</td>
<td>664</td>
<td>96.9</td>
</tr>
<tr>
<td>Teacher</td>
<td>4</td>
<td>0.6</td>
<td>681</td>
<td>99.4</td>
</tr>
</tbody>
</table>

*Students were instructed to select the two most important individuals

16.6 Factors Influencing the Choice of a University/College

To help answer the 6th research objective: ‘Recommend strategies to enhance recruitment to nursing as a career choice in Bahrain’, it was interesting to get information about the type of college/university the respondents would prefer to join after graduation. This information could be employed in marketing for the nursing programmes.

As reflected in Table 16.6, the status (M = 3.40, SD = 0.77) and reputation (M = 3.28, SD = 0.84) of the university, and advice of parents (M = 3.32, SD = 0.83) were considered highly important by the respondents when selecting a university/college. Two factors were considered unimportant by the respondents;
geographic location ($M = 2.49, SD = 1.00$) and size of the university ($M = 2.44, SD = 1.02$).

**Table 16.6 Important Factors in the Selection of College/University ($N = 685$)**

<table>
<thead>
<tr>
<th>Factor</th>
<th>Mean</th>
<th>SD</th>
</tr>
</thead>
<tbody>
<tr>
<td>Status of the University</td>
<td>3.40</td>
<td>0.77</td>
</tr>
<tr>
<td>Advice of parents</td>
<td>3.32</td>
<td>0.83</td>
</tr>
<tr>
<td>Reputation of the university</td>
<td>3.28</td>
<td>0.84</td>
</tr>
<tr>
<td>Programs are accredited by the HEC</td>
<td>3.18</td>
<td>0.91</td>
</tr>
<tr>
<td>Friends also enrolled there</td>
<td>3.11</td>
<td>0.81</td>
</tr>
<tr>
<td>Amount of financial aid offered</td>
<td>3.10</td>
<td>0.95</td>
</tr>
<tr>
<td>Campus activities offered</td>
<td>2.87</td>
<td>0.86</td>
</tr>
<tr>
<td>Advice of counselors</td>
<td>2.75</td>
<td>0.81</td>
</tr>
<tr>
<td>University is a private institution</td>
<td>2.64</td>
<td>0.96</td>
</tr>
<tr>
<td>Advice of high school teacher</td>
<td>2.64</td>
<td>0.79</td>
</tr>
<tr>
<td>Beautiful campus</td>
<td>2.55</td>
<td>1.01</td>
</tr>
<tr>
<td>Geographic location of the university</td>
<td>2.49</td>
<td>1.00</td>
</tr>
<tr>
<td>Size of the University</td>
<td>2.44</td>
<td>1.02</td>
</tr>
</tbody>
</table>

**Summary**

The HSS’s perceptions of nursing were generally very positive. In relation to respondents’ perceptions of the socioeconomic status of nurses, the findings were very positive. Respondents viewed nursing as a respected profession, a high status occupation, important to keep people well, and appreciated. With regards to nursing education and career potential, the respondents perceived nurses to be well educated, effective health educators, active researchers and make important contributions to the society. Respondents believed that nurses obey doctors’ orders and follow directions from others. It was interesting to find that respondents sought studying nursing to be expensive, that getting a degree in nursing requires many years of study, and that studying nursing is difficult.
The respondents had very positive perceptions about nursing professionalism. The respondents believed nursing is a caring profession, and that nurses help people and are important when people are sick. It was also interesting to find that the respondents viewed nurses as to use special skills and knowledge. The respondents also perceived nursing to be busy, hard and not flexible with regards to working hours. The respondents also perceived nurses to be exposed to dangerous diseases, and that they work in dangerous environment. They also realized that nurses have to perform unpleasant tasks to care for their patients.

The most common sources of information identified by the respondents were observing or talking to a nurse. This was followed by watching a television programme. The respondents who gained their information by nurses had more positive perceptions about nursing than those who did not. Only few respondents expressed their willingness to consider joining nursing education after graduating from school. There were significant relationships between respondents’ parents’ occupation and education level, with their perceptions. Interestingly, watching television had a significant correlation with respondents’ perceptions about nursing.

Respondents’ parents were found to have a significant role in influencing their career choice. This was followed by other relatives and nurses. The CGC were found to have very little influence with regards to the respondents’ choice of nursing. The respondents identified a number of factors they considered important in selecting a university; including status of the university, advice of parents, and reputation of the university.
Chapter 17: Career Guidance Counselors (CGC) Roles and Perceptions of Nursing

In this chapter, the data collected from the high school CGC is presented. These data will address the second research objective: ‘Describe current High School nursing career guidance practices and perceptions of nursing’. Both quantitative and qualitative data were collected.

Data were collected through semi-structured interviews, with an aim to identify the roles of CGC in guiding the students with their career intentions and identify whether nursing forms part of the agenda. The data were collected over a one month period in 2012. The qualitative data were collected through in-depth interviews using semi-structured questions in an interview guide (Appendix 5). Content analysis of the interviews was done using Colaizzi’s (1978) methodology (Chapter 13). Three main themes were revealed:

1. Career guidance activities provided in high schools
2. Career guidance related to nursing as a career choice and the role of CGC
3. Activities needed to promote nursing in schools

A self-administered questionnaire was also used to collect the quantitative data, which examined the CGC’s perceptions of nursing (Appendix 5). It may be argued that the perceptions of CGC will influence their focus, and the type of advice provided to students. A Cronbach’s Alpha 0.72 was reported for the internal consistency reliability coefficient of the instrument.

In this chapter, the findings are presented in three major sections; the demographical characteristics of the respondents, career guidance provided to HSS and CGC’s perceptions of the nursing profession and nurses.

17.1 Demographic Characteristics of the CGC
A total of ten CGC participated in this study. A non-probability purposive sample was used to identify the CGC (Chapter 11). The respondents as CGC were
working in the high schools involved in the study, and so they had a direct relationship with the HSS who were randomly selected to participate in the study.

Table 17.1 illustrates the demographical data related to the respondents. The majority of respondents were above 40 years of age (54.5%). They were equally distributed between males and females and were all married. Of the respondents, 80.0% held a bachelor degree, whereas 20% were Masters qualified. It was interesting that only one of the respondents had obtained a degree as a counselor; the other nine were originally teachers of different subjects, but received training in career counselling. Five CGC were responsible for providing counselling for more than 700 students.

| Table 17.1 Demographical Characteristics of the CGC ($N = 10$) |
|--------------------------------------|---|---|
| Age                                  | n | % |
| <40                                  | 4 | 40.0 |
| 40+                                  | 6 | 54.5 |
| Gender                               |   |   |
| Male                                 | 5 | 50.0 |
| Female                               | 5 | 50.0 |
| Marital Status                       |   |   |
| Married                              | 10| 100.0 |
| Educational qualification            |   |   |
| Master                               | 2 | 20.0 |
| Bachelor                             | 8 | 80.0 |
| Years of experience in current job   |   |   |
| <7                                   | 5 | 50.0 |
| 7+                                   | 5 | 50.0 |
| School Type                          |   |   |
| Governmental Boys                    | 3 | 30.0 |
| Governmental Girls                   | 4 | 40.0 |
| Private                              | 3 | 30.0 |
| Number of students in high school    |   |   |
| <700                                 | 5 | 50.0 |
| 700+                                 | 5 | 50.0 |
| Number of students in grade 12       |   |   |
| <200                                 | 5 | 50.0 |
| 200+                                 | 5 | 50.0 |
17.2 Career Guidance Activities in High Schools

All ten respondents agreed that career guidance activities were available for the HSS in their schools. These activities are organized through the Career/Academic Counselling Office which is run by trained CGC assigned by the MOE in the schools. General plans are provided to the CGC through the Academic Advising and Career Counselling Unit in MOE, but specific plans of activities are coordinated by the CGC in each school. The MOE then have plans to monitor and supervise these activities. Only three schools provided career guidance sessions at regular basis ranging between 1-2 periods every one to two weeks. Yet, these sessions were not totally focusing on career guidance, but also involved academic counselling for students who had difficulties with their studies. Although career guidance take place at different stages during high school, majority of the activities focus on students in grade 12, which is the final year in the high school. Some of the respondents commented:

"We focus more on level 3 (grade 12) because they will graduate soon, they have two ways, either to study in a university or work". CGC 3

"At this level students become more attentive as they realize it’s their final year and they have to know their position in future". CGC 2

The majority of respondents (n = 7) claimed that career guidance starts in grade 10 when the students join the high school and involve one week of activities, where students are assisted and guided to choose their specializations, which should consequently lead them to choose their future careers. The specializations include three sections; science, literature and commercial studies, in which students select subjects related to the three main areas of study. The respondents mentioned that they include students’ parents in these activities (n = 4). In addition, four of the respondents stated that they are involved with career guidance activities even before the students join the high school. This is organized through MOE, where CGC visit the Intermediate Schools in their areas to advice students and guide
them in choosing their high school specializations. This is usually done through lectures describing the different specializations and the careers they lead to.

The career guidance activities introduced in schools varied. Career counselling included activities to help students identify their career interests, and learn more about the different careers. The respondents asked the students to complete “interest forms” provided by the MOE, to analyse the interests of their students and advise them accordingly (n = 6). They also conducted student interviews to help students identify their career interest and provide them with the guidance they require (n = 6). The respondents sometimes refer the students to some websites to find more information about the careers they are interested in. Another four of the respondents said they started using an “ability and interest test” that has been implemented as a pilot study in some high schools by the MOE. They stated that this instrument supported the students in identifying their interests and comparing them with their personal abilities. They reported that this test will be implemented in all high schools in the near future. One respondents claimed:

“The test helped us with hesitant students in grade 10, those who were not able to decide on which specialization to choose”. CGC 3

A wide range of activities were provided in high schools to help them make their career choices. The majority of the schools (n = 9) provided lectures/workshops discussing the characteristics of different careers, requirements for studying in different universities inside and outside Bahrain (n = 5), requirements of the job market and opportunities for scholarships provided through the MOE and other organizations in Bahrain. The schools also provided the students with field visits to universities, banks and companies (n = 9). The schools also invited representatives from universities and work places to speak to the students about their programmes and careers in their schools (n = 5).

Interestingly, six of the respondents encouraged the students to form the “career groups”. In these career groups, the students who share the same interests meet
frequently to discuss information related to the career of interest and universities where they can join to study. The respondents organize activities related to the career they are interested in and designed booklets of information related to their careers. Also four of the schools take the students to career fairs/exhibitions organized through the MOE.

The respondents also used their individual initiatives and creativity in planning career guidance activities for their students. It was identified that four respondents stated that they provide the students with activities related to personal development including decision making and building own confidence and self-esteem. Some also provided students with training on writing curriculum vitas and prepare them to attend university and work interviews. Few of the respondents (n = 2) designed booklets and brochures including information about the different careers for students to refer to. Some invited their school graduates to talk to the students about their programmes and universities and coordinate with the embassies to provide information about universities and opportunities to study outside Bahrain. A minority also plan career fairs in their schools or organized a “university information corner” in their school library. During the career orientation week that takes place early in grade 10, students from grade 12 are invited to speak about their experiences as well. Some of the respondents mentioned that they guide the students to use career interest tests provided by other countries in the region to help them identify their career interests. Some comments included:

“Students accept their peers’ views better than getting explanations by their teachers” CGC 2

“We developed a booklet that includes information about careers including nursing and got approval to use it for the students”. CGC 7

17.3 Career Guidance Related to Nursing as a Career Choice

All ten respondents stated there is no specific guidance provided in their schools that focused on nursing as a career. Four respondents stated they occasionally
planned visits to nursing schools with only a minority (n = 1) stated that they invited nursing lecturers or nurses to talk about nursing. A respondent said:

“We invited a nursing lecturer who reflected on her experience with nursing and encouraged the students to think about nursing”. CGC 7

Only two of the respondents stated that they have “Little Nurses Groups” that have been formed by students interested in nursing. When asked about students making inquiries related to nursing, the majority of the respondents (n = 8) stated that very few (4-6) of the students asked questions about nursing. They usually seek information related to nursing education and nature of the work nurses do; these inquiries were usually made during the second semester of grade 12. On the other hand, two of the respondents reported that their students never inquired about nursing. Respondents stated:

“As for nursing, it hasn’t got a lot of attention by the students”. CGC 2

“Those students ask about nursing; like if I’d like to study nursing, what specialization I should take, which university would accept me and how will I work if I become a nurse?” CGC 7

In some schools where students have formed their own “nursing groups”, the school nurses worked closely with these students to provide them with opportunities to discover the roles of nurses. The school nurses are trained registered nurses who are assigned to schools to provide necessary screening and health care to the students, including first aid. They are assigned and monitored by the School Health Department in MOH. With the help of the school nurses, the students participate in activities where they practice checking blood pressure, body weight and height, perform blood glucose tests and other activities that expose them to the experience of being a nurse. Some respondents commented:

“The most important career group in the school is Little Nurse Group; they help the school nurse during their activity period with her work”. CGC 5

“She (school nurse) takes the students outside the school or does activities in the school, like attending the International Diabetes Day”. CGC 5
17.3.1 The Role of Career Guidance Counselors

Three of the respondents reported that they encouraged their students to study nursing, while five said they only encouraged those students who showed an interest in nursing. Two of the respondents stated they would encourage their students to join nursing, yet they have never discussed nursing with the students in their schools. These were mainly representing private schools. Respondents stated:

“I encourage students to study nursing for several reasons; Bahrainization of the nursing sector, ... scholarships to study nursing are guaranteed in both government and private universities and job opportunities are available in a variety of hospitals”. CGC 3

“I think nursing is needed for the country, there are many expatriates so the students may take their places and the salary is profitable”. CGC 2

“We have to look into the students’ abilities and interests; some students are good for specific careers”. CGC 1

In relation to students inquiries about nursing, seven of the respondents provided information about the duration of nursing programmes and study fees (n = 7), work opportunities (n = 2), opportunities for career promotion in nursing (n =1), opportunities for higher education in nursing (n = 2) and scholarship opportunities in nursing (n = 3). They stated that they are not qualified to provide more specific and in-depth information about nursing because they are not nurses. One of the respondents stated that it is not the responsibility of the CGC to provide information related to nursing, but it is the responsibility of the professional nurses and nurse educators. Some comments included:

“I only tell the students general information about nursing, as you know, I am not a specialized person and can't give specific details”. CGC 7

“Why the college did not send someone like other colleges? Most universities present their programmes to our students”. CGC 9
“I’ve been in the Ministry for 50 years, I’ve never talked about nursing as a career … I can’t talk on their behalf”. CGC 9

The respondents were asked to identify the sources of information they use to learn more about nursing. There doesn’t seem to be structured plans to provide information related to nursing, but it depends on respondents’ individual efforts. Some respondents (n = 4) stated they searched the internet to get information about nursing. Three of them said they designed booklets on careers including nursing using information from the internet. Another three stated that they get information from nursing students or during their visits to nursing schools. Only two of the respondents got their information through experience with hospitals. Other sources identified by at least one of the respondents included a relative doctor, a relative nurse, career exhibitions, college brochures or some official career journals published by local organizations. The respondents said:

“The website has information and videos of a nurse talking about the nature of work, what it offers in details”. CGC 5

“One of my relatives is a nurse, he tells me most of the information I know about nursing, college requirements, salaries, everything”. CGC 2

17.4 Activities Needed to Promote Nursing in Schools

The respondents were asked to identify some activities they believe are going to be effective in promoting the nursing profession for HSS. The respondents identified a variety of activities that they thought essential to encourage students join a career in nursing. They identified the importance of lectures/workshops provided by nurses or nursing students to discuss nursing careers, nursing education, and study requirements (n = 4). They also suggested that involving students with activities related to nursing such as first aid, measuring weight and blood glucose are good motivators for students (n = 4). Others thought arranging visits to the hospitals where students can observe nurses in action would also encourage students to consider a career in nursing (n = 4). Some respondents stated:
“We offered a lecture given by a specialist in chemical engineering; the students were influenced by the lecturer and some of them registered for this specialization”. CGC 1

“The students feel bored when I talk to them all the times, so they prefer another person who is specialized to talk to them”. CGC 2

“They like dynamic activities, such as doing first aid. Also visits to the hospital, if that is coordinated by the nurse in the school”. CGC 4

Notably three respondents suggested using videos illustrating nurses working in hospitals and describing the roles of nurses is an effective strategy to promote nursing. Other activities suggested included displaying posters related to nursing, providing brochures with information about nursing and providing the students with opportunities to experience working with nurses in the hospitals. Some comments included:

“If you have films or videos to send them to the Ministry then we will show them to the students”. CGC 2

“From my experience, I noticed that films and lectures get more attention from students …… The practical things also attract the girls, such as measuring blood sugar”. CGC 4

17.5 Career Guidance Counselors’ Perceptions of Nursing

As part of identifying the factors that influence the choice of HSS of nursing as a career, it was important to examine the perceptions of the respondents of nurses and the nursing profession. This was accomplished through the use of a self-administered questionnaire. The questionnaire also assessed the satisfaction of respondents of the career guidance related to nursing that is provided in their schools. Respondents’ perceptions will be discussed based on five categories; socioeconomic status of nurses, nursing education and career potential, professionalism of nursing, working conditions of nurses and career guidance of nursing.
17.5.1 Socioeconomic Status of Nursing
Table 17.5.1 illustrates the perceptions of the respondents of the socioeconomic status of nursing which were very positive. The respondents viewed nurses to be much respected and highly appreciated by the society. Nurses were also perceived to be important to keep people's wellbeing and that they can always get jobs. It is also important to note that the respondents did not view nurses to be equal to physicians. Some of the respondents commented the following:

“He'll never be unemployed due to the availability of a large number of hospitals”. CGC 3
“I told them the job is guaranteed and the nursing salaries are high”. CGC 5

Table 17.5.1 CGC Perceptions of the Socioeconomic Status of Nurses (N = 10)

<table>
<thead>
<tr>
<th></th>
<th>Mean</th>
<th>SD</th>
</tr>
</thead>
<tbody>
<tr>
<td>Nursing is a respected profession</td>
<td>4.00</td>
<td>0.00</td>
</tr>
<tr>
<td>Nurses are appreciated</td>
<td>3.73</td>
<td>0.47</td>
</tr>
<tr>
<td>Nurses are important in keeping people well</td>
<td>3.64</td>
<td>0.50</td>
</tr>
<tr>
<td>Nurses can always get jobs</td>
<td>3.64</td>
<td>0.50</td>
</tr>
<tr>
<td>Nursing offers job security</td>
<td>3.36</td>
<td>0.50</td>
</tr>
<tr>
<td>Nursing is a high prestige occupation</td>
<td>3.27</td>
<td>0.90</td>
</tr>
<tr>
<td>Nurses are paid very well</td>
<td>2.82</td>
<td>0.87</td>
</tr>
<tr>
<td>Nurses are equal to physicians</td>
<td>2.36</td>
<td>1.03</td>
</tr>
<tr>
<td>Nursing is a profession only for women</td>
<td>1.45</td>
<td>0.69</td>
</tr>
<tr>
<td>Nurses status is same as secretaries</td>
<td>1.45</td>
<td>0.69</td>
</tr>
<tr>
<td><strong>Total Mean Score</strong></td>
<td>2.97</td>
<td></td>
</tr>
</tbody>
</table>

17.5.2 Nursing Education and Career Potential
As can be seen in Table 17.5.2, the perceptions of the respondents related to nursing education and career potentials were also rated very positively, except for five items. Although the respondents viewed nurses to be team members with physicians and other health care workers, they saw them to obey all doctors'
orders, and follow directions from other people. It was interesting to find that nurses were perceived to be well educated and make important contribution to their society. They also perceived nursing to provide opportunities in nursing for both men and women. The respondents commented:

“One of my relatives works as a nurse, he joined the career without education and then he joined a nursing college, but now he is a ward supervisor”. CGC 2

“Nursing is a backup career for a doctor”. CGC 2

“The doctor may be the one who treats the patient, while nurses are the ones who carry out the tasks”. CGC 2

“I tell them that there is general nursing and there are specializations in specific fields”. CGC 2

“The science students usually prefer to study medicine”. CGC 6

“I know nurses are very professional, well trained and very well educated”. CGC 3

With regards to nursing education, the respondents perceived the number of years to study nursing to be reasonable, but they thought studying nursing was difficult and expensive. Another negative perception which requires more attention was that some of the respondents viewed nursing to be a pathway to study medicine. Some comments from the interviews included:

“The study in nursing is guaranteed whether in private or government universities”. CGC 3

“As for nursing, it hasn’t got a lot of attention from the students”. CGC 2

“I tell the students about my brother who studied as a lab technician, but he got the chance to study medicine”. CGC 3
Table 17.5.2 CGC Perceptions of Nursing Education & Career Potential (N = 10)

<table>
<thead>
<tr>
<th>Perception</th>
<th>Mean</th>
<th>SD</th>
</tr>
</thead>
<tbody>
<tr>
<td>Nurses are team members with physicians and others</td>
<td>3.73</td>
<td>0.47</td>
</tr>
<tr>
<td>There are opportunities in nursing for men and women</td>
<td>3.73</td>
<td>0.65</td>
</tr>
<tr>
<td>Nurses make important contribution to society</td>
<td>3.73</td>
<td>0.47</td>
</tr>
<tr>
<td>Nurses can choose different areas of specialty in nursing</td>
<td>3.64</td>
<td>0.50</td>
</tr>
<tr>
<td>Nurses have opportunity for career advancement in nursing</td>
<td>3.64</td>
<td>0.50</td>
</tr>
<tr>
<td>Nurses are well educated</td>
<td>3.55</td>
<td>0.52</td>
</tr>
<tr>
<td>Nursing offers opportunity for personal growth and development</td>
<td>3.50</td>
<td>0.71</td>
</tr>
<tr>
<td>Nurses can teach in college or university</td>
<td>3.36</td>
<td>0.67</td>
</tr>
<tr>
<td>Nurses are leaders</td>
<td>3.27</td>
<td>0.79</td>
</tr>
<tr>
<td>Nurses are effective health teachers</td>
<td>3.18</td>
<td>0.75</td>
</tr>
<tr>
<td>Getting a degree in nursing requires many years of study</td>
<td>3.00</td>
<td>0.89</td>
</tr>
<tr>
<td>Nurses are active in health care research</td>
<td>2.55</td>
<td>0.69</td>
</tr>
<tr>
<td>Nursing can be a pathway to study medicine</td>
<td>2.41</td>
<td>1.24</td>
</tr>
<tr>
<td>Studying nursing is difficult</td>
<td>2.35</td>
<td>0.69</td>
</tr>
<tr>
<td>Studying nursing is affordable</td>
<td>2.18</td>
<td>0.60</td>
</tr>
<tr>
<td>Nurses follow directions from other people</td>
<td>2.09</td>
<td>0.83</td>
</tr>
<tr>
<td>Nurses obey all doctors’ orders</td>
<td>2.01</td>
<td>0.67</td>
</tr>
<tr>
<td><strong>Total Mean Score</strong></td>
<td>3.05</td>
<td></td>
</tr>
</tbody>
</table>

17.5.3 Nursing Professionalism

In Table 17.5.3 the respondents’ perceptions of nursing professionalism are described. The respondents highly perceived nurses as helpful and caring. It was also interesting that the respondents viewed nurses as powerful. Although the respondents realized that nursing is autonomous, they still perceived nurses as followers for others, especially physicians. Comments from the interviews included:

“Nursing is a humanitarian career; the nature of people encourages that more than a career that deals with money”. CGC 2

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“Nursing is a humanitarian career that deals with people who are in need”. CGC 7

“You may save a human’s life and help a sick person”. CGC 1

“I tell the student nursing is good for you because of your personality and wanting to care for others”. CGC 4

Table 17.5.3 CGC Perceptions of Nursing Professionalism (N=10)

<table>
<thead>
<tr>
<th>Perception</th>
<th>Mean</th>
<th>SD</th>
</tr>
</thead>
<tbody>
<tr>
<td>Nurses help people</td>
<td>3.91</td>
<td>0.30</td>
</tr>
<tr>
<td>Nurses are powerful people</td>
<td>3.73</td>
<td>0.47</td>
</tr>
<tr>
<td>Nursing is a challenging profession</td>
<td>3.55</td>
<td>0.93</td>
</tr>
<tr>
<td>Nurses use special skills and knowledge</td>
<td>3.45</td>
<td>0.52</td>
</tr>
<tr>
<td>Nurses are important when you are sick</td>
<td>3.45</td>
<td>0.69</td>
</tr>
<tr>
<td>Nursing is a caring profession</td>
<td>3.36</td>
<td>0.67</td>
</tr>
<tr>
<td>Nurses influence national health policy and legislation</td>
<td>3.18</td>
<td>0.75</td>
</tr>
<tr>
<td>Nursing is an autonomous profession</td>
<td>2.73</td>
<td>1.10</td>
</tr>
<tr>
<td>Nurses make decisions about patient care themselves</td>
<td>2.45</td>
<td>0.69</td>
</tr>
<tr>
<td>Nurses lack control of their own practice</td>
<td>2.00</td>
<td>0.89</td>
</tr>
<tr>
<td><strong>Total Mean Score</strong></td>
<td>3.18</td>
<td></td>
</tr>
</tbody>
</table>

17.5.4. Nursing Working Conditions

Table 17.5.4 illustrates the perceptions of the respondents of the working conditions of nurses. The respondents appreciated that nurses work with people rather than things, they require to use a lot of skills, and deal with high technological instruments. There was four areas related to nursing working conditions that were perceived negatively by the respondents. These were related to the lack of flexibility of the working hours of nurses and the fact that nurses needed to work shifts. The respondents also realized that nurses work in dangerous environments and sometimes perform unpleasant tasks Comments from the interviews included:
“Nursing and education are hard careers, especially nursing as it has shifts at work. As you know this is a problem for a woman with children”. CGC1

“They (the students) know how hard nursing is”. CGC1

“Those who work in nursing explain to us the difficulties of work, such as dealing with blood, wounds and a person vomiting”. CGC 2

“He should be used to working with dead patients and when the abdomen of the patient is open”. CGC 2

Table 17.5.4 CGC Perceptions of Nursing Working Conditions (N=10)

<table>
<thead>
<tr>
<th>Perception</th>
<th>Mean</th>
<th>SD</th>
</tr>
</thead>
<tbody>
<tr>
<td>Nurses work with people rather than things</td>
<td>3.36</td>
<td>0.67</td>
</tr>
<tr>
<td>Nursing includes much technical work</td>
<td>3.18</td>
<td>0.60</td>
</tr>
<tr>
<td>Nurses master high technological instruments</td>
<td>3.18</td>
<td>0.60</td>
</tr>
<tr>
<td>Nurses manage large groups of people</td>
<td>3.00</td>
<td>0.77</td>
</tr>
<tr>
<td>Nursing is a very busy job</td>
<td>2.58</td>
<td>0.60</td>
</tr>
<tr>
<td>Nurses are exposed to patients with dangerous diseases.</td>
<td>2.31</td>
<td>1.04</td>
</tr>
<tr>
<td>Nurses can choose days and hours they want to work</td>
<td>2.09</td>
<td>0.83</td>
</tr>
<tr>
<td>Nurses work in a dangerous environment</td>
<td>2.00</td>
<td>0.81</td>
</tr>
<tr>
<td>Sometimes nurses perform unpleasant tasks to care for patients</td>
<td>2.00</td>
<td>0.65</td>
</tr>
<tr>
<td>Nursing is easy work</td>
<td>1.36</td>
<td>0.50</td>
</tr>
<tr>
<td><strong>Total Mean Score</strong></td>
<td>2.50</td>
<td></td>
</tr>
</tbody>
</table>

17.5.5 Career Guidance Related to Nursing

The respondents were also asked to express their opinions about the career advice and counselling available in high schools for nursing. They all agreed that there are no sufficient information about nursing available for the CGC, and that nurses should be more active in providing information related to nursing to high schools (Table 17.5.5). Some of the comments from the interviews included:

“I think nursing needs more concentration from your side as specialists in cooperation with the MOE”. CGC 2
“You (nurses) need awareness programmes to describe your careers, what the nurses do at work and their role in the hospital”. CGC 9

Table 17.5.5 CGC Perceptions of Career Guidance Related to Nursing ($N = 10$)

<table>
<thead>
<tr>
<th></th>
<th>Mean</th>
<th>SD</th>
</tr>
</thead>
<tbody>
<tr>
<td>Health services and schools of nursing should be more active in providing reliable and valid information about nursing</td>
<td>3.64</td>
<td>0.50</td>
</tr>
<tr>
<td>There is sufficient information about nursing available to career guidance teachers</td>
<td>2.24</td>
<td>0.92</td>
</tr>
<tr>
<td><strong>Total Mean Score</strong></td>
<td>2.94</td>
<td></td>
</tr>
</tbody>
</table>

Summary

Ten CGC participated in this study; they were equally distributed between males and females. The findings of this part of the study revealed that career counselling is available in all high schools in Bahrain, yet the systems that the CGC implemented varied between the different types of schools. Although the MOE had a clear role in ensuring the availability of career counselling in high schools, the CGC took the major responsibility for planning and designing the activities in their schools. The MOE also took part in supervising and monitoring the activities provided by the schools.

The career counselling activities were provided for all students in the high school, but more focus was given to grade 12 (the final class). The respondents implemented a variety of activities ranging between analysis of students’ career interests to providing them with lectures and site visits. Unfortunately, all the CGC confirmed that nursing as a career was not considered in their career counselling plans. The majority of the activities gave general instructions about nursing as part of the general career activities provided to the students. Specific advice about nursing was mostly provided through ad hoc activities or to students who
specifically inquire about nursing. Information about nursing is mostly taken from the internet and are provided by the respondents most of the time.

The perceptions of CGC of nursing as a career was also explored and showed that in general the respondents held very positive perceptions about nursing. They rated nursing very highly in the areas of socioeconomic status of nurses, nursing professionalism and nursing education and career potential. They had very realistic perceptions in relation to the working conditions of nurses and negative perceptions about career guidance of nursing in high schools.
Chapter 18: Parents Perceptions and Influence on Career Choices

In this chapter, the data collected from the parents of the HSS is presented. These data will address the third research objective: ‘Describe the extent of influence the students' parents/families have on their career choice’. The data were collected through a focus group interview with six HSS’s parents. A non-probability quota sample was used to select the participants (Chapter 11). Three male and three female parents representing both government and private schools participated in the focus group. According to Krueger & Casey (2009) the preferred number of participants in a single focus group is 5-8.

Following data analysis, the following five main themes emerged:
1. Influences on students’ career choice
2. Parents experiences of nursing
3. Career preferences
4. Views about male nurses
5. Promoting nursing in Bahrain

18.1 Demographic Data of the Parents
The respondents as parents included a total of six parents
- 3 (50%) females
- 3 (50%) males
- Age range between 41-53 years
- Middle socioeconomic status

18.2 Influences on Students’ Career Choice
The results showed that students’ parents, friends, religion and culture do influence the career choice of students. Respondents specifically, have a great deal of influence with regards to their children choosing their future career. Even when the influence of religion and culture became clear, it was reflected in the way parents’ guided and advised their children about their career decisions.
18.2.1 Influence of Parents

The respondents had a general belief about their children’s inability to make appropriate decisions at their age. Despite the fact of some respondents stated that they don’t force their children to take a specific career, the influence they have on their children’s decision about a career was very clear. The respondents believed that, being teenagers, the students could not identify their interests and abilities, but their parents could. Although the respondents agreed that they should not force their children to choose their career, they seemed to direct them towards specific careers or stop them from joining another as they see appropriate. The respondents stated that they usually encourage their children to take a career that wanted them to take, however they made sure that the career suited the interests and abilities of their children. Some of the comments included:

“In Bahrain, parents seem to direct their children to choose a career”. Parent 2

“Parents’ influence on students is very great when selecting a career”. Parent 2

“As a parent, my influence on my children is 80%”. Parent 1

“The influence of the parents is very great on the children”. Parent 1

The respondents justified having a very strong influence on their children’s career choices as follows:

- Their children are teenagers, which means they are not focused and cannot make appropriate decisions
- The parents are wise, and so they can make sound decisions based on their children’s interests and abilities
- The Arab children are very obedient to their parents and so they listen to their advise
Some respondents commented:

“As parents and older than them, we should tell them the positive and negative characteristics of each career, they then make their own choice”. Parent 4

“I instruct my children upon their interests, as I know exactly what they like and what they are good at”. Parent 2

“My children listen to me when I instruct them regarding their studies”. Parent 3

18.2.2 Influence of Friends

According to the respondents, their children’s thinking about career choices was influenced by their friends. The students tended to consider a specific career if their friends chose it. That is either because the students wanted to stay with their friends or they enjoyed what their friends were doing. Despite of this fact, the students’ still needed approval for their decisions from their parents. The respondents stated:

“My daughter insisted on going there (abroad) too (with friend), although she was not fit for studying medicine”. Parent 2

“My daughter’s wish to study physiotherapy was because of one of her friends”. Parent 2

18.2.3 Influence of Religion and Culture

Respondents’ religious and cultural background underpinned parents decisions related to their children’s careers. The respondents agreed that religion and culture played an important role in their decisions about their children’s careers. Culturally, it is not acceptable for girls to work as nurses, especially when they are married and have children. The females are seen to be taking care of their husbands and children, which has priority over education and work. The idea of a female working shifts were not very much accepted by the society, especially working at night because of the anticipated risks of getting exposed to inappropriate situations that they might not be able to handle, whether inside the hospital or outside on the
roads. The society also had some restrictions on females taking care of males and vice versa. It was not acceptable for respondents that their daughters have to work with male patients. At the same time, Bahraini male patients did not feel comfortable about being cared for by a female Bahraini nurse; they preferred expatriate nurses regardless of their gender. The respondents commented:

“The choice of a career also depends on customs and traditions and to what extent the community accepts the girl’s work”. Parent 2

“It’s difficult for a girl to go to her work in the night and come back to reach home especially after marriage, a nurse may face problems with her husband”. Parent 3

“It is important for a girl to think of her future as a wife rather than her future career or study”. Parent 3

“It is difficult to accept that a female nurse deals with men and check private parts of their bodies”. Parent 3

“It’s difficult to accept a girl taking care of men patients because she refuses to touch him or to be touched by him as she is wearing hijab (being covered by a veil)”. Parent 1

“He (the patient) will ask her (Bahraini nurse) to call a foreign nurse because of embarrassment and not accepting a Bahraini nurse to touch him”. Parent 1

An important finding related to the way nursing was perceived by the society. Although the image of nursing has improved compared to the old days, the society still looked at nursing with inferiority. The respondents stated that people in Bahrain still undermine nursing. For many years, almost all families in Bahrain employed a housemaid coming from Asia. The youngsters see the type of work performed by these housemaids and compare it with the work performed by nurses in the hospital, where a lot of them share the same background as their housemaids. For these reasons, the girls specifically refuse the idea about becoming nurses as they see them at the same level of their housemaids.
“We’re in the Gulf relying too much on housemaids and then we are not used to see our daughters serving at their houses”. Parent 3

“They (girls) believe that cleaning and other works done by the nurse are not suitable for them; as such works are used to be done by housemaids”. Parent 3

“The society also looks at Nursing with inferiority”. Parent 1

“Parents’ view to nursing is still too inferior; and as a result; they instil that notion in their daughters’ minds”. Parent 3

18.3 Parents Experiences of Nursing

The perceptions and experiences respondents had about nurses and the nursing profession were found to have influenced the career choices of the students. Although some of these perceptions and experiences were positive, a majority of them were negative.

The respondents perceived nursing as being a humanitarian job that requires tenderness, compassion, and good communication skills. One of the respondents believed that it’s important that nurses are Bahraini so they are able to communicate with patients in Arabic. The respondents perceived nursing as a job with a lot of opportunities for employment for both males and females. Nurses were also viewed to provide a holistic care for patients and take the responsibility for their actions. One of the respondents believed that nursing requires strength and power as well. Some comments included:

“Nursing is humanitarian career”. Parent 6

“It (nursing) has more employment opportunities compared to other fields”. Parent 4

“There is an interest in Bahrain for recruiting both male and female nurses”. Parent 6

“The role of nurses is not confined with changing the patient’s bed, but they are doing all the required work for patients care”. Parent 1
“(Nurses) bear a full responsibility for any mistake when giving treatment based on the orders given by the physician”. Parent 1

The respondents believed that nursing is a hard job. The fact that nurses need to work in shift system is not desirable by the respondents, especially for the girls. They believed nursing requires patience and that is mostly because the nurses are seen to be overloaded and pressurized with the big numbers of patients. Nursing is also perceived by respondents as a dangerous job which exposes their children to injuries, diseases and infections. Moreover, the respondents viewed the income of the nurses to be low. The respondents acknowledged that despite the developments in nursing career in Bahrain, nurses are still seen with inferiority. The respondents stated that the patients look at a Bahraini nurse with inadequacy and consider an expatriate nurse to be more experienced. The respondents stated:

“Nursing career also requires patience”. Parent 2
“Nursing career is hard and it has shifts system”. Parent 5
“Working shifts, and that’s not desirable”. Parent 4
“The career risk in terms of diseases and viruses that may carry infections to children and other individuals in the house”. Parent 4
“He (the patient) might look at a Bahraini nurse with inferiority and consider a foreign nurse to be more experienced”. Parent 1

With regards to nursing education, the respondents realized that nurses receive a BSc degree, but they believed that studying nursing is difficult, especially using the medical language which is not what the students experience during their school years. The respondents also believed that nursing education restrict their children with a career in nursing and does not give them a lot of opportunities to change their career. Responses included:

“The nursing language is a medical language and not similar to the level of English language taught in schools”. Parent 1
“Nursing is confined /restricted to a certain direction, and if you don’t find a job in nursing or wants to change direction, the (nursing) study will not provide you with lots of options”. Parent 6

The respondents explained some of the reasons for why their children don’t choose a career in nursing. For the girls, they believed that nurses deal with blood and they expressed their fear of this experience. The students also undermined nursing and they were looking at joining careers with better salaries. The students did not see that nursing suited them. Other students felt their grades were not high enough for them to join nursing education. The respondents commented:

“I think she (daughter) is afraid of things related to the hospital or seeing blood, I think she may not choose nursing”. Parent 4

“They (girls) keep thinking that nursing as a career does not suit them”. Parent 2

“They (students) think about the salary they will get by taking the nursing career; as they wish to be recruited in careers with high wages”. Parent 1

18.3.1 Experiences with Nurses and Hospitals

The experiences of the respondents with nurses working in different health care services were not very positive. Although one of the respondents experienced nurses to be competent and have good communication skills to deal with Bahraini patients, the others viewed them to lack patience and interest. The respondents believed that the working environments of nurses lacked safety precautions, especially when it comes to sterilization. The respondents said:

“They (Bahraini nurses) may help Arab elderly patients; they know how to deal with them and communicate with them verbally”. Parent 1

“Bahraini nurses are impatient, I feel more comfortable with Indian or Filipino nurses”. Parent 2

“We noticed these things (poor sterilization) and heard from our relative nurses about their experience with nursing”. Parent 5
18.4 Career Preferences

When the respondents were asked to identify the careers they would prefer for their children, nursing did not appear to be one of those preferred careers. The respondents linked their career choices to the availability of scholarships, the needs of the labour market and the working conditions. The respondents preferred that their children work in the government sector because of the shorter working hours. The students preferred jobs that they considered enjoyable and distinguished. Comments included:

“I had not discussed the nursing career with my daughter, but I do not encourage a girl to choose nursing”. Parent 5
“I asked her to wait for scholarships to see the available options”. Res.18.2
“I also see the needs of the labour/job market”. Parent 2
“I prefer a government job for my daughter as the working hours are lower than other jobs plus having two weekend days off”. Parent 4

A lot of the respondents encouraged their children to study medicine and engineering. Teaching seemed to be a job that respondents prefer for their children, especially the girls. They stated that studying English language, chemistry, mathematics and physics can be good study options, so their daughters can work as teachers in schools. Comments included:

“Parents encourage their children to study medicine”. Parent 2
“I prefer nursing or teaching for my daughter”. Parent 1
“Because my daughter likes these two subjects, I encouraged her to study them (mathematics and physics)”. Parent 1
“They may want them to be doctors, engineers, teachers, or anything else, but not nurses”. Parent 5

The respondents suggested that their children appear to be more attracted to medicine, and business studies seemed to be more attractive. They also considered pharmacy and physiotherapy in their choices. Respondents commented:
“Her younger sister wishes to study medicine”. Parent 4
“Lots of students in Bahrain choose Business Studies, because Bahrain is a financial centre”. Parent 6
“(Students) search for new different specializations, which they consider more enjoyable and distinguished”. Parent 2

18.5 Views about Male Nurses

Although the respondents believed in the need for both males and females in the nursing profession, their views about male nurses were conflicting. Some believed that nursing is not a suitable career for males because they lack the compassion and tenderness. On the other hand, males were seen to be more suitable for nursing than girls because they are stronger, both emotionally and physically. The respondents reflected on the low salaries of nurses as a reason for males not to join a nursing career. They believed the income a man could make through nursing is not sufficient for them to bear a family. Respondents stated:

“Yes, it’s difficult to males to become nurses”. Parent 3
“I think that nursing career is more suitable for men because of their strong heart and strong body structure than what girls have”. Parent 5
“I think we need both genders for nursing”. Parent 6
“There are also male patients who need male nurses”. Parent 6
“Because the boys are responsible for supporting their families, it is preferable to them to have a job with a high salary to enable them fulfil their commitments”. Parent 3

18.6 Promoting Nursing in Bahrain

To promote a career of nursing in Bahrain, the respondents believed that improving students and their parents’ awareness about the profession is very important. The respondents also emphasized the importance of improving the community experiences with nurses in the hospitals and other health care settings. From the respondents’ points of view, the awareness need to be improved in relation to job opportunities available in nursing, the standards of nursing
education and the availability of higher education and different specializations, the availability of scholarships and opportunities for both males and females in nursing. Comments included:

“Awareness should be increased among people highlighting the importance of both groups (males and females) to study nursing”. Parent 6

“It is important to promote proper understanding among students and parents as well”. Parent 1

“It’s important that the nursing should lead to further post graduates studies such as specialization in certain fields”. Parent 2

“If the level of the education is high, that will encourage parents to make their children study nursing”. Parent 2

18.6.1 Strategies to Improve Awareness of Nursing
To improve students’ awareness about the nursing career, the respondents suggested that holding lectures, workshops, seminars and open discussions about nursing can be very effective. Both students and parents should be involved in these activities. The respondents also suggested involving newly graduate nurses to reflect on their experiences with nursing. Other strategies to promote nursing included using social networking and media by producing films about nursing. The respondents also suggested that holding career fairs about nursing and having nursing as an elective subject during high school can also improve the awareness about nursing. The respondents commented:

“Deliver lectures in schools attended by students and their parents at the same time”. Parent 1

“Advertisement and media through using short and expressive films of the nursing career”. Parent 2

“Using social networking tools for promoting such films”. Parent 2

“Involve graduates who worked in nursing after graduation in lectures and seminars to talk about their experience to the new students”. Parent 1
The respondents strongly believed that the introduction of awareness strategies should be started during the early stages of students’ life, during kindergarten. This is important in order to impede the negative perceptions about nursing. One respondent stated:

“Education is important we should start from schools; not from high school phase, but from nursery and elementary phase”. Res.18.5

18.6.2 Opportunities to Experiences with Nurses

The respondents strongly believed that having more positive experiences with nurses in the health care settings can make a big difference in the perceptions of people about nursing. The respondents suggested that children would accept a nursing job, if the experience they had with nurses was positive. The respondents also believed that improving the salaries and the working conditions of nurses can have a big influence on the community. The respondents commented:

“The ways nurses’ deal with patients and use in treating their patients are important in making a person likes or dislikes Nursing”. Parent 2

“The government should also support such careers more greatly by giving them greater advantages compared to other careers”. Parent 4

Summary

Six HSS’s parents participated in this study; they were equally distributed between males and females. The findings of this part of the study revealed that parents in Bahrain influence their children’s career choices greatly. Although students’ peers have some influence on their career choice, their final decisions should be approved by their parents. The culture and customs also have an obvious influence on students and their parents’ choice of a career in nursing. A number of factors related to the work nature of nurses seem to be rejected by the society, including working shift and being exposed to the opposite gender. Despite the developments in nursing profession, people in Bahrain still undermine the profession. They compare it to more prestigious professions; such as medicine and to other jobs that have less demands and offer better salaries. A lot of the
perceptions that the parents and students have in relation to nursing are linked to
the perceptions of the society as well as their experiences with nurses in the
hospital.

The respondents agreed that there is a need to improve the awareness about the
nursing profession in Bahrain to develop a more positive perception. They
suggested that both students and parents need to be involved and that efforts to
promote nursing should start at an earlier stage of students’ life. A number of
strategies were found to be effective, including the use of lectures, videos and
social media.
Chapter 19: Perceptions of the Nursing Students: A Longitudinal Study

In this chapter, the data obtained from the longitudinal study of the first cohort of nursing students who joined the nursing programme at RCSI Bahrain are presented; data were collected between 2006 and 2012. Data were obtained from students during the four year education programme, and one year after qualification and working as a staff nurse. A mixed methods research approach involving quantitative and qualitative methods of data collection was considered appropriate, as it is ideally used when studying concepts that have different dimensions. The data collection methods employed included written reflections, self-administered questionnaires and focus groups (Chapter 11).

The results of this element of the study will address the fourth research objective: ‘Outline the perceptions of the first cohort of RCSI Bahrain nursing students of nursing as a career’. The specific areas of investigation included identifying nursing students' perceptions and experiences of nursing as a career choice; identifying sources that students used to obtain information about nursing before joining the nursing programme; the factors motivated them to enrol in the nursing programme, their future intentions with regards to the nursing career, and finally their satisfaction with the nursing career after experiencing working as staff nurses in the hospital.

In this chapter, the findings are presented in four major sections; the sections include analysis of the demographical characteristics of the participants, findings from the quantitative and qualitative data collected during the first three years of the nursing programme, findings from the data collected one year after graduation and summary of the findings collected throughout the longitudinal study.

19.1 Demographic Characteristics of the Respondents

A total of 38 nursing students entered the longitudinal study in 2006. The majority of the respondents as nursing students, were females 87% (n = 33). The age
range of respondents was 18-20 years, and they were all single at the beginning of stage one. The response rate to the questionnaire implemented during the second year of the programme was 100% \((N = 38)\). On completion of the programme, 32 students graduated, but only 30 graduates had staff nurse experience and they were invited to participate in stage two of the study. A total of 28 graduate students participated, with a response rate of 93.3%. The respondents included 93% \((n = 26)\) females and 7% \((n = 2)\) males. At stage two of the study, they ranged in age between 22 and 24 years. 79% \((n = 22)\) were single and 21% \((n = 6)\) were married.

In an attempt to clarify the socio-economic status for candidates who made a decision to join nursing, the respondents were asked to identify the occupation and educational level of their parents. Interestingly, only one student stated that her/his mother was a health care professional, while the majority of parents were not working represented as 61% \((n = 23)\) of the fathers and 71% \((n = 27)\) of the mothers. Another interesting finding was that majority of the parents were educated at a high school level or below with only 32% \((n = 12)\) educated at a university level. In addition, all the respondents graduated from government schools which might also provide an indication of the socioeconomic level of their families (Table 19.1).
### Table 19.1 Respondents' Parents Occupation and Educational Level \( (N = 38) \)

<table>
<thead>
<tr>
<th></th>
<th>( n )</th>
<th>%</th>
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<tbody>
<tr>
<td><strong>Father's Occupation</strong></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Non health care professional</td>
<td>15</td>
<td>39.5</td>
</tr>
<tr>
<td>Not working</td>
<td>23</td>
<td>60.5</td>
</tr>
<tr>
<td><strong>Mother's Occupation</strong></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Health care professional</td>
<td>1</td>
<td>2.6</td>
</tr>
<tr>
<td>Non health care professional</td>
<td>10</td>
<td>26.3</td>
</tr>
<tr>
<td>Not working</td>
<td>27</td>
<td>71.1</td>
</tr>
<tr>
<td><strong>Father's Educational Level</strong></td>
<td></td>
<td></td>
</tr>
<tr>
<td>University graduate</td>
<td>5</td>
<td>13.2</td>
</tr>
<tr>
<td>High school graduate</td>
<td>16</td>
<td>42.1</td>
</tr>
<tr>
<td>Below high school education</td>
<td>16</td>
<td>42.1</td>
</tr>
<tr>
<td>Not educated</td>
<td>1</td>
<td>2.6</td>
</tr>
<tr>
<td><strong>Mother's Educational Level</strong></td>
<td></td>
<td></td>
</tr>
<tr>
<td>University graduate</td>
<td>7</td>
<td>18.4</td>
</tr>
<tr>
<td>High school graduate</td>
<td>12</td>
<td>31.6</td>
</tr>
<tr>
<td>Below high school education</td>
<td>13</td>
<td>34.2</td>
</tr>
<tr>
<td>Not educated</td>
<td>6</td>
<td>15.8</td>
</tr>
</tbody>
</table>

#### 19.2 Perceptions during the First Three Years of the Programme

Data about the respondents' perceptions and experiences of nursing were collected using written reflections in year one, questionnaires in year two and focus groups in year three of their study (Chapter 11). Content analysis of the reflections revealed three main themes:

- Perceptions of nursing
- Information and motivation to study nursing
- Future career intentions

Findings from the questionnaires and focus groups will be presented under these themes. For clarity, qualitative data produced from the reflections will be discussed first, followed by data from the self-administered questionnaires and finally the focus groups for every theme. These findings were published in Tawash et al. (2012).
19.2.1 Perceptions of Nursing

It was identified that majority of the respondents described nursing as a caring profession and a humanitarian job. Good communication was also identified as one of the characteristics of nursing. It is important to note that respondents believed nursing to be a hard and demanding job, but a minority believed that it required patience. Interestingly, one of the key tenets of good nursing management “time management” was raised through the open comments section. One respondent commented:

“It is a challenge for nurses to manage their time”. Student Nurse 17

A minority of the respondents perceived nursing to be highly skilled and requiring nurses to be knowledgeable. An important finding was, only a minority of respondents perceived nursing to be enjoyable work to do. Notably, 84% (N=32) of the respondents indicated that they entered nursing on the basis of nursing as a caring profession and helping other people, with 71% (N=27) describing nursing as a humanitarian job (Table 19.2.1). In the focus groups, respondents confirmed that nursing is a caring and humanitarian profession with no exceptions. Respondents qualified this point by suggesting that nurses have close and personal contact with patients and providing holistic care. Some respondents commented:

“Nurses stay with patients and look after them throughout their shift” “Nurses not only take care of patients, but also their relatives”. Student Nurse 23

The respondents explained what they meant by describing nursing as a hard job refers to the fact that there are new things to learn every day, it requires being exposed to the human bodies and doing dirty things. It was stated that:

“Nursing accepts no mistakes as it involves dealing with human life”. Student Nurse 5

Respondents also suggested that nursing is not very well accepted socially, as it is difficult for females bearing children to work shift duty. It was indicated that nurses
were faced with stress related to overload of work and have many health problems like backache and varicose veins. A respondent suggested:

“My aunt is a nurse and she developed varicose veins because of standing throughout her shift” Student Nurse 27

Table 19.2.1 Respondents’ Perceptions of Nursing in Year 2 of the Programme (N = 38)

<table>
<thead>
<tr>
<th>Characteristics</th>
<th>n</th>
<th>%</th>
</tr>
</thead>
<tbody>
<tr>
<td>Nursing is a caring profession</td>
<td>32</td>
<td>84</td>
</tr>
<tr>
<td>Nursing a humanitarian job</td>
<td>27</td>
<td>71</td>
</tr>
<tr>
<td>Nursing is a hard job</td>
<td>25</td>
<td>67</td>
</tr>
<tr>
<td>Nurses have good communication with people</td>
<td>21</td>
<td>56</td>
</tr>
<tr>
<td>Nursing requires patience</td>
<td>11</td>
<td>30</td>
</tr>
<tr>
<td>Nurses are highly skilled</td>
<td>9</td>
<td>24</td>
</tr>
<tr>
<td>Nurses are knowledgeable</td>
<td>4</td>
<td>10</td>
</tr>
<tr>
<td>Nursing is an enjoyable job</td>
<td>3</td>
<td>8</td>
</tr>
</tbody>
</table>

*Respondents could select more than one characteristic*

19.2.2 Information and Motivation

The respondents listed in their reflections a variety of sources of information they accessed about nursing, these mainly included the internet, friends and relative nurses. As evidenced by the respondents’ responses to the questionnaire, the internet served as an important source of information with 46% (N=18) having obtained information from the internet. Friends 36% (N=14) and relative nurses 24% (N=9) were also influential. A minority of respondents 12% (N=5) acquired information through the media. In using the internet, respondents suggested that chat rooms were helpful. A respondent commented:

“I talked to my friend who is a nursing student and she told me about nursing” Student Nurse 14
Table 19.2.2 illustrates the factors that motivated the respondents to join nursing. In their reflections, respondents also highlighted the motivations to study nursing. A majority of respondents 66% (N=25) stated that their parents served as the greatest motivation to enter nursing. Many respondents were also motivated by their friends 24% (N=9) and relatives who were nurses 15% (N=6).

<table>
<thead>
<tr>
<th>Motivating Factor</th>
<th>n</th>
<th>%</th>
</tr>
</thead>
<tbody>
<tr>
<td>Parents</td>
<td>25</td>
<td>66</td>
</tr>
<tr>
<td>Friends</td>
<td>9</td>
<td>24</td>
</tr>
<tr>
<td>Relatives who were nurses</td>
<td>6</td>
<td>15</td>
</tr>
<tr>
<td>Nurses in hospital</td>
<td>3</td>
<td>8</td>
</tr>
<tr>
<td>Self (Childhood dream)</td>
<td>1</td>
<td>3</td>
</tr>
</tbody>
</table>

*Participants could select the two most appropriate factors*

In the focus groups, respondents indicated that their parents believed that nursing offered a good job opportunity and the salaries were good. Respondents also reported that parents also thought that nurses help people and they learn many things that are helpful for their personal and social life. The influence of family and personal ambition was clear:

“My mother always wanted to be a nurse, but she couldn't and so she wanted me to make her dream become true”  
Student Nurse 8

“I chose to study nursing because it was my dream when I was a little girl”  
Student Nurse 15

The study also showed that 34% (N=13) of respondents decided to join nursing on leaving school. They stated that nursing at that time was the best choice compared to other studies available to them, with 29% (N=11) of respondents making their decision after attending a career day during high school.
19.2.3 Future intentions

Table 19.2.3 outlines the early intentions of respondents in respect to nursing career. Notably, further education featured highly with 55% (n = 21) of respondents expressing a desire to do their masters or doctoral nursing studies after graduation. Other respondents identified a career pathway as nurse supervisors, nurse specialists or continue their career as staff nurses. It is noted that clinical nursing careers do not appear attractive with only 8% (n = 3) selecting staff nurse and 8% (n = 3) selecting to specialize in nursing.

<table>
<thead>
<tr>
<th>Intentions in respect to nursing career</th>
<th>n</th>
<th>%</th>
</tr>
</thead>
<tbody>
<tr>
<td>Continue higher education</td>
<td>21</td>
<td>55</td>
</tr>
<tr>
<td>Become a supervisor</td>
<td>9</td>
<td>24</td>
</tr>
<tr>
<td>Work as a staff nurse</td>
<td>3</td>
<td>8</td>
</tr>
<tr>
<td>Specialize in nursing</td>
<td>3</td>
<td>8</td>
</tr>
<tr>
<td>Become a nurse educator</td>
<td>2</td>
<td>5</td>
</tr>
</tbody>
</table>

19.3 Perceptions of the Respondents One Year after Graduation

The purpose of this part of the longitudinal study was to determine whether the experience of being a staff nurse may influence the graduate nurses’ perceptions of nursing and nurses.

The perceptions of respondents as graduate nurses, in relation to nursing and nurses will be discussed based on four categories, nursing education and career potential, nursing professionalism, socioeconomic status of nursing and working conditions of nursing.

19.3.1 Nursing Education and Career Potential

The respondents’ perceptions of nursing education and career potential were very positive. As Table 19.3.1 illustrates, they viewed nurses as team members with other health care providers (\( M = 3.75, \ SD = 0.65 \)). This finding was further
emphasized by the respondents rejecting the idea of nurses following directions from other health care workers \((M = 2.39, SD = 0.74)\). They also viewed nursing as having opportunities for both males and females \((M = 3.36, SD = 0.62)\). The findings related to nurses being well educated, effective teachers and active in health care research were very interesting compared to earlier perceptions held by these respondents.

**Table 19.3.1 Respondents' Perceptions of Nursing Education & Career Potential \((N = 38)\)**

<table>
<thead>
<tr>
<th>Perception</th>
<th>Mean</th>
<th>SD</th>
</tr>
</thead>
<tbody>
<tr>
<td>Nurses are team members with physicians and others</td>
<td>3.75</td>
<td>0.65</td>
</tr>
<tr>
<td>Nurses are well educated</td>
<td>3.36</td>
<td>0.62</td>
</tr>
<tr>
<td>There are opportunities in nursing for men and women</td>
<td>3.43</td>
<td>0.63</td>
</tr>
<tr>
<td>Nurses are effective health teachers</td>
<td>3.36</td>
<td>0.62</td>
</tr>
<tr>
<td>Nurses are active in health care research</td>
<td>2.86</td>
<td>0.85</td>
</tr>
<tr>
<td>Nurses follow directions from other people</td>
<td>2.39</td>
<td>0.74</td>
</tr>
<tr>
<td><strong>Total Mean Score</strong></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td>3.19</td>
<td></td>
</tr>
</tbody>
</table>

**19.3.2 Nursing Professionalism**

Table 19.3.2 illustrates the perceptions of respondents with regards to nursing professionalism. The findings reflected that respondents have very positive perceptions of nursing professionalism. The caring aspect of nursing was highly positive as reflected in the first two items; nursing is a caring profession and nurses are important when you are sick. Respondents disapproved that nurses lack control of their practice \((M = 1.96, SD = 0.79)\).
Table 19.3.2 Respondents’ Perceptions of Nursing Professionalism (N = 28)

<table>
<thead>
<tr>
<th></th>
<th>Mean</th>
<th>SD</th>
</tr>
</thead>
<tbody>
<tr>
<td>Nursing is a caring profession</td>
<td>3.71</td>
<td>0.53</td>
</tr>
<tr>
<td>Nurses are important when you are sick</td>
<td>3.36</td>
<td>0.73</td>
</tr>
<tr>
<td>Nurses are powerful people</td>
<td>3.07</td>
<td>0.90</td>
</tr>
<tr>
<td>Nursing is an autonomous profession</td>
<td>2.68</td>
<td>0.82</td>
</tr>
<tr>
<td>Nurses lack control of their own practice</td>
<td>1.96</td>
<td>0.79</td>
</tr>
<tr>
<td><strong>Total Mean Score</strong></td>
<td>2.95</td>
<td></td>
</tr>
</tbody>
</table>

19.3.3 Socioeconomic Status of Nursing

According to the findings in Table 19.3.3, the respondents had positive perceptions of the socioeconomic factors related to nursing, except for the pay (M = 2.39, SD = 1.03). The respondents viewed the role of nurses in keeping the well health of people as highly positive (M = 3.50, SD = 0.58). It was also interesting to find that although the respondents perceived nursing to offer job security (M = 2.57, SD = 0.84), they did not agree that the nurses were highly paid.

Table 19.3.3 Respondents’ Perceptions of the Socioeconomic Status of Nursing (N = 28)

<table>
<thead>
<tr>
<th></th>
<th>Mean</th>
<th>SD</th>
</tr>
</thead>
<tbody>
<tr>
<td>Nurses are important to keep people well</td>
<td>3.50</td>
<td>0.58</td>
</tr>
<tr>
<td>Nursing is a high prestige occupation</td>
<td>2.61</td>
<td>0.79</td>
</tr>
<tr>
<td>Nursing offers job security</td>
<td>2.57</td>
<td>0.84</td>
</tr>
<tr>
<td>Nursing offers high pay</td>
<td>2.39</td>
<td>1.03</td>
</tr>
<tr>
<td><strong>Total Mean Score</strong></td>
<td>2.76</td>
<td></td>
</tr>
</tbody>
</table>

19.3.4 Working Conditions of Nursing

The respondents generally perceived the working conditions of nursing negatively. As Table 19.3.4 illustrates, respondents perceived nurses to be exposed to dangerous diseases (M = 1.14, SD = 0.45) and the working environment to be dangerous (M = 1.75, SD = 0.70). The respondents also negatively perceived the
fact that nurses perform unpleasant tasks when caring for patients \( (M = 1.75, \ SD = 0.65) \).

### Table 19.3.4 Respondents’ Perceptions of the Working Conditions of Nursing \( (N = 28) \)

<table>
<thead>
<tr>
<th></th>
<th>Mean</th>
<th>SD</th>
</tr>
</thead>
<tbody>
<tr>
<td>18. Nursing includes much technical work</td>
<td>3.00</td>
<td>0.54</td>
</tr>
<tr>
<td>14. Nurses work in dangerous environment</td>
<td>1.75</td>
<td>0.70</td>
</tr>
<tr>
<td>15. Sometimes nurses have to perform unpleasant tasks to care for their patients</td>
<td>1.75</td>
<td>0.65</td>
</tr>
<tr>
<td>19. Nurses are exposed to dangerous diseases</td>
<td>1.14</td>
<td>0.45</td>
</tr>
<tr>
<td><strong>Total Mean Score</strong></td>
<td><strong>1.91</strong></td>
<td></td>
</tr>
</tbody>
</table>

### 19.3.5 Career Plans and Intentions

The respondents were asked about their future plans related to the nursing career. The findings illustrated that 75\% \( (n = 21) \) of the respondents expressed their interest to continue with their education, with the majority 50\% \( (n = 14) \) planning to enrol in full time education programmes. Only 25\% \( (n = 7) \) of the respondents were interested in continuing their work as staff nurses (Table 19.3.5).

### Table 19.3.5 Respondents’ Career Plans and Intentions \( (N = 28) \)

<table>
<thead>
<tr>
<th>What do you plan to do in few years?</th>
<th>n</th>
<th>%</th>
</tr>
</thead>
<tbody>
<tr>
<td>Enrol in additional education in nursing full time</td>
<td>14</td>
<td>50.0</td>
</tr>
<tr>
<td>Work in nursing</td>
<td>7</td>
<td>25.0</td>
</tr>
<tr>
<td>Work part time in nursing while continuing nursing education</td>
<td>7</td>
<td>25.0</td>
</tr>
<tr>
<td>Enrol to study another non-nursing field</td>
<td>0</td>
<td>00.0</td>
</tr>
</tbody>
</table>

### 19.3.6 Respondents Satisfaction with the Nursing Career

Regardless of their negative perceptions of the work conditions of nursing, 61\% \( (n = 17) \) of the respondents stated they are satisfied with their work as nurses and 21\% \( (n = 6) \) were enthusiastic about their work in nursing. It is noteworthy that 18\%
(n = 5) of the respondents expressed their unhappiness and were planning to change their career.

19.4 Longitudinally Tracking and Comparing Change
Longitudinally, the perceptions and experiences of the respondents during year one, and one year after qualification as a staff nurse provides interesting insights. This element of the study was published in Tawash & Cowman (2015). The findings revealed that, as the respondents progressed through their nursing programme, they showed significantly more positive perceptions towards nursing. Also as the respondents mature, their views and perceptions of nursing as a profession maintained a level of consistency.

Nursing as a caring profession and the role of nurses in helping people was clearly identified during the student and staff nurse transition. It was clear that caring tenets identified during the student stage continued to be a dominant theme; the respondents maintained very positive perceptions about the role of nurses in caring for people and being important in keeping people well. It was interesting to find that as the respondents matured in their programme, they valued the holistic approach that nurses use in their care of patients, which also includes the care of their relatives. One year after graduation, the respondents perceived nurses to be powerful which was in contrast to respondents viewing nursing as having a lack of autonomy and control over their practice. It was also interesting that respondents started viewing the nursing profession as a high prestigious occupation.

It was interesting that at the beginning of the programme, and before the respondents have exposure to the clinical experience, they perceived nursing as “not enjoyable”. As they moved to their third year of the programme, and after having enough experience in the clinical placements they started to realize nursing was challenging and not well accepted socially. The one year experience of working as a staff nurse was vital in reshaping the respondents’ perceptions. In terms of the socioeconomic status of nursing, respondents rating pay as the lowest
ranked factor is somewhat juxtaposed to nurses being important in keeping people well. The recognition of nursing as a high prestigious profession was an obvious change compared to the earlier perceptions of respondents.

Nursing was perceived by the respondents as a tough job throughout the longitudinal study. As respondents moved to their third year, there was a clear effect of the clinical experience they had. They were more explicit in describing what makes the nursing practice tough and reported issues; such as dealing with dirty things, exposure to human bodies, the work load of nurses, as well as the health problems that nurses may suffer from as a result of the type of work they are involved with. This perception was identified further at the staff nurse stage, when the respondents indicated that nurses, work in dangerous environments and that they perform unpleasant tasks.

At the beginning of the programme, the respondents did not perceive nurses to be highly skilled, nor knowledgeable. During their third year, they were able to recognize the amount of learning and knowledge the nurses require to gain every day. The actualization of nurses to be well educated was identified clearly one year after graduation. During stage two, the respondents witnessed the important roles of nurses in research and patient teaching. Unfortunately, respondents perceived nurses to follow directions from other members of the health team. It was interesting to find that the respondents could view nursing as an opportunity for both males and females at this stage of the study.

Although the desire to continue higher education strongly persisted in respondents’ career intention throughout the study, comparing the earlier findings with the findings of the second stage of the study, there was an improvement in the number of respondents planning to continue working as staff nurses.
19.5 Selection of a Nursing School

In order to get a sense of what kind of information could be employed when marketing the nursing programmes, and to help answer the 6th research objective: ‘Recommend strategies to enhance recruitment to nursing as a career choice in Bahrain’, it was interesting to get an understanding of the factors that were considered important by the respondents in their choice of the university they joined to study nursing.

From the 18 items which the respondents were asked to select from (Appendix 9), only six were found to be important. The factors ordered according to importance were: the reputation of the university, status of the university, advice of parents, not having many choices of colleges, availability of quality health care facilities for clinical practice and the university being a private institution. It was interesting to find that “advice of high school teachers” was the least important factor in the selection of a university.

Summary

This part of the study aimed at identifying factors that would attract prospective nursing students to join the career, and how the education programme and clinical experience may affect students’ perceptions. In general, the respondents have continued to express positive perceptions about nursing from their graduate programme years through to the staff nurse years. The findings showed that respondents who chose to join nursing usually came from a low to middle socioeconomic status. The respondents used different resources to learn about nursing, including the internet, friend and relative nurses. The respondents identified parents, friend and relative nurses as individuals who motivated them to choose nursing.

Through the findings, it became clear that as the respondents mature, their views and perceptions of nursing as a profession maintained a level of consistency. Nursing as a caring profession and the role of nurses in helping people was clearly
articulated during the student and staff nurse transition. Observations made about
the public image of nursing in Bahrain suggest that nursing is perceived as a low
paying, low status job involving excessive hard and unpleasant work. The public
perceptions of Bahraini people about nursing may be grounded in strong cultural
influences. With regards to future career intention, the respondents showed high
interest in postgraduate education, as opposed to working as bed side nurses,
which requires attention by policy makers. Although the working conditions were
not very well perceived, the respondents showed an acceptable level of
satisfaction with their career.
Chapter 20: Evaluation of the Nursing Recruitment Intervention Implemented in High Schools

The fifth objective of this research study was to: ‘set out, implement and evaluate a nursing career promotion strategy in Bahrain’. A nursing recruitment intervention was planned and implemented in three high schools in Bahrain (two girls’ government schools and one boy’s government school). The intervention consisted of five elements; a ‘Nursing Career in Bahrain’ promotion video, a ‘Nursing Ambassadors’ interactive seminar; which consisted of two elements: Lecturer presentation and interaction with nursing students, hands-on nursing Skills, and information booklet ‘Find Yourself in Nursing’ (Chapter 15).

Following implementation of the intervention data were collected from the HSS who participated in the nursing recruitment intervention, and their CGC, in order to evaluate the effectiveness of the intervention. A self-administered questionnaire (Appendix 10) was used to collect data from the HSS respondents. A retrospective pretest was used to evaluate the knowledge and awareness of respondents before and after the intervention (Chapter 11). A Cronbach’s Alpha 0.82 was reported for the internal consistency of the scale.

This chapter will focus on analysing the data collected to evaluate the effectiveness of the recruitment intervention. The findings are presented in five major sections; the sections include analysis of the demographical characteristics of the HSS, students’ evaluation of their Knowledge and awareness of nursing, students' evaluation of the recruitment activities, evaluation of students' desire to join a career in nursing and finally, CGC’s evaluation of the intervention.

20.1 Demographic Characteristics of the Respondents
A total of 90 final year HSS (science section) participated in the intervention, and 72 completed the evaluation with a response rate of 80%. Table 20.1 illustrates the demographical data related to the respondents as HSS. A total of 50 (69.4%)
females and 22 (30.6%) males participated in the study. All the respondents were single and they ranged in age from 16 to 18 years. The majority of respondents were high performers with a CGPA of 90% or above (n = 31, 43.1%). The CGPA provided by the respondents was the accumulation of five semesters only, as the respondents still had to complete a sixth semester before they can receive their final CGPA at graduation from high school. It was expected to have high numbers of high performers within the respondents because students who join the science section in high schools are usually hard working as they aim to study medicine, engineering and other careers that require them to have high CGPAs to be accepted.
### Table 20.1 Demographical Data of the HSS Respondents (N = 72)

<table>
<thead>
<tr>
<th>Demographic Data</th>
<th>n</th>
<th>%</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Age</strong></td>
<td></td>
<td></td>
</tr>
<tr>
<td>16</td>
<td>7</td>
<td>9.7</td>
</tr>
<tr>
<td>17</td>
<td>41</td>
<td>56.9</td>
</tr>
<tr>
<td>18</td>
<td>24</td>
<td>33.4</td>
</tr>
<tr>
<td><strong>Gender</strong></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Male</td>
<td>22</td>
<td>30.6</td>
</tr>
<tr>
<td>Female</td>
<td>50</td>
<td>69.4</td>
</tr>
<tr>
<td><strong>Marital Status</strong></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Single</td>
<td>72</td>
<td>100</td>
</tr>
<tr>
<td><strong>Father's Occupation</strong></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Other health care provider</td>
<td>3</td>
<td>4.2</td>
</tr>
<tr>
<td>Non health provider</td>
<td>55</td>
<td>76.4</td>
</tr>
<tr>
<td>Unemployed</td>
<td>14</td>
<td>19.4</td>
</tr>
<tr>
<td><strong>Mother's Occupation</strong></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Nurse</td>
<td>2</td>
<td>2.8</td>
</tr>
<tr>
<td>Non health care provider</td>
<td>22</td>
<td>30.6</td>
</tr>
<tr>
<td>Unemployed</td>
<td>48</td>
<td>66.6</td>
</tr>
<tr>
<td><strong>Father's Educational Level</strong></td>
<td></td>
<td></td>
</tr>
<tr>
<td>University graduate</td>
<td>37</td>
<td>51.4</td>
</tr>
<tr>
<td><strong>Educational Level</strong></td>
<td></td>
<td></td>
</tr>
<tr>
<td>High school graduate</td>
<td>30</td>
<td>41.7</td>
</tr>
<tr>
<td>Below high school</td>
<td>5</td>
<td>6.9</td>
</tr>
<tr>
<td><strong>Mother's Educational Level</strong></td>
<td></td>
<td></td>
</tr>
<tr>
<td>University graduate</td>
<td>28</td>
<td>38.9</td>
</tr>
<tr>
<td><strong>School Type</strong></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Governmental Boys</td>
<td>22</td>
<td>30.6</td>
</tr>
<tr>
<td>Governmental Girls</td>
<td>50</td>
<td>69.4</td>
</tr>
<tr>
<td><strong>CGPA</strong></td>
<td></td>
<td></td>
</tr>
<tr>
<td>70-79%</td>
<td>13</td>
<td>18.0</td>
</tr>
<tr>
<td>80-89%</td>
<td>28</td>
<td>38.9</td>
</tr>
<tr>
<td>90% and above</td>
<td>31</td>
<td>43.1</td>
</tr>
</tbody>
</table>

#### 20.2 Students Evaluation of their Knowledge and Awareness of Nursing

The respondents were asked to evaluate their knowledge and awareness of nursing before and after participating in the intervention using a retrospective
pretest approach with a designed scale (Chapter 11). The responses of the scale ranged from 1 (Low knowledge/Low awareness), through 2, 3, 4, 5, 6 (increasing knowledge/awareness) to 7 (High knowledge /High awareness). The respondents were instructed to read each of the 20 statements and first rank their knowledge/awareness as a result of participating in the intervention and next to think back and rank their knowledge/awareness before participating in the session (Before the Session) (Appendix 10).

In Table 20.2, respondents’ evaluation of their knowledge and awareness of the nursing profession before and after participating in the intervention is described. In general, the results showed that respondents’ knowledge and awareness of the nursing profession has improved dramatically after participating in the intervention. A paired t-test showed a significant difference of \( p < 0.001 \) for all the items. Comparing the overall results for all the items, the mean increased from 3.26 \( (SD = 1.1) \) before the intervention to a mean of 6.20 \( (SD = 0.5) \) after the intervention with a mean difference of 2.94 \( (SD = 0.9) \), (95% CI: 2.73 to 3.16, \( p < 0.001 \)).
### Table 20.2 Students’ Evaluation of their Knowledge and Awareness of Nursing before & after Participating in the Intervention (*N* = 72)

<table>
<thead>
<tr>
<th>Question</th>
<th>Mean (SD)</th>
<th>Difference (SD)</th>
<th>95% Confidence Interval of Difference</th>
<th>Paired t-test p-Value</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>Before</td>
<td>After</td>
<td>Lower</td>
<td>Upper</td>
</tr>
<tr>
<td>1</td>
<td>3.38 (1.7)</td>
<td>6.31 (0.9)</td>
<td>2.93 (1.6)</td>
<td>2.55</td>
</tr>
<tr>
<td>2</td>
<td>4.17 (1.9)</td>
<td>6.33 (1.0)</td>
<td>2.17 (1.6)</td>
<td>1.78</td>
</tr>
<tr>
<td>3</td>
<td>3.85 (1.7)</td>
<td>6.36 (0.8)</td>
<td>2.51 (1.5)</td>
<td>2.16</td>
</tr>
<tr>
<td>4</td>
<td>3.36 (1.7)</td>
<td>6.15 (1.1)</td>
<td>2.79 (1.6)</td>
<td>2.42</td>
</tr>
<tr>
<td>5</td>
<td>3.28 (1.5)</td>
<td>6.22 (0.9)</td>
<td>2.94 (1.4)</td>
<td>2.62</td>
</tr>
<tr>
<td>6</td>
<td>2.93 (1.7)</td>
<td>5.69 (1.3)</td>
<td>2.76 (1.5)</td>
<td>2.42</td>
</tr>
<tr>
<td>7</td>
<td>2.54 (1.6)</td>
<td>5.50 (1.2)</td>
<td>2.96 (1.5)</td>
<td>2.62</td>
</tr>
<tr>
<td>8</td>
<td>4.07 (1.9)</td>
<td>6.56 (0.8)</td>
<td>2.49 (1.6)</td>
<td>2.10</td>
</tr>
<tr>
<td>9</td>
<td>3.68 (1.9)</td>
<td>6.07 (1.0)</td>
<td>2.39 (1.5)</td>
<td>2.03</td>
</tr>
<tr>
<td>10</td>
<td>3.10 (1.7)</td>
<td>6.28 (0.9)</td>
<td>3.18 (1.5)</td>
<td>2.82</td>
</tr>
<tr>
<td>11</td>
<td>2.96 (1.7)</td>
<td>6.14 (0.9)</td>
<td>3.18 (1.7)</td>
<td>2.78</td>
</tr>
<tr>
<td>12</td>
<td>4.00 (2.0)</td>
<td>6.49 (0.9)</td>
<td>2.49 (1.8)</td>
<td>2.07</td>
</tr>
<tr>
<td>13</td>
<td>3.89 (1.9)</td>
<td>6.53 (0.7)</td>
<td>2.64 (1.5)</td>
<td>2.23</td>
</tr>
<tr>
<td>14</td>
<td>3.31 (1.7)</td>
<td>6.01 (0.9)</td>
<td>2.71 (1.6)</td>
<td>2.36</td>
</tr>
<tr>
<td>15</td>
<td>3.19 (1.7)</td>
<td>6.18 (0.9)</td>
<td>2.99 (1.6)</td>
<td>2.60</td>
</tr>
<tr>
<td>16</td>
<td>2.71 (1.8)</td>
<td>6.24 (1.0)</td>
<td>3.53 (1.7)</td>
<td>3.12</td>
</tr>
<tr>
<td>Question</td>
<td>Mean (SD)</td>
<td>Difference (SD)</td>
<td>95% Confidence Interval of Difference</td>
<td>Paired t-test p-Value</td>
</tr>
<tr>
<td>----------</td>
<td>-----------</td>
<td>-----------------</td>
<td>--------------------------------------</td>
<td>----------------------</td>
</tr>
<tr>
<td></td>
<td>Before</td>
<td>After</td>
<td>Lower</td>
<td>Upper</td>
</tr>
<tr>
<td>17</td>
<td>3.07 (1.7)</td>
<td>6.50 (0.9)</td>
<td>3.06</td>
<td>3.80</td>
</tr>
<tr>
<td>18</td>
<td>2.43 (1.4)</td>
<td>6.35 (0.8)</td>
<td>3.58</td>
<td>4.26</td>
</tr>
<tr>
<td>19</td>
<td>2.58 (1.9)</td>
<td>6.28 (1.0)</td>
<td>3.24</td>
<td>4.15</td>
</tr>
<tr>
<td>20</td>
<td>2.67 (1.7)</td>
<td>5.83 (1.1)</td>
<td>2.81</td>
<td>3.52</td>
</tr>
<tr>
<td>Total</td>
<td>3.26 (1.1)</td>
<td>6.20 (0.5)</td>
<td>2.73</td>
<td>3.16</td>
</tr>
</tbody>
</table>

*p ≤ 0.05

20.3 Students’ Evaluation of the Intervention Activities
As part of evaluating the intervention, it was important to examine the effectiveness of the different activities used in the intervention. Five elements will be evaluated; the video, Lecturer presentation, interaction with nursing students (Nursing Ambassadors), nursing skills demonstration and the information booklet. The elements will be evaluated to identify the ones that were more influential in the way respondents’ perceived the improvement in their knowledge and awareness of nursing, the change they experienced in their desire to join a career in nursing, as well as how enjoyable it was to experience the different strategies.

In Table 20.3, the five elements are organized in order from most effective to least effective as perceived by respondents. Interacting with nursing students, demonstration of nursing skills and the “Nursing Career in Bahrain” video seemed to be very effective as perceived by the respondents. The respondents found interacting with the nursing students to be very effective in improving their knowledge and awareness of nursing (n = 23, 31.9%) followed by both demonstration of nursing skills (n = 15, 20.8%) and the “Nursing Career in Bahrain”
video \( (n = 15, 20.8\%) \) which received equal scores. The respondents also perceived interacting with the nursing students to be most effective in encouraging them to join the nursing profession \( (n = 24, 33.3\%) \), followed by demonstration of nursing skills \( (n = 19, 26.4\%) \) and the video \( (n = 18, 25.0\%) \).

The strategy that the respondents found very enjoyable was demonstration of nursing skills \( (n = 27, 37.5\%) \) followed by interaction with nursing students \( (n = 21, 29.1\%) \) and video \( (n = 19, 26.4\%) \). A good percentage of the respondents found the nursing lecturer presentation to be effective in improving their knowledge and awareness \( (n = 16, 22.2\%) \), with 10 (13.9\%) stating that the lecturer presentation encouraged them to consider joining nursing. It was interesting to find that the respondents evaluated the “Find Yourself in Nursing” Booklet to be least effective in improving their knowledge and awareness \( (n = 3, 4.3\%) \), in changing their desire in joining nursing \( (n = 1, 1.4\%) \) and they found it less enjoyable \( (n = 2, 2.8\%) \).

Chi-square test was used to find out gender difference with regards to respondents’ evaluation of the recruitment strategies. The results showed that both males and females behaved similarly with regards to the effectiveness of the different recruitment strategies.
Table 20.3 Students' Evaluation of the Five Elements of the Recruitment Intervention ($N = 72$)

<table>
<thead>
<tr>
<th>Elements</th>
<th>Effective in improving my knowledge &amp; awareness</th>
<th>Effective in encouraging me consider joining nursing</th>
<th>Strategy I enjoyed most</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>n</td>
<td>%</td>
<td>n</td>
</tr>
<tr>
<td>Interacting with nursing students</td>
<td>23</td>
<td>31.9</td>
<td>24</td>
</tr>
<tr>
<td>Demonstration of nursing skills</td>
<td>15</td>
<td>20.8</td>
<td>19</td>
</tr>
<tr>
<td>“Nursing Career in Bahrain” video</td>
<td>15</td>
<td>20.8</td>
<td>18</td>
</tr>
<tr>
<td>Nursing lecturer presentation</td>
<td>16</td>
<td>22.2</td>
<td>10</td>
</tr>
<tr>
<td>“Find Yourself in Nursing” booklet</td>
<td>3</td>
<td>4.3</td>
<td>1</td>
</tr>
<tr>
<td>Total</td>
<td>72</td>
<td>100</td>
<td>72</td>
</tr>
</tbody>
</table>

20.4 Evaluation of Students’ Desire to Join a Career in Nursing

To further evaluate the effectiveness of the recruitment intervention in changing the students’ intention with regards to joining the nursing profession, the respondents were asked to identify their desire to join nursing before participating in the intervention, and then after participating in the intervention.

Table 20.4a compares respondents’ intention to choose a career in nursing before and after the recruitment intervention. The results showed that the number of respondents who had a desire to choose a nursing career increased from nine
respondents \((n = 9, 12.5\%)\) before the intervention, to 25 respondents \((34.7\%)\) after the intervention. There was a significant increase in the number of respondents planning to join nursing after the intervention \((p < 0.001)\).

### Table 20.4a Students’ Desire to Join a Career in Nursing before & after the Recruitment Intervention \((N = 72)\)

<table>
<thead>
<tr>
<th></th>
<th>Before the Workshop</th>
<th>After the Workshop</th>
<th>McNemar p-Value</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>n</td>
<td>%</td>
<td>n</td>
</tr>
<tr>
<td>Yes</td>
<td>9</td>
<td>12.5</td>
<td>25</td>
</tr>
<tr>
<td>No or not sure</td>
<td>63</td>
<td>87.5</td>
<td>47</td>
</tr>
<tr>
<td>Total</td>
<td>72</td>
<td>100</td>
<td>72</td>
</tr>
</tbody>
</table>

*p ≤ 0.05

It was also interesting to examine what careers other than nursing the respondents would consider. It was found that 35 respondents \((48.6\%)\) did not give answers to the question, while 13 respondents \((18.1\%)\) only stated a health related career as an option (Table 20.4b).

### Table 20.4b Careers Other than Nursing the Students Would Consider \((N = 72)\)

<table>
<thead>
<tr>
<th></th>
<th>n</th>
<th>%</th>
</tr>
</thead>
<tbody>
<tr>
<td>Health related careers</td>
<td>13</td>
<td>18.1</td>
</tr>
<tr>
<td>Non-health related careers</td>
<td>24</td>
<td>33.3</td>
</tr>
<tr>
<td>None mentioned</td>
<td>35</td>
<td>48.6</td>
</tr>
<tr>
<td>Total</td>
<td>72</td>
<td>100</td>
</tr>
</tbody>
</table>

Because of the relatively small numbers of respondents, the researcher did not have enough samples to test whether the improved desire of students to join
nursing was directly related to the improvement in their knowledge and awareness after participating in the recruitment intervention, or was related to other factors.

20.5 Career Guidance Counselors Evaluation of the Recruitment Intervention

To further evaluate the effectiveness of the recruitment intervention, the three CGC (two females and one male) in the high schools participating in the study were asked to write a report on the intervention, and submit it two weeks after its implementation in their schools. For consistency, the CGC were given guidelines on how to structure the report (Appendix 11). The reports were analysed by extracting the significant statements from the reports, and then formulating meaning from those statements.

20.5.1 General Evaluation of the Intervention

The three respondents as CGC, agreed that the intervention was very useful and effective in improving the HSS’s knowledge and awareness of nursing and helped them discover important facts about nursing that they did not know before. Two respondents stated that the intervention encouraged the HSS to consider nursing as a future career. One of the respondents claimed that the intervention was implemented in a very organized way, and another said that the information presented in the intervention was suitable for the level of HSS and could answer a lot of their queries about nursing.

The respondents were asked to identify the strengths and weakness of the intervention. None of them identified any weakness. The strengths included the experience HSS gained by trying to perform some nursing skills, the involvement of nursing students (Nursing Ambassadors) helped transfer their experience with nursing education and practice to the HSS, clarifying the demands and requirements of the nursing career as well as having the nursing students reflect on the different activities they do in the university.
The respondents were also asked to evaluate the different elements implemented in the intervention, based on their effectiveness in improving the knowledge and awareness of HSS about nursing (Appendix 10). Although the three respondents evaluated the elements differently, there was a general agreement that interaction with students and the video were the most effective strategies.

20.5.2 High School Students’ Response to the Intervention
The respondents agreed that the HSS responded very well to the intervention. That was evident by their active engagement during the implementation of the intervention, and their reflections on the experience they had after participating in the intervention. The respondents also stated that during the two weeks after the intervention, a number of HSS ranging between 3 and 12 went to them with more inquiries about nursing. HSS’s questions focused on the process of registration to nursing, the possibility of getting a sponsorship to study nursing, job opportunities and seeking advice on whether nursing would be a good choice for them.

20.5.3 Strategies to Promote Nursing
The respondents were asked to identify other strategies that can be used in future to promote nursing in Bahrain. They recommended that the intervention is implemented in all schools in Bahrain starting from the middle schools, when the students start planning for their future careers. They also recommended that the MOH and MOE work together to identify best strategies to encourage HSS choose a career in nursing, and that should include more financial support, guaranteeing jobs and revisiting the nursing cadre. They also suggested intensive use of the media to highlight positive aspects of the nursing profession and increase the awareness of the community about the importance of nursing for their health and wellbeing.

Summary
In general, the nursing recruitment intervention was perceived very well by both the HSS and their CGC. With regards to the different elements used in the
intervention, interaction with the nursing students, demonstration of nursing skills and the nursing career video were rated highly by the students for being effective in improving their knowledge and awareness of nursing, encouraging them to consider nursing as a career and to be enjoyable. The HSS desire for considering a nursing career also showed improvement after the intervention.
SECTION 5
DISCUSSION AND CONCLUSIONS
Chapter 21: Discussion

Nursing shortages have been a persistent problem worldwide, for both high income and low income countries without exception. The World Health Organization (2014) estimated a global deficit of 12.9 million health workers by 2035. Tawash & Cowman (2015) reported that, by the year 2050 the GCC countries will be in need of 230,000 nurses to meet health service demands. At present, in Bahrain there are 4 nurses per 1,000 population compared to the Organization for Economic Cooperation and Development (OECD) average of 8.7 (Ithmar Capital, 2009). As nurses encompass the largest professional component of the health care workforce, Buchan et al. (2015) proposed that the shortage problem will even get worse without firm remedial policy interventions.

While the main reasons reported for the nursing shortages in the high income countries are referred to demographic changes, mostly in relation to an aging population and an aging nursing workforce (Buchan et al., 2015), the most obvious reason identified for the nursing shortage in Bahrain and other GCC countries is related to the low numbers of high school leavers joining nursing education. Mignor et al. (2002) reported that despite the demand for nurses, nationwide, schools of nursing are encountering difficulties in recruiting students and increasing student enrolment. Recruitment of high school students, especially those with good academic qualifications, into nursing programmes is a challenge and will require new strategies engaging key stakeholders. These stakeholders include the high school students themselves, their parents, friends, career guidance counselors in schools, nursing students, and the nursing profession itself. Enhancing nursing recruitment will also require a review of the impact of culture, and the influence of government policies on availability of sponsorships, job vacancies, salaries and clear processes for programme and university admissions and accreditation. With the increasing nursing shortage, it is vital that nursing schools attract and retain students who will be successful in becoming competent, caring practitioners. According to Bolan & Grainger (2005), in a rapidly changing health care system,
these future nurses are expected to be independent thinkers, problem solvers, assertive advocates, change agents, clinical decision makers, and leaders. Most importantly, they must be culturally sensitive. For these requirements, it is essential that nursing find ways to make itself more attractive to indigenous students, especially those who are high performers.

Comprehending the cultural constraints in the Middle Eastern countries and recruiting sufficient numbers of local people into nursing presents challenges not experienced by Western countries. To overcome nursing shortages, the GCC countries depend on large numbers of expatriate nurses from countries like India, Philippines and other low income countries. According to Cowman (2014) the expatriate nursing workforce may be as high as 80% in some countries of the Middle East and are a transient workforce. These expatriate nurses come from diverse socio-cultural backgrounds, have varied training and clinical experiences, which suggests different levels of skills (Aldossary, 2013). The expatriate nurses find attractive employment opportunities in the GCC countries, reflected by better salaries and other benefits, compared to their home countries. For example, a case report indicated that, in 2006 more than 13,500 nurses left the Philippines to work overseas, and the top destinations included Bahrain, Saudi Arabia, United Arab Emirates, Kuwait and Qatar (Gulf Weekly, 2008). However, it is important to highlight that the dependence on expatriate nurses is not ideal for many reasons. First, the expatriate nurses are seen as a transient workforce; they use the GCC countries as a gateway to facilitate immigration to Western countries; such as Europe, the United States, Canada and Australia (Gulf News, 2007), where salaries are even better and the living conditions are more suitable to their backgrounds. It is important then to warn that the high dependence on expatriates to meet the demands for nursing manpower in the GCC and Middle East presents a challenge in establishing and sustaining health policy and ensuring indigenous nursing developments (Cowman, 2014).
It is also argued that expatriate nurses may fail to provide nursing care that is sensitive to the predominantly Muslim citizens of the GCC, including a lack in awareness of the unique Arab culture. Lovering (2012a) presented the case for the provision of nursing care that is based on the Muslim worldview, and suggested the establishment of a unique nursing model for Arab Muslim care, which was based on cultural beliefs and values. This further supports the case for the indigenous growth of nursing with an increasing Arab nursing workforce (Tawash & Cowman, 2015). Communication is a central force in nursing practice given that the type and level of communication is an essential component of the provision of quality nursing care (Mebrouk, 2008). The ability of the expatriate nurses to communicate to patients and families with Arabic as their native language is also a major concern (Chapter 3). Maben et al. (2010) emphasized that the indigenous growth of nursing with an increasing Arab nursing workforce is essential to enhance communications with Arabic patients.

Clearly there is an emerging policy of commitment to the recruitment of student nurses locally, with a long-term objective to lessen the dependence on expatriate nurses (Tawash et al., 2012), not only in Bahrain but in other GCC countries as well (Gulf News, 2004). However, in trying to attract local candidates to study nursing, the public image of nursing in Bahrain, like in other countries of the Middle East has been of great concern. It is the case that the perceptions of Bahraini people about nursing may be grounded in strong cultural influences (Tawash & Cowman, 2015).

In order to build valid and reliable strategies which can enhance nursing recruitment in Bahrain, an understanding of the perspectives of the potential students about nursing is important. To have a comprehensive and in-depth understanding of the multiple factors that are influencing the decisions of high school students in Bahrain in relation to choosing a career in nursing, a number of research methodologies were applied in this study to collect data from the stakeholders, who are believed to have utmost influence on the career decision.
making of the students. These stakeholders included the high school students, nursing students, students’ parents and school career guidance counselors.

Findings from the data collected led to the emergence of a new, dynamic and exciting career choice model, which is unique to this study. The Nursing Career Choice Model (NCCM) which was based on Deci & Ryan’s (1985) Self-Determination Theory, is believed to provide an appropriate focus on factors affecting nursing as a career choice for the high school students in Bahrain (Chapter 8). The model set out to describe the process involved with career decision making for the high school students, and its elements provided an insight into what influences students’ career choice, putting more emphasis on the contexts surrounding the students in Bahrain. The model also guided the research toward developing a recruitment intervention that could motivate more students to consider nursing as a career. The development of the NCCM was beneficial because it was based on the suppositions and findings of this research study. It applied very well to the notions and beliefs of this study in relation to what intrinsic and extrinsic factors affect the choice of high school students of a career in nursing and what needed to be considered in the development of the strategies implemented to promote recruitment into nursing. The model is unique in that, it is the first model designed to explain the complexity of the factors involved in high school students’ choice of a nursing career in Bahrain and indeed in the wider gulf. It also linked these complex factors to an intervention designed to promote recruitment into nursing. A review of the literature revealed that there is no similar models developed to illustrate the process of high school students’ career choice decision related to nursing. In addition, the NCCM provides opportunities for regional and international research to investigate the generalizability of the model to other populations.

In addition to the NCCM, this study has introduced another model which is also unique to this study; the NURS-P.R.A.M (NURSING-Positive Recruitment Arabic Model). NURS-P.R.A.M aims to provide guidance for successful nursing
recruitment in Bahrain and the GCC. It highlights important factors that needs to be considered by stakeholders and policy makers to promote effective strategies for nursing recruitment (Chapter 22).

This chapter is structured around the two research questions which directed this study and the development of both, the NCCM theoretical model and the NURS-P.R.A.M, which are central to this study: the factors that influence nursing as a career choice among high school students and their families in Bahrain; and the strategies and actions, in terms of best practice, which should be implemented in order to promote nursing as a career in Bahrain and enhance recruitment to nursing. The intrinsic and extrinsic motivations explored through the NCCM were used to provide answers to these questions.

21.1 Forces to Enter a Career in Nursing
Price (2009) disputed that it is important to build a clear understanding of career development and career decision to promote recruitment. Career theorists described career choice as a process and not a single decision, as it is not certain how a career choice is made (Stearns & Marchione, 1989). That is, career choice is a lifelong process that starts with childhood and shapes up as the individual grow and get exposed to a variety of life experiences. According to Brown (2002) early childhood environments predispose children to consider joining certain occupational groups, and that human behaviours can only be understood in the context in which these behaviours took place. The findings of this study support these notions in maintaining that, high school students in Bahrain are influenced by a group of complex and multiple factors that affect their career trajectories.

The first research question of this study looked into identifying the factors that influence nursing as a career choice among high school students and their families in Bahrain. According to the findings from the research participants, and in line with the NCCM, these factors were categorized into intrinsic and extrinsic motivators. Intrinsic motivation is a behaviour aimed at achieving a feeling of competence and
control. It includes eagerness and seeking challenges and opportunities to excel. Guided by the Self-Determination Theory, three main innate psychological needs were identified, these include the need for competence, autonomy and relatedness (Ryan & Deci, 2000b) (Chapter 8). The intrinsic motivators in this study were linked to high school students' demographic data, their interests and academic performance, as well as their perceptions and experiences with nursing. This part of the discussion will focus on the intrinsic motivators identified to influence the choice of nursing as a career amongst high school students in Bahrain.

Although the parents seemed to have a huge influence on their children’s career choices, the high school students perceived themselves as the most important persons to influence their decision to join a career in nursing. Amongst the demographic characteristics of the respondents of this study, both gender and socioeconomic background has been identified as factors influencing the choice of a career in nursing. The demographic analysis of the respondents identified that, nursing students who joined the nursing programme were mostly females. And although the difference was not significant, the high school students who expressed considering joining a nursing career were mostly females. This was congruent with Law & Arthur (2003) who claimed that gender was a major factor that influenced the choice of career, and that was based on a number of overseas studies. This finding further reflects nursing as predominantly female profession and the societal view that nursing is perceived by Bahrainis to be more suitable for females than for males. Parkin (1995) claimed that nursing role has been analysed as an extension of physical and emotional work of caring, which is considered as women's work. Regrettably, in societies like Bahrain, the stereotype of nursing as a female profession is still persistent, which is also evident in international literature (Dixon, 2006; Wood, 2004). The perceptions of nursing as a female occupation has to be taken seriously, considering the cultural background of the Bahraini nationals. Although the perceptions of the Middle East societies have started to change, many families continue to be reluctant to allow their children,
especially girls to join nursing (Lovering, 2012b). Also culturally, it is preferable that patients are cared for by the same gender. In Bahrain, hospitals usually assign female nurses to care for female patients, however, because of the shortages of male nurses, very often the female nurses are also assigned to care for male patients, and culturally this may not be acceptable to some patients and communities. It may be argued that culture then becomes one of the main reasons for the severe shortages of nurses in Bahrain and the Middle East.

In addition to gender, it was interesting to find that parents’ education, parents’ occupation and the type of school the students attended influenced not only students’ perceptions of nursing, but also their decision to consider a career in nursing, and this was also evident in the literature (Hollup, 2012; Baykal & Altuntas, 2011). There were highly significant relationships between these factors and students considering studying nursing, which can mostly be related to families’ income and ability to support the education of their children. In Bahrain, all national students get government scholarships to undertake nursing, which makes it affordable for students compared to other graduate programmes/careers. The parents participating in this study mentioned the availability of scholarships as an important factor to consider when choosing a career for their children. In the literature, family income was found to be a predictor of the intention to study nursing among students. Research found that family income made a difference; those who were in the higher economic levels had a significantly more negative attitude towards nursing as a career choice than those in the lower economic levels (Law & Arthur, 2003; May et al., 1991). It becomes clear that with the financial constraints, it was mainly families with relatively low income who would encourage their children to join a nursing career. This might have reflected on the social status of nursing in Bahrain. However, considering that Bahrain is viewed by the World Bank as a high income economy, few families will be located at the low income level, and accordingly very few families will encourage their children to join
nursing. This adds to the enormity of the challenge in promoting nursing as a career.

This study reported that the majority of the nursing students’ parents were either retired or not working, and that the majority of them were educated at a high school level or below. This indicated that, they came from a middle or low socioeconomic background. Furthermore, all of the nursing students graduated from government schools, where education is provided free of charge to children in Bahrain. This might also provide an indication of the socioeconomic level of their families. It was also found that the majority of these nursing students’ family members who worked in the health care field were their siblings and the majority of them were nurses. This shows that nursing is familial, and as a profession seems to be attractive to a particular socioeconomic class, an observation that has been further strengthened by finding that, the parents of the high school students who stated they would consider nursing as a career, were in the main less educated. It was evident that, as the educational status of the parents becomes higher, fewer high school students considered studying nursing. The findings by Baykal & Altuntas (2011) and Aslan et al. (2005) supported this study by indicating that nursing students’ parents were mostly of low level of education (Chapter 5).

Although the high school students coming from private schools; who usually come from a higher socioeconomic background, were least likely to consider nursing as a career, surprisingly, they had better perceptions about nursing than high school students coming from government schools. A rationale for this finding might be that the students in private schools receive better career counselling about nursing than the other students in government schools. It may also be the case that students attending private schools, receive better health care provided by the school nurses, who in this case, present as nursing role models for these students.

In addition, parents’ occupation and education had a significant relationship with students’ perceptions which was similar to the findings of Baykal & Altuntas (2011).
The data showed that students reported more positive perceptions when their parents worked in a health care profession. This clearly reflects the positive attitudes the students receive from their parents about nurses. Law & Arthur (2003) reported that students whose close relatives were nurses, in particular a mother, demonstrated a significantly higher score on perception for nursing as a career. In addition, the students who have parents with an educational level below high school education had better perceptions than those whose parents are educated at university level. This could be explained by that, normally the parents with higher level of education prefer that their children follow their career, and so they act in a way to attract them to that pathway. According to Knight et al. (2011) parents perceived careers such as medicine, law, and engineering as more prestigious than nursing. On the other hand, for parents with lower education, choosing a career in nursing seemed to be a very positive thing, as they definitely see nurses to have better status than their own, something that they would love for their children to have. Lamadah & Sayed (2014) claimed that because of the negative public image of nursing that is influenced by strong sociocultural traditions in the Middle East, nursing functions are often performed by females of lowest social classes.

Career interest has also been identified as a significant factor influencing the choice of nursing as a career. According to Buerhaus et al. (2005b) the persistent trend of declining interest in nursing by youngsters is considered the most important factor contributing to the aging and diminishing nursing workforce. Although the high school students had very positive perceptions about nursing, they showed very little interest in joining a career in nursing. The high school students claimed that nursing does not suit them. According to the career guidance counselors, very few students expressed their interest in nursing and that was apparent in the minimal number of “nursing career groups” in schools which are usually formed by interested students. Furthermore, the career guidance counselors stated that during their study, students rarely inquired about a nursing
career, which again reflects on the poor interest in nursing. Katz (2007) claimed that, the majority of studies on nursing as a career choice showed that high school students in general have little interest in nursing. This makes it clear that, it is not a phenomenon related to students in Bahrain and the Middle East only. However, the situation in the Middle East is unique because the students’ hesitance to join a career in nursing is influenced by strong sociocultural traditions. The society looks at nurses with some suspicion and disrespect so that girls are afraid of joining nursing even if they like it. This poor image of nursing did not only affect female nurses, but was also reflected on male nurses (Lamadah & Sayed, 2014).

Although the majority of nursing students in this study chose to study nursing because of the desire to care for others, 34% of them had not selected nursing as their first career choice. They reported that they chose nursing because it was a better choice compared to other available options. This finding was also indicated by other studies (O’Brien et al., 2008; Beck, 2000). Nursing being considered as a better option by high school students needs to be emphasized and strengthened through well designed recruitment strategies. Students’ parents identified a number of careers they would prefer their children to join and these included health careers such as medicine, pharmacy and physiotherapy. Unfortunately, nursing was not considered as one of those careers. Although there are a lot of similarities in the nature of the identified health careers and nursing, there seemed to be a clear lack of awareness and misconceptions with regards to nursing, which can be overcome by nursing promotion and recruitment initiatives.

Interestingly, the findings of this study showed that there was no significant relationship between the high school students’ cumulative grades (CGPA) and their desire to join nursing, but in general, it was evident that the students with high CGPA had less positive perceptions about nursing. This was not congruent with Law & Arthur (2003) who claimed that CGPA were major factors influencing choice of career based on several overseas studies. The parents, however indicated that, people in Bahrain preferred that their children study medicine or engineering if they
are high performers. On the other hand, high school students with lower CGPA felt that their grades were not high enough for them to join nursing education, which highlight that nursing might be more attractive for students who are low performers; which might also affect the social status on nursing. The nursing students who claimed that they joined nursing only because they compared it to less preferable options are considered high performers, as they all achieved 80% and above in their high school education.

21.1.1 Experiences and Images of Nursing
The findings of this study showed that Bahraini high school students perceived nursing positively, which is indicative of the international literature. However this doesn’t seem to be sufficient to make them consider nursing as a career. “There are particular issues in terms of culture and tradition that requires consideration” (Tawash et al., 2012, p.88), which will be discussed later in this chapter. A study by Natan & Becker (2010) identified a positive correlation between both the image of nursing and the decision to choose a nursing career. That is the more positive perceptions of nursing and perceived confidence about finding a job in nursing, the higher the chance of choosing a career in nursing. This was somehow, reflected in the findings from nursing students in this study. The shocking finding was that, despite the overall positive perceptions the high school students held about nursing, only a minority said they would consider nursing after graduation. This finding was very much similar to international studies done by Law & Arthur (2003) in Hong Kong, Achilles (2010) in Malaysia and earlier by Marriner-Tomey et al. (1990) in Indianapolis.

Some interesting findings were related to how nurses are perceived socially. It was identified that nurses are highly respected and appreciated by the society. Nursing was also viewed as being a humanitarian job that requires tenderness, compassion, and good communication skills. Nurses were perceived to be important to keep people well. These findings agreed with Al-Kandari & Lew (2005), where the majority of respondents viewed the nursing profession as
necessary and respected in Kuwait society. The findings of a study involving Arab students (Tang et al., 1999) were similar to this study by reporting that nurses are respected by others. Nurses are also seen to be important when people are sick, a finding that is supported by Law & Arthur (2003) who found that caring for sick people was a positive attitude held by the majority high school students, an attribute which was a major reason for participants to choose nursing as a career.

Although the nursing profession was perceived by the majority of high school students as a high status occupation, nurses in Bahrain failed to convince the students that they have an equal status as doctors. This was consistent with other research indicating that nursing continued to lag considerably behind the medical profession in high school students’ perceptions of occupational prestige and status (Ward et al., 2003). This was also congruent with an earlier study by Kohler & Edwards (1990) who found that only 30% of their subjects believed that the status of nurses was equal to that of physicians. Generally, and according to Al Jarrah (2013) nursing schools were perceived by the public “as simply training students to carry out physicians orders” p.150. Additionally, Trossman (2003) reported that the public’s stereotypical picture of a nurse is one of a female in a white cap who unquestioningly follows doctor’s orders. Factors that may explain why nurses are viewed to be lower in status than doctors in many studies.

Looking closely at the economic aspects related to nursing, the findings were quit contradictory. The majority of the high school students in this study perceived nursing to offer job security and that nurses are well paid. The perception of nursing as a financially rewarding career was shown to be significant in other studies (Achilles, 2010; Unholz, 2003; Moore, 2001). The findings of this study agreed with those of Katz (2007) and Swarna (2015) where participants perceived nursing as a financially rewarding career with job security. According to the researchers, this trend is not surprising, given the overall reports in the literature about increases in nursing salaries. However, in this study, almost half of the high school students did not perceive that nurses can always get jobs. This might be
related to the recent discussion related to the delay in employing newly graduated nursing students in Bahrain, which was discussed publically through the newspapers (Bahrain News Network, 2012).

On the other hand, the parents in this study considered the salaries of the nurses in Bahrain to be low compared to other occupations like medicine. They claimed that their children may reject nursing and look at joining careers with better salaries. According to OECD (2013) low nursing wages affect the attractiveness of the profession. Additionally, although, the career guidance counselors agreed that nurses were well paid, they did not rate this item highly as they did for other items related to the socioeconomic status of nursing. Interestingly, the findings coincided with other studies which reported that high school students were not interested in nursing because of their perceptions about nurses receiving low salaries (Achilles, 2010; Unholz, 2003; Moore, 2001). Many years ago, Hendrickx & Finke (1994) were concerned that fewer high school graduates are choosing nursing as a career and are selecting professions they perceived as higher paying or more prestigious such as business, law, and engineering. This factor has definitely contributed to the current nursing shortages. According to the World Health Organization (2002), the poor representation of nursing may be attributed to work undertaken by a predominantly female work force: low pay, low status, poor working conditions and few opportunities for promotion. Unfortunately, it has been evident that these concerns still exists and is having an obvious impact on the nursing shortages, in Bahrain and worldwide.

The high school students’ perceptions about areas related to nursing education and career potential were found to be positive. Unlike the findings of previous studies where the participants had negative opinions of nursing in areas of career advancement (Unholz, 2003; Law & Arthur, 2003; Sherman, 2000), the majority of the high school students in this study viewed nurses to be well educated; this was further established with the majority of the students reporting that nurses use special skills and knowledge. This finding was supported by participants from
Kuwait who reported that nursing is a profession requiring the use of advanced technology and a broad knowledge base (Al-Kandari & Lew, 2005). They also perceived nurses as effective health educators, active researchers and making an important contribution to the society. Like their parents and career guidance counselors, the high school students also reported that nursing has opportunities for both men and women (91%), a finding that is very promising in the area of nursing recruitment. The high school students agreed that nursing offers opportunities for personal growth and development, that nurses have opportunity for career advancement in nursing, they can choose different areas of specialty in nursing and that they can teach in college or university. Comparing these findings to international literature, the results indicated favourable opinions about nursing education and career potential held by high school students from Bahrain. Grossman et al. (1989) reported that the participants in their study seemed to lack knowledge about expanded roles of nurses and opportunities for advancement which was also found in a more recent study by Natan & Becker (2010).

With regards to nursing education, it was unfortunate that the majority of the participants in this study were not aware about the scholarship opportunities available to study nursing, which requires more attention in the nursing recruitment efforts. The findings reported that almost 50% of the high school students sought studying nursing to be expensive or that it was not reasonably priced, this was also indicated by the parents and career guidance counselors. According to the literature, the cost of nurse training was perceived as the strongest barrier at attainment of careers in health professions (Thomson et al. 1992). In more recent studies, the participants still perceived nursing education as costly (Katz, 2007; Law & Arthur, 2003). Moreover, the high school students believed that getting a degree in nursing requires many years of study and that studying nursing is difficult, which is also congruent with earlier literature (Katz, 2007; Law & Arthur, 2003). Participants in Achilles (2010) wished that the number of years that nurses spend in studying nursing to be decreased. These findings reflected an obvious
lack of awareness with regards to nursing as a science. There is a hidden perception that it only required some technical skills and basic information to become a nurse. In addition, the students viewed nursing as a challenging profession, which may or may not be a positive perception as this might be seen ideal for some students, but not very encouraging for others. According to Yeager & Cheever (2007) adolescents wanted less involvement in caring for people, hard work and technology-oriented work. These results seemed to mirror previous research that described adolescents’ perceptions of the characteristics of their ideal careers versus a career in nursing.

The findings from nursing students with regards to nursing education requires a lot of attention by policy makers. The majority of the respondents reflected a positive attitude towards lifelong learning and they frequently identified that pursuing higher education in nursing as a career goal, which may suggest that undergraduate nursing education is viewed by the students as a platform (Lyckhage & Pilhammar, 2008) for their future nursing career. The failure of respondents to strongly reflect the desire for clinical career pathways requires much greater discussion and debate on the scope of nursing practice in Bahrain, and is incumbent on policy makers to promote clinical nursing career pathways that are attractive to nurses (Tawash et al., 2012). Clearly, there are deficits in promoting nursing practice in a professional capacity, and promoting positive public nursing campaigns on the role and scope of nursing practice and contribution to society can be helpful in addressing this deficit.

Congruent with international literature examining the perceptions of nursing as a career, the majority of the high school students continued to identify nursing as a caring profession. The positive perceptions about the caring aspects of nursing were prominent in this study. The high school students had very positive perceptions about the professional aspects of nursing; the majority of students believed that nurses help people and that they are important when people are sick. Seago et al. (2006) found that the positive perceptions of the intrinsic rewards of
nursing are consistent with image of nursing as a helping and beneficial profession. According to Grossman & Northrop (1993) the overwhelmingly positive images of nursing as a caring and helping profession reinforce the public’s long held views about the role of nursing in the society. In addition, several studies identified the need to help others and other humanitarian factors related to nursing to be important factors in nursing career choice (Law & Arthur, 2003), which matched the findings of this study. However, it is important to note that caring is perceived by Arab Muslim people as part of their religion. According to Mebrouk (2008) Islamic values provide the framework for nursing care. For Muslim nurses, caring is practiced through their faith in God; this faith shapes their relationship with their patients and forms the basis of their commitment to nursing (Lovering, 2012b).

Some perceptions were very disappointing and mirrored an extreme lack of awareness of nurses’ roles and capacities which are impeded by doctors’ roles in patient care. Although the high school students viewed nurses as powerful people, they didn’t highly perceive nursing as an independent profession and many of them thought nurses lacked control on their own practice. This was further confirmed by the high school students believing that nurses do not make decisions about patient care themselves. These findings are very similar to findings reported by Achilles (2010) in which participants did not see nurses as capable of independent practice, or making decisions for themselves. Also consistent with international studies, respondents perceived nurses to follow directions from other members of the health team, mainly doctors. Wallace (2007) indicated that, as a predominantly female profession, nursing retained its image as a female-based career that serves a subordinate role in the health care arena. Although recent studies have demonstrated a relationship between nurses’ autonomy and physician-nurse collaboration and better patient outcomes, in hospitals and most health care settings, the work of nurse’s remains structured and generally controlled by others (Kramer & Schmalenberg, 2004). These findings are similar to
the findings by Sherman (2000) who reported that school students viewed nurses as a supportive role to the physician. Additionally, although the high school students in this study viewed nurses as team members with doctors and other health care workers in their working environment, they perceived their role as implementing what the doctors asked them to do. The students also perceived nurses to have no leadership in their career. It has been reported by the World Health Organization (2002) that despite the great progressive developments in both nursing practice and education, nurses were not involved in policy decisions related to the nursing profession. According to Aarabi et al. (2014) the involvement of nurses in policy making can increase quality of care, however health policies originate from economic forces and public policies that do not involve nurses.

Most of the above findings, which described the nurse-doctor relationship and the lack of nursing autonomy might be attributed to the images of nursing portrayed in the media. Considering the effects of globalization, highlighting the role of the media in shaping the images of nursing in the minds of high school students in Bahrain becomes highly important. For more than two decades researchers have examined the image of nursing in the media, identifying the need to communicate more realistic representations of nursing (Hall et al., 2003). This notion is very much relevant to the young generations in Bahrain who started to depend completely on the media to gain their information and formulate their views about the world. It is disappointing to note that, real, well-designed efforts to use the media in promoting nursing in Bahrain are rare or might not exist. Unfortunately, the local mass media is not employed effectively to promote the nursing profession in Bahrain. The students identified the International television programmes as one of their main sources for information about nursing. In the absence of locally produced medical television programmes, the students are mostly watching television programmes showing medical dramas produced in the West. As discussed in Chapter 5, most of these programmes represent nurses very negatively. In addition, these Western programmes do not reflect the cultural and
contextual aspects of nursing in Bahrain and the Middle East, which make them even more irrelevant.

Other than television, the students recognized the internet as one of the most important media sources about nursing, with the internet being most prominent (Tawash et al., 2012). While the majority of the nursing students found the internet to be a great source of information about nursing, very few respondents identified other media to be helpful in providing them with information about nursing or to influence their perceptions of nursing, and this finding is consistent with other studies (Sand-Jecklin & Schaffer, 2006). Furthermore, the majority of the career guidance counselors stated they searched the internet to get information about nursing and that they used this information to design booklets about careers, including nursing. Like television programmes, the Internet might not be an ideal source to learn about nursing (Kelly et al., 2012) (Chapter 5). Assuming that the career guidance counselors are more careful in their attempts to extract the nursing information from the Internet for their students, there is no guarantee that the students did not search the Internet themselves to find information about different careers. In addition, this study found that only 27% of the high school students stated they read about nursing, which leads to the assumption that the students depend mostly on watching videos showed on the Internet, specifically YouTube. Putting in mind that people in the current world have a very easy access to the media, the findings emphasize the importance of utilizing the media in a more effective way to promote and market nursing in this part of the world, especially for the youth. It is recommended that using the public media to promote and announce nursing developments will impact positively on the nursing profession in Bahrain (Tawash, et al., 2012).

In contrast with the above, the perceptions of the high school students in relation to the working conditions of nurses in Bahrain seemed very realistic, unlike in Sherman (2000) where the students could not visualize where nurses work. Miers et al. (2007) reinforced the importance of presenting a realistic view when
promoting nursing as a career, as this will ensure better retention of nursing students and staff. The high school students reported on knowledge about the context of nurses working environments as well as the nature of the job nurses perform to care for patients. The majority of high school students appreciated that nurses manage large groups of people and that nurses mainly work with people rather than things. They also perceived that nurses master high technological instruments. These three characteristics, which were also identified by the career guidance counselors, might be challenging for some students and might discourage them from considering nursing as a career. Especially that the majority of high school students believed nursing is not an easy job and is very busy and inflexible when it comes to nurses selecting their working days and hours. These findings coincide with Buerhaus et al. (2005a) who reported that their respondents considered nursing to have demanding work schedules and to be emotionally and physically challenging. In addition, the respondents in Tawash et al. (2012) recognized nursing as hard work and physically demanding. They also found nursing to be stressful, as it is difficult for females bearing children to work irregular hours, especially night duty. According to the international literature, rotating shifts contributed to physiological difficulty; such as sleep disturbance and fatigue, and increased parental conflict (Vitale et al., 2015). In the Middle East, the females are raised to value their family and children as compared to education and work (Moghadam, 2013) (Chapter 3). Other studies also indicated that nurses showed better satisfaction with their job when they had the opportunity to control their workload, pace of work and timing of breaks (Aboshaiqah, 2015).

The findings of Tawash & Cowman (2015) indicated areas of continued vulnerability for the image of nursing as a profession as most participants considered nursing to be an occupation associated with job pressure and significant risk of injury. As part of being aware of the nature of nurses’ job, large numbers of the high school students perceived that nurses are exposed to patients with dangerous diseases with almost half of them believing that nurses work in
dangerous environment, two facts that were also agreed by parents and career guidance counselors. The students also realized that nurses have to perform unpleasant tasks to care for their patients. According to Law & Arthur (2003) a factor that provided a negative impression of nursing amongst their participants was the belief that nurses perform unpleasant tasks, such as caring for patients with communicable diseases, handling blood and bodily waste. Seago et al. (2006) reported that other occupations such as medicine, physical therapists and high school teachers were also rated negatively on these characteristics, indicating that nursing does not have a unique image vulnerability on these scores. Unfortunately, with high numbers of high school students having a clear understanding of the nature of work nurses do, many of them are discouraged from joining a career in nursing. These findings indicate the need to put more focus on the brighter side of nursing in any recruitment effort, in order to promote a more positive image of the profession.

21.2 Family and Peer Group: Motives for Nursing

As extrinsically motivated behaviours are not inherently interesting, the primary reason people are likely to be willing to perform a behaviour is because they are valued by significant others to whom they feel connected, including their family, peers or society (Chapter 8). This study showed that parents, friends and relative nurses were very powerful motivators for them to join nursing which was congruent with the findings of previous studies (Price, 2009). This influence of significant people and peers on students’ perceptions suggests that positive marketing and recruitment strategies through the School of Nursing should target not only the students themselves, but the students’ parents and peers as well (Tawash et al., 2012).

Parents and families play significant roles in the occupational aspirations and career choices of their children (Nota et al., 2007). Without parental approval or support children and young adults are often hesitant to pursue or even explore diverse career possibilities (Taylor et al., 2004). This becomes even more critical in
the Middle East, where children are obliged to show respect to their parents and older family members by approving a career that their parents feel is more suitable for them (Rassool & Sange, 2014). This study is one of the very few studies conducted to explore the perceptions of parents, and the only study involving Arab parents, about nursing, and the influence they have on their children’s choice of a career in nursing. According to this study, the high school students and parents exhibited very similar perceptions about nursing, which by inference highlights parental influence. The parents in this study had positive perceptions about nursing and viewed nurses to be competent, have good communication skills, provide a holistic care for patients and take the responsibility for their actions. On the other hand, they believed that nursing required strength and power and that Bahraini nurses lacked patience and interest. The parents believed that nursing is a hard job and required patience mostly because the nurses are seen to be overloaded and pressurized with the big numbers of patients, a fact that reflected a sense of nursing shortages in Bahrain. Nursing was also perceived by parents as a dangerous job which exposes their children to injuries, diseases and infections and that the working environments of nurses lacked safety precautions. Considering the great influence of the parents on the career choices of their children, nurse educators and health administrators need to join their efforts to improve the working conditions of the nurses in all health sectors. This is vital in changing the community’s negative perceptions of nursing and reassuring more parents to encourage their children to join nursing.

This study also showed that the majority of the relatives of the high school students and nursing students’ joined careers that are not health related, including business, information technology, engineering and teaching. This finding is important in showing that nursing and other health careers do not seem to be very attractive compared to non-health related careers for Bahraini students. Considering the cultural backgrounds of the participants in this study, many reasons can be detected to explain their preferences for the non-health careers,
including nursing. Some of these are related to gender mix, and physical contact with patients, which are mostly linked to health professions (Chapter 3). On the other hand, many of the occupations above have better status than nursing with regards to working hours, salaries and the amount of stress involved.

It was also interesting to find that having relatives (other than parents) or siblings employed in the health care field did not have influence on high school students’ decisions to join a nursing career. However, the majority of the nursing students’ relatives who were identified to be working in the health care field were nurses, which might have had an influence on the career choice of these participants. Earlier research showed that nursing students' images of nursing may be traced to relatives who work in health care (Lyckhage & Pilhammar, 2008). In this study, the high school students who received their information through talking to a nurse seemed to have better perceptions than other students who did not. The role of nurse relatives, specifically, in encouraging high school students to join nursing needs to be explored further, especially that relative nurses were identified as an important source of information about nursing by the nursing students who participated in this study. In addition, the majority of the high school students stated that they gained their information about nurses and nursing by observing a nurse or by talking to a nurse which clearly reflected the importance of positive feedback and nurses acting as role models. Such findings emphasized the importance of improving the role of nurses in promoting nursing for high school students and empower them more to participate in marketing nursing.

21.3 Cultural Beliefs and Values
The intrinsic and extrinsic factors discussed in the previous parts of this section were very similar to other international studies (Hollup, 2012; Katz, 2007; Seago et al., 2006; Law & Arther, 2003). In this study, the impact of society and the influence of culture and tradition was strongly reflected in the perceptions of nursing as a career. It has been suggested anecdotally that the perceptions of Bahraini people about nursing may be grounded in strong cultural influences
It is believed that the concept of nursing is very much linked to a particular group's framework of communication, and a reflection of who nurses are, and how they are viewed by themselves and others (Mason-Whitehead et al., 2008). According to Crowl (1996) the difficulty in measuring people's attitudes and opinions is mainly because it is difficult to define what constitutes a particular attitude or opinion. Being part of a bigger society, individuals tend to associate their views and opinions about different concepts with their society. Dal et al. (2009) reported that the negative associations attached to the nursing profession by the society, added to the absence of laws of the nursing profession and the standardization in the vocational education, make potential nursing students retain negative notions about nursing.

In attracting local candidates to study nursing, the public image of nursing in the Middle East has been of great concern. In the Middle East Region, the role of nurses was traditionally part of the role of women, but only for their own families. To take up nursing as a career, girls required education and training, for which there were limited opportunities. In addition, in most Arab countries, nursing has been generally restricted to the area of maternal care provided by traditional midwives (Jansen, 1974) (Chapter 3). The nursing students' in this study claimed that nursing is not very well accepted socially; this was supported by the parents who claimed that culturally, it is not acceptable for girls to work as nurses, especially when they are married and have children, for which these two responsibilities take priority over education and work. It was also unacceptable for females to work shifts, especially working at night because of the anticipated risks of getting exposed to inappropriate situations that they might not be able to handle, whether inside the hospital or outside on the roads.

Bahrain society is rich in tradition and heritage; however it has experienced profound changes following the discovery of oil (Tawash & Cowman, 2015). According to Al-Shaikh (2004) those changes modified the well-known traditional role of women as to produce children and bring them up. They had an active role
in their own homes having no problems serving the family and the supply of “life necessities” was their greater demand. Nowadays, women have gained education and established their position in different jobs and careers. This change and the move from having a family structure of the extended families to more nuclear families increased the demand for women to start depending on domestic maids rather than themselves and their family members to help them raise their children and serve their families.

As a consequence of economic developments there is evidence from the parents respondents to suggest that some young people in Bahrain may view nurses as maids (Tawash & Cowman, 2015). The perception of nursing as a “maid’s” job might be related to the mass employment of domestic maids as well as using them as nurses in the health care institutions (Saberi & Moravveji, 2010; Al-Kandari & Ajao, 1998). The fact that the society of Bahrain still undermines nurses and view them as equal to housemaids may discourage the youth, specifically the girls, who refuse the idea about becoming nurses as they see them at the same level of their housemaids. One of the recently observed practices is related to housemaids being dressed in white uniforms that are very similar to nursing uniforms. It is believed that this new phenomena emphasized the notion of nurses being equal to the status of housemaids by the society. According to Albert et al. (2008) patients identified nurses with their white uniforms, and that the appearance of nurses had an influence on shaping their perceptions of nurse professionalism. These factors must be seriously considered by the policy makers to aid the development of positive nursing recruitment campaigns. Any efforts to improve the enrolment and retention of Bahraini nurses should consider enhancing the social values and images of the nursing profession.

According to the literature, since its emergence, the status of the nursing profession as a discrete discipline has always mirrored that of women in the society (Birks et al., 2009). However, this study found that the majority of the high school students and career guidance counselors refused the idea that nursing is a
profession only for women. This finding contradicted Seago et al. (2006) in which students were more likely to subscribe to the persistent belief that women are better suited to be nurses than men. Considering the socio-cultural beliefs about males performing female-type work, mainly constituting the provision of patient care, this finding is very important in terms of recruiting males into nursing. In addition, the nursing students viewed nursing as providing opportunities for both males and females, which can be used to strengthen the position of males in nursing in Bahrain. Nevertheless, the low representation of male students (13%) in the first intake of nursing students, as well as finding out that more female high school students than males expressed interest in joining nursing after graduation requires a particular emphasis on recruiting males to nursing. Although the representation of males would be generally reflective of similar international cohorts there are particular issues in a context of Bahrain (Tawash et al., 2012). The parents believed that there is a need for both males and females in the nursing profession, however their views about male nurses were conflicting.

The findings of this study in relation to the low numbers of males in nursing identified factors that are slightly different from those recognized in the international literature (Chapter 3). Some parents believed that nursing is not a suitable career for males because they lack the compassion and tenderness. In the past most cultures in the Middle East, including Bahrain perceived nursing as a natural gift, which required nothing but a caring wife, mother or daughter. Hence, nursing was very much seen as a female job, a fact that discourages many families from encouraging their sons to join a nursing career. This supports Wallace’s (2007) statement in that nursing was stranded in the expectation that caring was part of women’s duty to their family or community. Low nursing salaries were also identified as a reason for males not entering a nursing career. It was believed that the income a man could make through nursing is not sufficient for them to bear a family, which seems to be a serious factor affecting male recruitment into nursing. The reasons behind the low wages paid for nurses might
be contributed to the earlier notions identified by the literature, which state that as some women who chose to be nurses moved out of the monarchy of unpaid family labour into the marketplace, the postulation that it would still be work of love, not money remained.

For many years, Bahrain has taken few initiatives to make the profession attractive for Bahraini males and females. Despite the cultural issues, the majority of nurses in Bahrain are females (Tawash et al., 2012). The health statistics (Ministry of Health, 2009) reported that only 8% of the nurses in Bahrain are males, although the number of males entering nursing in Bahrain is increasing (Cowman, 2014). Given the sensitivities in terms of culture, religion and gender in a Muslim society, a sufficient number of males in nursing are important in supporting nursing and health policy in Bahrain and in meeting the needs of male patients. The parents in this study reported that culturally, it is not appropriate for females to take care of male patients. In addition, it was found that Bahraini male patients did not feel comfortable about being exposed to a female Bahraini nurse; they preferred expatriate nurses regardless of their gender. Acknowledging these facts, collaborative initiatives should be taken to clear misconceptions and improve the numbers of male students entering nursing, knowing that attracting more males from Bahrain to join the nursing profession will definitely improve the satisfaction of patients. Al Kandari and Lew (2005) also suggested that encouraging more males to join nursing will help provide more male nurses to care for male clients, thus solve some of the socio-cultural problems encountered by female nurses. An in-depth study of the barriers that impact on recruitment of males to nursing in Bahrain is recommended as a positive action in terms of improving the perceptions of males and inspire their decisions to join nursing. In this study, finding that males are viewed by some parents to be more suitable for nursing than girls because they are stronger both emotionally and physically, is very promising. It has been suggested that media and social influence is important in promoting recruitment of males to nursing (O’Brien, 2008).
21.4 Driving Forces for School Leavers

The findings of Hollup (2012) revealed that the most important factors in attracting the respondents to choose nursing as a career were job security, good income, government employment and paid education. All of these factors have been identified as essential factors in this study. A very important step taken by the government of Bahrain with regards to supporting nursing education is that all Bahraini candidates who decide to join nursing programmes are provided with scholarships. In addition, the majority are guaranteed jobs soon after graduation, especially those who are sponsored through hospitals. At present, there is increasing recognition that nursing has become a career opportunity. Buerhaus et al. (2005a) highlighted that comparing the relatively low wages given to nurses to other career opportunities, makes nursing less attractive. According to Tawash & Cowman (2015) in terms of the socioeconomic status of nursing, rating pay by the respondents of this study as one of the lowest ranked factors is somewhat juxtaposed to nurses being important in keeping people well. According to the parents in this study, they would reconsider nursing as a career choice for their children if the salaries given to nurses are improved. A point that needs to be considered seriously by the policy makers in Bahrain.

The shortages of nursing workforce has been identified as an international crisis for many years. In this study, there was a clear agreement by all the respondents about the existence of nurse shortage in Bahrain and the availability of very good opportunities for more nurse recruitment, both males and females (Economic Development Board (2013). According to the Higher Education Council, Bahrain will need to recruit 23,000 additional health care workers over the next 10 years to meet the requirements estimated by the Ministry of Health (Ministry of Education, 2012b). The shortages of staff nurses in the health care system has been criticized by the parents and has been referred to nurses being pressurized and overloaded, a factor that in their views have affected the quality of care provided by nurses. Observations made by parents about the correlation between the nurse shortages
and the quality of care have been recognized in the international literature. According to a recent study by Aiken et al. (2014) increasing a nurse work load by one patient increased the likelihood of an inpatient dying within 30 days of admission by 7%. Other surveys found that nurses perceive the nursing shortage to be interfering with their ability to provide quality patient care. According to Turner (2011) nurses reported that, it is more difficult for them to provide quality patient care within the current work environment because of workforce shortages. In addition, nurses believed the shortage had affected their nursing care in a number of ways; by decreasing the amount of time they spend with their patients, their ability to detect patient complications early and their capacity to maintain patient safety. Aiken et al. (2002) demonstrated an increased risk of medical errors associated with inadequate nurse staffing, in which some resulted in serious patient outcomes including mortality. Furthermore, nursing shortages lowered the overall quality of nurses’ own work life (Buerhaus et al., 2006; Buerhaus et al., 2005a).

Even when there is a perceived over supply of nurses in some of the countries, unemployment rates for nurses remained very low, indicating that positive perceptions of job security are justified (Seago et al., 2006). Acknowledging the shortage of nursing in Bahrain, all the respondents in this study perceived nursing to provide job security and that nurses always get jobs. This finding needs to be used effectively to promote nursing recruitment in Bahrain. The current shortfall of the number of individuals who are pursuing a career in nursing suggests that a positive image of nursing needs to be encouraged by both nurse education and the general community (Tawash et al., 2012). In order to attract more high school students to the nursing profession, the role of career guidance in high schools in Bahrain needs to be reviewed. Although it was not very different from the international literature, a very discouraging finding in this study related to the poor role of schools in promoting nursing to their students. It was reported that the high school students who received information about nursing from their school had less
positive perceptions than those who did not. This was similar to Al-Kandari & Lew (2005) who reported that students who received information from other resources had better perceptions than those who received information from their schools. Williams (2001) found that many guidance teachers and career advisors did not value nursing as an intellectual enterprise, and so this attitude has been conveyed directly or indirectly to students. Additionally, while the respondents in Mignor et al. (2002) claimed that over 92% of their students inquired about career options asked about nursing, only 4-6% of the HSS in this study asked their career counselors about information related to nursing.

The findings of this study suggested that career guidance in schools did not consider the nursing profession in its activities. The career guidance counselors were found to have positive perceptions about nursing, which is consistent with Bolan & Grainger (2005). Some of these positive perceptions were related career advancement in nursing, which contradicted Bolan & Grainger (2005) who found that their counselors had limited knowledge of the practice settings and opportunities available in nursing. However, there was no evidence of any attempts made by these career guidance counselors to promote nursing for the high school students in their schools. They justified this by stating that, there was insufficient information about nursing available for the career guidance counselors. They also felt that nurses should be more active in providing information related to nursing to high schools to help them promote nursing better. The findings that 34% of the nursing students in this study decided to join nursing on leaving school, that 29% of the nursing students decided to join nursing after attending a career day during high school, and that high school students continue to represent the majority of prospective nursing students makes it essential that high school career guidance counselors possess accurate information about the nursing profession to be able to advise the students. Bolan & Grainger (2005) argued that it is imperative that high school students have sufficient direction and information about nursing to make informed career decisions.
Other than this PhD study, there was no previous research undertaken to examine the understanding and awareness of the career guidance counselors regarding nursing, or their perceptions of the characteristics and attributes of nurses in Bahrain, which is consistent with findings from other countries (King et al., 2007). In addition, there were no studies conducted to explore the career guidance activities related to nursing in Bahraini schools, this PhD study is seminal in this regard. Considering the influential role of the career guidance counselors in guiding the career decisions of the students, as evidenced by the literature, this study sought to determine the understanding of career guidance counselors regarding nursing and their roles in providing advice to students with regards to a career in nursing. Although the Ministry of Education in Bahrain had a clear role in ensuring the availability of career counselling in high schools, the career guidance counselors took the major responsibility for planning and designing the activities in their schools. Unfortunately all the career guidance counselors confirmed that nursing as a career was not considered in their career counselling plans, other than some activities that gave general instructions about nursing as part of the other career activities provided to the students.

With regard to their understanding of nursing, it was also interesting to find that both male and female career guidance counselors who participated in this study had very similar perceptions about nursing. This finding contradicted the work of Mignor et al. (2002) who found that female counselors viewed nursing as a professional discipline and believed a higher level of diversification existed in the nursing field than did their male colleagues. The career guidance counselors in this study also had very realistic perceptions related to the working conditions of nurses. Realizing the similarities in the negative perceptions of the HSS and the career guidance counselors with regards to the working conditions of nurses, it is evident that the high school students are influenced by the advice and information provided by their career guidance counselors. One of the misconceptions identified and requires urgent attention was that, the career guidance counselors viewed
nursing to be a pathway to study medicine. This fact needs to be considered in the recruitment strategies developed to improve the awareness of high school students about nursing, as many of the high school students, especially the highly performing students expressed more interest in medicine. This factor might encourage these students to join nursing as a stepping stone to study medicine, putting in mind that studying nursing in Bahrain is less expensive and is supported by the government. The movement of graduate nurses to study medicine after the completion of their nursing programme instead of joining the health services may add to the problem of nursing shortage, although the number is very small.

Another factor that was found to influence the career choice of high school students in this study was related to programme accreditation. For the respondents, programme accreditation by the Higher Education Council in Bahrain was considered to be highly important in their selection of a programme of study. This reflected the community awareness of the recent strong activities taken by the higher education authorities in Bahrain in their attempts to determine and ensure the implementation of best educational practices in universities. These findings make it essential that nurses and nurse educators focus efforts to improve the awareness of schools about the positive aspects of nursing and help career guidance counselors have better roles in conveying positive attitudes to their students. In addition, it necessitates the importance of working closely with the career guidance counselors and continuously evaluate their input with regards to promoting nursing and ensuring the provision of accurate information about nursing.

21.5 The Nursing Career Promotion Intervention

In this PhD study, the NCCM guided the development of a nursing recruitment intervention that aimed to promote nursing for high school students. The intervention was grounded in context and was sensitive to the cultural backgrounds of an Arab Muslim society. Amongst current concerns about global shortage of nurses, King et al. (2007) declared that effective recruitment of school
leavers wishing to enter and successfully complete nursing programs is central to restoring the diminishing nursing workforce. They added that, it is essential that school students who are likely to pursue a career in nursing be identified during their high school years. Changing the image of nursing in the minds of students may help attract them to the nursing profession (Hoke, 2006).

According to Borycki & Samuel (2001) high school students need to be aware of the professional development opportunities in nursing. These include nurse education and specialization, nursing research and evidence based practice, career progression, and lifelong learning. Guided by the NCCM developed through this study, the findings from the high school students, students’ parents, career guidance counselors and nursing students were used to design a nursing recruitment intervention that was implemented in a number of high schools in Bahrain. The purpose of the intervention was to evaluate the effectiveness of a number of nursing promotion activities in improving the image of nurses, increase the awareness of high school students about nursing and encourage more high school students to consider nursing as a career. Considering the important role of the career guidance counselors, it was essential to include them in the recruitment intervention. King et al. (2007) claimed that it is essential that recruitment strategies are also directed towards career guidance counselors, so that information about the current scope of nursing practice and career opportunities are accurately presented to students.

The recruitment intervention developed in this study focused on presenting the high school students with an attractive image of nursing and was set out to shed more light on the positive aspects related to nursing, including job security, financial rewards, flexible work schedules, career mobility and the diversity of nursing roles. The aim was to present nursing with the characteristics that students would consider to be available in their ideal career. The recruitment activities employed in the intervention were selected with the belief that they were more applicable to the context and traditions of Bahrain. They included an interactive
seminar provided by a Lecturer in Nursing and student nurses as ‘Nursing Ambassadors, a “Nursing Career in Bahrain” video, nursing skills demonstrations by nursing students, and a “Find Yourself in Nursing” booklet (Chapter 15). These strategies were selected based on the literature, the findings related to the most utilized sources of information about nursing according to the respondents of this study, as well as the recommendations made by the career guidance counselors and parents.

Congruent with King et al. (2007), the role of nurses as professionals who work with other groups of health care workers and are accountable for patient care has been emphasized in the recruitment strategies for this study. Furthermore, the parents linked their career choices to programme accreditation, the availability of scholarships, the need of the labour market and the working conditions of nursing, which were all considered in the strategies. These realistic facts were clearly linked to the shortage of nurses, which could be resolved by more students joining the nursing workforce. In addition, the high school students preferred jobs that they considered enjoyable and distinguished, factors that were also made relevant to nursing through the strategies implemented.

The findings from the nursing students provided more clarity on what aspects concerning the nursing profession should be highlighted in the recruitment strategies developed for the high school students. The finding emphasized the importance of ensuring that caring is not undervalued and is prominent in education programmes as the nursing profession continues to evolve in Bahrain (Tawash et al., 2012). Based on these findings, it was important to emphasize the notion of nursing as a caring profession in the recruitment strategies in the study.

In general, the results showed that the high school students’ knowledge and awareness of the nursing profession improved dramatically after participating in the recruitment intervention, especially with regards to the nursing education. The respondents showed a high level of improvement in their awareness of the
scholarships available to study nursing in the university which is very important at this stage of their career decision point. In addition, there was a significant increase in the number of students planning to join nursing after participating in the intervention, which is very promising. The career guidance counselors also gave very positive feedback about the intervention and about the effectiveness of the recruitment strategies used. They appreciated the active engagement of the high school students and reported that they received a number of inquiries about nursing after the implementation of the intervention.

According to Rhodes et al. (2006) nursing students acting as ambassadors provide realistic perceptions of nursing and support informed career choices. Using the nursing students as nurse ambassadors in the intervention of this study, provided the high school students with a great opportunity to interact with them and get the chance to experience some clinical skills. They have also been effective in acting as role models and were able to answer the high school students’ questions and clear their misconceptions about the nursing profession. The findings of this study agreed with Rhodes et al. (2006) in that the high school students found interacting with the nursing students and demonstration of nursing skills to be the most effective in improving their knowledge and awareness of nursing. They also perceived interacting with the nursing students, followed by demonstration of nursing skills to be most effective in encouraging them to join the nursing profession and found them both very enjoyable. This supports findings by Somers et al. (2010) indicating that the majority of nursing students become aware of nursing and learn about the profession through nurses or through contact with nurses in clinical settings who are caring for friends or loved ones. Arranging real hospital work experiences and recruitment campaigns; which were identified by the literature as important recruitment strategies (Chapter 7), was not possible in this study considering the large number of students and their cultural backgrounds. However, using the nursing students to act as role models and provide the high school students with a sense about nurses’ work was very effective in this study.
The career guidance counselors reported that the involvement of nursing students helped transfer their experience with nursing education and practice to the high school students, clarifying the demands and requirements of the nursing career as well as having the nursing students reflect on the different activities they do in the university.

Based on the assumptions of King et al. (2007), students may have already formed their opinions regarding nursing by the time they are in high school, through the persistence of stereotyping and outdated images of nursing in the media, which was also identified by the NCCM as one of the strong extrinsic factors affecting career choices in Bahrain. In realizing the vital role of the media in shaping the image of nursing (Chapter 5), this study sought the employment of the media in its recruitment intervention to be crucial. One of the unique aspects of this study was the production of a high quality recruitment video that mirrored the nursing profession in Bahrain. The “Nursing Career in Bahrain” video was produced with the hope to better inform and inspire potential students. The video was an attempt to present Bahraini nurses and nursing roles in more realistic portrayals, compared to the medical dramas and other YouTube videos the students appeared to view. There was no doubt that the use of the video was going to make a difference with the high school students, considering the impact of films, videos and programmes presented on television and the Internet.

In addition to finding it enjoyable, the high school students perceived the video to be very influential in improving their knowledge and awareness about nursing. They also found the video to be very effective in changing their experience with nurses and their desire to join a career in nursing. The career guidance counselors also rated the video as one of the most effective strategies in improving the high school students awareness about nursing and influencing their desire to consider nursing as a career. Based on Donelan et al. (2008), people who watched television shows about nurses, are more aware of nurse shortages and hold nurses in high esteem. Accordingly, the career guidance counselors suggested
using the media more intensively to highlight the positive aspects of the nursing profession and increase the awareness of the community about the importance of nursing for their health and wellbeing.

The literature showed that nurses, as role models, seem to have a very positive influence on students' perceptions of a career in nursing. The students who received their information through talking to a nurse had significantly better and more realistic perceptions than other students who did not (Price, 2009). A good percentage of the high school students in this study found the presentation by the nursing lecturer to be effective in improving their knowledge and awareness, and encouraged them to consider joining nursing. These findings are very important and need to be considered in planning future recruitment strategies. Nurse lecturers can represent role models for the nursing profession and so they can attract more high school students to join nursing. Although the high school students evaluated the “Find Yourself in Nursing” Booklet to be least effective in improving their knowledge and awareness, in changing their desire to join nursing and found it less enjoyable, it is believed that making the booklet available for the high school students and career guidance counselors ensure that schools are provided with valid and accurate information about nursing, which is much better than what they might get from the internet.

The development of this intervention can lay the corner stone for more structured nursing recruitment interventions. Interventions that can be implemented in high schools and other public places where parents and other stakeholders can be targeted.
Chapter 22: NURSING-Positive Recruitment Arabic Model (NURS-P.R.A.M.)

Consistent with mixed methods approach, and the wide range of data collected in this study, a new model has emerged; the NURSING-Positive Recruitment Arabic Model (NURS-P.R.A.M). The model incorporates essential elements which will guide nursing recruitment in the Arabic culture of Bahrain and other similar jurisdictions. One important objective of this PhD thesis is to recommend a strategy and a model to enhance recruitment to nursing as a career choice in Bahrain which has been achieved through the introduction of the NURS-P.R.A.M. This unique model will provide answers to the second research question: ‘What strategies and actions, in terms of best practice, are most effective and should be implemented in order to promote nursing as a career in Bahrain and enhance recruitment to nursing?’

The fundamental belief underpinning the NURS-P.R.A.M., is that models of nursing recruitment, as applied in the West, are limited in that they do not truly acknowledge the uniqueness of Arabic society. Many important factors are presented in the thesis which will guide stakeholders and policy makers, and sensitize effective nursing recruitment to ensure its relevance to the cultural and religious background of Arab populations.

**Representation**

22.1 Philosophical Underpinning

Based on the findings of this study, a best practice model for nursing recruitment of young Arab students is recommended. The best practice model approach NURS-P.R.A.M. is supported by the findings from high school students, and in particular the proposed career guidance implementation strategy (Figure 22.1). Best practice is defined as a technique or methodology that, through experience and research, has proven to reliably lead to a desired outcome (www.whatis.com). The NURS-P.R.A.M. emerged from the notion that, successful nursing recruitment strategies cannot function in isolation of historical misperceptions of nursing, Arab people’s
cultural background, as well as the policies related to health and nursing education. NURS-P.R.A.M. represents an important link between the unique features of the Arab Muslim societies with their cultural views about nursing, caring, nursing education and nursing practice. Because Bahrain has a similar culture and context to other Gulf and Arab countries, it is postulated that the NURS-P.R.A.M. is generalizable to other Arabic countries.

In recognizing the complexity of factors influencing the choice of nursing as a career in the Arab world, the proposed nursing recruitment model is the outcome of an identified need for a more appropriate approach to guide the recruitment of Arabic people to nursing. This model builds on international recruitment strategies, which are tailored to recognize the Arabic cultural dimensions of a successful recruitment model. The underpinning principle of this model is that, international nursing recruitment models cannot be simply imported into the Arab World. To be successful, any nursing recruitment model should provide a culturally congruent framework to support a positive image within the jurisdiction. The problem with international models is that, they lack the application of the cultural aspects related to the Arab societies and the important spiritual beliefs of Islam directly impacting on nursing. NURS-P.R.A.M. is based on a comprehensive knowledge and understanding of the Arab cultural values and context, and uses their Islamic beliefs to guide recruitment into nursing.

The model is built on five imperative pillars (Figure 22.1) for nursing recruitment. It is believed that the recruitment strategies should be built on the positive aspects related to nursing and career guidance. It is also important to put comprehensive structures and plans for effective recruitment strategies, with the stakeholders in mind. These should be sensitive to the cultural and Islamic background of the society. The development of policies that support nursing education and nursing practice are key factors in promoting a positive image for nursing in Arabic societies.
The acronym NURS-P.R.A.M. is used to represent important characteristics of nursing. Pram (P.R.A.M.) carriage for a baby, pushed by an adult and containing an infant that must be nurtured. NURS-P.R.A.M. reflects the dynamic, caring nature of nursing, as well as the consideration of safe and comforting practices. The representation of nurses as the adult pushing the P.R.A.M., reflects the influence of Arabic parents and also the ability of nurses to be autonomous, make decisions about what direction to take, and their capability to control different situations. The adult pushing the NURS-P.R.A.M. also represents wisdom, which may be related to the knowledge and skills that nurses possess. These characteristics are used to direct and drive the (P.R.A.M), which represents the recruitment strategies that aim to support the promotion of nursing as a career in Bahrain. The idea is to move nursing recruitment initiatives from the infancy stage, to a more developed and structured stage.
22.2 Defining Components of the Model

22.2.1 Nursing

Enhancing nursing recruitment will require a review of the impact and influence of government policies on the availability of sponsorships, job vacancies, salaries and clear processes for programme and university admissions and accreditation. To encourage the public of considering nursing as a career, it is important that more supportive nursing education and health care policies are put in place. Based on the findings of this study, there is an obvious need to build career pathways following graduation; such as Clinical Nurse Specialists and Advanced Nurse Practitioners. Rafferty et al. (2015) stated that, considering the increasing demands on the health care services, and changing profile of patients, it is critical to invest in continuing
professional development that is linked with nurses’ career pathways, which should enable the transition from to advanced practice nurses.

**Nursing Education**

There is no doubt that universities and nursing schools have a vital role in supporting initiatives planned for promoting and marketing nursing. With the increasing nursing shortage, it is vital that nursing schools attract and retain students who will be successful in becoming competent, caring practitioners. In a rapidly changing health care system, these future nurses are expected to be independent thinkers, problem solvers, assertive advocates, change agents, clinical decision makers, and leaders. Most importantly, they must be culturally sensitive. For these reasons, it is essential that nursing education institutes find ways to make nursing more attractive to indigenous students, especially those who are high performers. Efforts should be taken by universities to empower nurse educators in encouraging more school leavers to join nursing programmes. Nurse educators can act as role models and as sources for information about nursing. Universities should open their premises as venues for promoting nursing as a career.

The cost of nurse training was perceived as the strongest barrier at attainment of careers in health professions. The participants of this study perceived nursing education as costly and so, continuing to have scholarships for local candidates studying nursing is essential. Nursing institutes need to work closely with hospitals and other stakeholders who might be able to sponsor students to study nursing, to ensure the provision of sufficient scholarships. In addition, there is a critical need to develop new directions to promote post-graduate nursing education in Bahrain. Post-graduate education is necessary to enhance nursing practice and improve the quality of patient care. Having nurses prepared with higher educational qualifications was shown to be associated with lower patient mortality rates (Aiken et al. 2014, El-Jardali et al. 2009).
Nursing Practice

There seems to be an emerging policy of commitment to the recruitment of student nurses locally, with a long-term objective to lessen the dependence on expatriate nurses (Tawash et al., 2012). However, raising the profile of nursing by improving nursing roles and practices is highly important to attract prospective students. The status of nurses and working conditions of nurses has been of great concerns for the public. In such a context, developing clear and firm policies to guard the working conditions of nurses is important. Since nurses are believed to be exposed to dangerous diseases and work in dangerous environment, health policy makers should provide strict policies to protect the well-being of these nurses and promote a safer working environment. In addition, nursing is viewed to have demanding work schedules and to be emotionally and physically challenging. Nurses showed better satisfaction with their job when they had the opportunity to control their workload, pace of work and timing of breaks (Aboshaiqah, 2015). Policy makers need to assess the implementation of new and more creative scheduling schemes in order to attract more local candidates to join nursing.

According to OECD (2013) low nursing wages affect the attractiveness of the profession. Salaries of nurses are considered to be low compared to other occupations like medicine, engineering and law. To improve recruitment into nursing, it is important that the public perceive nursing as a financially rewarding career with job security. Reconsidering the salaries of nurses will not only affect recruitment into nursing, but also the retention of qualified nurses. Health policy makers also need to pay attention to developing clear policies for career progression and clinical career pathways that are attractive to nurses. It was suggested that undergraduate nursing education is viewed as a platform (Lyckhage & Pilhammar, 2008) for future nursing careers.

Knowledge about expanded roles of nurses and opportunities for career advancement, as well as the availability of different areas of specialty in nursing can be very attractive for prospective students to join nursing. Promoting the roles
of nurses as effective health educators, active researchers and university teachers emphasize the perceptions of nurses as making an important contribution to the society. The roles of nurses as leaders and managers, and involving them more in policy decisions related to the nursing profession can also raise the profile of nursing in the community. According to Aarabi et al. (2014) the involvement of nurses in policy making can increase quality of care. Health policies should also empower the implementation of advanced nurses’ roles such as nurse practitioners.

It is also empirical to support the notions that nurses’ autonomy and positive physician-nurse collaboration are important for better patient outcomes. It is important that the public stop looking at nurses as to follow directions from other members of the health team, mainly doctors. Health colleagues, especially medical doctors have the capacity to support a more autonomous and collegial status of the nursing profession. They have an important role in convincing the public that nurses have an equal occupational prestige and status as doctors, rather than lagging behind the medical profession.

22.2.2 Positive

The findings of this study leads to the identification of important areas that can be built on with regards to promoting nursing as a career. These areas are related to the positive images and perceptions of nursing held by the public, the effective role of nursing alumni in promoting nursing, and influencing the young students, as well as the well-structured career guidance systems placed in high schools.

Images and Perceptions of Nursing

It is believed that nursing as caring and humanitarian occupation is very important for keeping the health and well-being of people. Nurses were found to be respected and appreciated by the public. Focusing on the positive will help negate some of the negative perceptions held by the community. There was a general agreement that nursing includes opportunities for males and females, which is very
important. The positive perceptions related to the need for nursing in the labour market and job security are very important starting points.

There was also a consensus that male nurses are needed by the community, to tailor the need for a culturally sensitive nursing care. This is not unique to Arab countries, as it has been evidenced by a recent study in UK that patients’ satisfaction is better, when nursing care is provided by English national educated nurses (Germack, et al., 2015). The researcher proposed that language and cultural differences are associated with patient dissatisfaction with expatriate nurses.

**Nursing Students/Alumni as Ambassadors**

It is proposed that nursing is not easy to describe; a high level of skills and understanding is required to do that. It is believed that engaging school students in activities related to nursing, in which they interact with nurses in non-threatening and informal settings, can provide them with a better insight of what the nursing profession entails and encourage more students to join the profession. Nursing students and alumni can play an important role in promoting nursing, as it was suggested that young people appreciate their questions be answered by those undertaking the nursing course as they believe they can get more honest responses. There is also an identification process among young people with influential relationships. Based on the nursing recruitment intervention implemented in this study, the nursing students proved themselves to be highly influential in raising the awareness of HSS about nursing and encouraging them to consider nursing as a career. It has been evident that experiential knowledge of nursing is a central need for students to gain interest in nursing careers. Simulation is deemed to be acceptable form of providing work experience for school students. Involving the nursing students and alumni in simulating basic skills to school students can be very effective in improving the awareness of the school students about what the work of nurses entail. Both nursing universities and services
should invest in those young nurses to promote more youngsters to join the nursing profession.

**Career Guidance in Schools**
The Ministry of Education in Bahrain and other Arab countries have shown interest in career guidance through different initiatives. Positive initiatives in career counselling needs to embrace nursing. Career guidance counselors have been identified as important influences in high school students’ career decisions. Studies have shown that young children often have many false perceptions about nursing that are not favourable to the selection of nursing as a career choice. Therefore, ensuring that career guidance counselors are sufficiently informed and have realistic perceptions of nursing as a career choice is fundamental. Career guidance provided in schools with regards to nursing can be strengthened through collaboration between career guidance counselors in schools, with nurses and nurse educators. Well-structured programmes focusing on promoting nursing as a career in schools need to be considered as a key to encouraging high calibre students to join nursing; not only in high schools, but from earlier school years, and may be kindergarten.

**22.2.3 Recruitment**
To accomplish effective recruitment strategies, and promote the nursing profession among prospective students, it is essential to acquire an insight into how these students become aware of nursing and understand the underlying motivations to pursue a career in nursing.

**Recruitment Strategies**
It has been evidenced from the study that employing effective strategies to promote nursing is essential to improve the knowledge and awareness of the high school students about nursing as a career. These included presentations/workshops conducted by nurses/nursing students, using videos, visits to hospitals and nursing schools, as well as including nursing as an elective
subject for school children. However, it is important to note that recruitment of high school students, especially those with good academic performance, into nursing requires engagement of key stakeholders. This study suggested that the involvement of students’ parents, friends and career guidance counselors is a key to influencing the choice of high school students of a career in nursing. A number of recruitment strategies proved their importance in this study. These include nursing students as ambassadors for nursing, the use of media, as well as the use of nurses as role models and sources of accurate and realistic information about nursing. The wise involvement of career guidance counselors in schools should be put in consideration, if efforts to encourage more students to join nursing to be effective.

**Recruitment Structures and Plans**

For any recruitment initiatives to be effective, they need to be planned carefully, with the stakeholders in mind. It is very important that nursing schools and hospitals get involved in strategically planning recruitment projects. Universities need to open their campuses as venues, where students can be facilitated to engage in safe experiences related to nursing. The simulation labs can be used to provide an opportunity for the students to have hands on experiences with regard to skills related to nursing. The hospitals can also receive students who are interested in shadowing nurses and observing different nursing procedures.

Universities and Ministries of Health and Education need to combine efforts to develop national strategies for the recruitment of nursing. It was evident from this study that there is a demand for nurses and nurse educators to take a more active role in promoting nursing to school students. The career guidance counselors emphasized the importance for nurses to market their profession and present more accurate and realistic information about nursing. However, for this to happen, nurses need support and commitment by policy makers from both the Ministry of Health and Ministry of Education.
22.2.4 Arabic

Comprehending the cultural constraints in the Middle Eastern countries and recruiting sufficient numbers of local people into nursing present new challenges not experienced by western countries. The situation in the Middle East is unique because the students’ hesitance to join a career in nursing is influenced by strong sociocultural traditions. In trying to attract local candidates to study nursing, the public image of nursing in the Middle East has been of great concern. Being part of a bigger society, individuals tend to associate their views and opinions about different concepts with their society.

Islam, Culture and Nursing

The history of nursing in Islam and the story of Rufaidah Al-Aslamiyyah, the first Muslim nurse provides a clear and important evidence that nursing has always been supported by Islam. Rufaidah was able to establish the first clinic built in a tent in the first mosque in Islam, and set up a training school to train other Muslim women to nurse (Atkinson, 2015). These facts need to be highlighted and further emphasized to strengthen the position and status of nursing in the Arab World.

Cultural practices of Muslim communities are strong and very closely linked to their religious beliefs, so that separating the two can prove difficult. However, the behaviours of Muslims from different parts of the world are often shaped by cultural practices which may not be in concordance with basic religious practices (Rassool, 2014). Muslim communities use cultural practices which are given an Islamic dimension, although they are not Islamic (Saidi, 2008). Culture has been viewed as a great influence on the way nursing is perceived in the Arab world and has a strong impact the choice of nursing as a career, especially for women. Considering that the values of Muslim Arab people oblige them to sacrifice their individual desires to maintain family cohesiveness (Lovering, 2012b), the only way to exhaust the negative influence of culture is by emphasizing and reviving the positive position of nursing in the Muslim religion. Focusing efforts on portraying the bright pictures of nursing during the early era of Islam can be very effective in
changing the cultural images of nursing. Involving religious people to reflect on this aspect may add power to any recruitment strategies.

As culturally, it is preferable that patients are cared for by the same gender. It is important to build on the agreed perception that nursing provides opportunities for both males and females, a finding that is very promising in the area of nursing recruitment. Encouraging more males to join nursing will enable the implementation of a culturally sensitive patient care, which may encourage more families to send their children to study nursing.

**Arab Caring Model: The Crescent of Care**

Within the context of nursing care, Arab Muslim nurses are able to consider their own religion and culture to place their nursing role within the religious and cultural framework of their societies, and this has had a positive impact on the acceptance of nursing as a profession. Indigenous Arab nurses are needed in the nursing taskforce because they are perceived to be more loyal to Islamic principles, and that they are better able to understand the culture and psychology of patients. The history of nursing in Islam grounds the nursing identity in the religious values shared between nurses and patients. In addition, indigenous Muslim nurses are believed to provide nursing care that is based on the Muslim worldview. From this perspective, Lovering (2014) developed a unique nursing model, the Crescent of Care, which is based on the ways in which nurses’ cultural beliefs about health, illness and healing blended with their professional values and care experiences. According to Mebrouk (2008) Islamic values provide the framework for nursing care. The indigenous growth of nursing with an increasing Arab nursing workforce is essential to a culturally sensitive care and enhanced communications with Arabic Muslim patients. Therefore, any efforts to improve the enrolment and retention of Arabic nurses should consider enhancing the socio-cultural values of the nursing profession.
22.2.5 Model

Identifying models who are respected and admired by young Bahraini people and from whom they can take a lead is significantly important to the establishment of a productive national nursing recruitment strategy. In the recruitments context a Model must encompass and accommodate diverse perspectives, which through this study, have been shown to directly influence young persons’ choice of nursing as a career. The model must also command respect, admiration and may also be influential in the young person’s life. This study identified that parents, career guidance counselors, nurses, culture and the media all had influenced the perceptions of students in Bahrain about nursing and their choice of a career in nursing.

Students’ Parents and Significant Others

Existing literature showed that parents, families and friends play significant role in the occupational aspirations and career choices of young adults (Nota et al., 2007). The findings of this study supported the notions that young adults are often hesitant to pursue or even explore career possibilities without their parents’ approval or support. Many parents in the Arab world do not approve nursing for their children for many reasons, amongst which are influenced by culture. It is important to note that the Arab families are tied to strong cultural, religious and societal values, and parents are usually consulted in all decision making processes concerning their children. It is then pivotal that parents are involved in any recruitment strategy targeted to their children.

Nurse Role Models

The findings of this study showed that nurses themselves are a major influencing agent for students’ images of the nursing profession, and hence making their career choice. It is believed that personal interactions with nurses and nurse educators may have a great influence on the choice of nursing. According to the findings of the study, knowing a nurse and having an experience with nurses was effective in improving the awareness of the students about nursing. Nurses were
also considered an important source for information about nursing. In addition, the nurse educator involved in the recruitment intervention was seen to be influential in improving the awareness of students and encouraging them to consider nursing as a career. Other studies have also indicated that students who knew a nurse had more positive attitudes toward nursing and slightly higher intention to pursue nursing as a career (Tawash et al., 2012). The positive effect of having a nursing role model cannot be underestimated. Adolescents tend to idolize successful people, hoping to be like them someday (Al-Kandari & Lew, 2005). Empowering nurses and giving them a bigger role in promoting the recruitment to nursing within their clinical practice should be considered by any recruitment strategies. Practicing Arab nurse role models can reflect a positive acceptance of nursing in the society.

**The Media**

The images of nurses in the media must be of concern to policy makers because of the great influence it may have on the profession. The role of media in the formation of images and perceptions about the nursing profession was evident. The respondents in this study were highly influenced by the portrayals of nurses in the media. They also depended highly on the media as a source of information about nursing. Considering the massive spread of social media, and the amount of time the young generation spend in engaging with it, it is recommended that the media is wisely employed to serve as a strategy for nursing recruitment.

The local mass media needs to be employed effectively to promote the nursing profession in the Arab World. The students’ dependence on the International television programmes, based on western drama, as one of their main sources for information about nursing must be counteracted by positive Arabic nursing campaigns. Locally produced medical television programmes may represent Arabic nurses very positively, and have the potential to reflect the cultural and contextual aspects of nursing in the Middle East, which make nursing role models even more relevant to their own culture.
In conclusion, there is no single best way to improve recruitment into nursing. However, it is imperative to consider ways that can work best for a specific context. The Arab Muslim world is unique with its traditions and the way people view things. Through the NURS-P.R.A.M. model of recruitment, it is believed that nursing recruitment strategies implemented in Arab societies can only be effective if they worked in conjunction with the other two items related to the Islamic views of nursing and caring, and the nursing education and health care policies related to nursing. It is believed that the implementation of the NURS-P.R.A.M. will improve nursing recruitment for both male and female young candidates.

Dissemination and application of NURS-P.R.A.M., as representing the main findings of this PhD thesis is essential, if progress is to be made with nursing recruitment. According to Bradley & McSherry (2010, p.1) dissemination is defined as the “processes by which target groups become aware of, receive and utilize information”. Roy (1999) contended that the purpose of dissemination is to spread wisdom and beliefs. There are many options for dissemination that will be considered by the researcher. Two important initial steps that will be taken to disseminate this model is through journal publication and conference presentations (local, regional and international). This is an effective way to share the model with members of nursing professionals and other health disciplines.

However, it is understandable that dissemination is not just about publication in journals and conference presentations, it is about getting information to the right people in a way that they can envisage and use, and that requires a flexible dissemination strategy. Reports and presentations to nursing and policy makers, as well as funders, will be introduced. Furthermore, lay press (newspapers, television and radio programmes) can be an excellent vehicle for sharing the model with the wider community. Media interviews is an important way to let the public know about scholarly work in nursing and may conjure up the public’s interest in the subject (Hanrahan et al., 2010). Additionally, high school students and career guidance counselors can be reached through presentations in schools.
The findings of the thesis has already impacted nationally and through the PhD candidates associated academic institution a decision has been made to introduce a National Positive Nursing campaign incorporating all stakeholders in Bahrain. Lieutenant General Dr Shaikh Mohammed bin Abdulla Al Khalifa, Chairman Supreme Council for Health has agreed to act as Patron for the nursing campaign.

Summary
The NURS-P.R.A.M discussed in this chapter represent a unique finding of this PhD thesis. It is believed that this model will help ensure that informed choices about joining nursing is made. It is also believed that encouraging positive associations attached to the nursing profession by the society, added to initiating laws of the nursing profession and the standardization in the vocational education, make potential nursing students retain positive notions about nursing. The model propose that collaborative initiatives should be taken to clear misconceptions and improve the numbers of students entering nursing, knowing that attracting more local nurses to join the nursing profession will definitely improve the satisfaction of patients and the quality of care.

This study identified that parents, career guidance counselors, nurses, culture and the media had strongly influenced the perceptions of high school students in Bahrain about nursing and their choice of a career in nursing, and these factors in combination formed the NURS-P.R.A.M. This model encompasses and accommodates diverse perspectives, which through this study, have been shown to directly influence young persons’ choice of nursing as a career.

Natan & Becker (2010) suggested that there is a potential to improve the image of the nursing profession and even raise motivation and encourage people to choose nursing as a life career. Considering the shortage of nursing in Bahrain, and the current difficulty faced by the nursing profession to attract sufficient numbers of potential students, it is extremely urgent that this model is disseminated and that policy makers in Bahrain consider the NURS-P.R.A.M in any future recruitment
initiatives. King et al. (2007) suggested that employing effective strategies for the promotion of nursing as a career to high school students can impact positively on the shortage of nurses. The model is well able to guide successful recruitments into the nursing profession and ensuring lower attrition rates.
Chapter 23: Study Conclusions and Recommendations

23.1 Conclusions

This study is seminal in being the first to report on factors that affect the high school students’ perceptions and choice of nursing as a career in Bahrain. The findings are important in ensuring indigenous nursing developments in the small country of Bahrain and indeed the wider Gulf region. In light of the seriousness of the worldwide nursing shortages, which may have an adverse impact on health systems, recruitment and retention of qualified professional nurses must be an increased priority for many countries of the world. There is growing evidence of the impact of low nursing staffing levels on the quality of patient care. Thus, sustaining a nursing workforce is fundamental to all health care systems, and the quality of patient care, however this depends largely on the ability to recruit more nurses.

Nursing shortage is caused by the lack of policies and adequate planning with regards to recruitment and retention of workforce (El-Jardali et al., 2009). The worldwide nursing shortage and aging nursing workforce highlight the importance of improving the recruitment and retention of new nurses within the health care systems (Tawash & Cowman, 2015). These facts validate the need to increase the number of Bahraini nationals entering nursing, in order to meet future health care needs in Bahrain (Tawash, et al., 2012).

In the past, nursing services and nursing recruitment have proved to be particularly influenced by fluctuations in the labour market. It is likely that changes in work patterns, education and training arrangements, demographic trends, political and socio-economic factors will continue to impact the nursing workforce (Hemsley-Brown & Foskett, 1999a). With the existence of these challenges, comes the need for better skilled, highly educated nurses, possessing different nursing specializations and advanced roles required for the provision of better quality care and services to the community. Nurses of the future will need the ability to lead and transform health services to meet the changing needs of their society and the nursing profession (Dodson, 2015).
In order to secure high quality recruits into nursing, understanding how young people perceive nursing as a career and what would encourage them to join the profession is of critical importance, and may be used to inform future recruitment and retention strategies (Price, 2009). The uniqueness of this study is that it introduced two models; the Nursing Career Choice Model (NCCM) and the NURS-P.R.A.M. These two models provide guidance and creative strategies to promote nursing recruitment in the Arab world.

Improving the image of nursing is fundamental to successful recruitment patterns. The current shortfall in the number individuals who are pursuing a career in nursing compared with the increasing numbers of those leaving the profession suggests that a positive image of nursing needs to be encouraged by nurse education and the general community in order to attract more individuals to the nursing profession (Tawash et al., 2012). At present, in Bahrain there are 4 nurses per 1,000 population compared to the Organization for OECD average of 8.7 (Tawash & Cowman, 2015). With the current numbers of students interested in nursing, it will be impossible to reach this target. The findings of this study indicated that, although the students expressed positive perceptions about nursing, this was not matched with a desire to become nurses themselves. Career desirability involves more than reinforcing positive perceptions towards nursing. Nursing needs to be made very attractive to young candidates of high calibre in order to improve the quality of patient care and promote a more positive profile of nurses.

Research has proved that young people are attracted mostly by careers that are known to have high status, and which provide them with more opportunities for career progression (Hemsley-Brown & Foskett, 1999b). Young students seemed to emphasize the physical demands of nursing without acknowledging the intellectual aspects of the profession. It is time that the role of nurses becomes more visible to the general public, as the invisibility of the knowledge, skills and decision making components of the nursing profession will continue to contribute to the perceived
lack of status of nursing in Bahrain and the Middle East. It is important to highlight that nurses are no longer apprentices and that they are highly qualified and capable for taking responsibility for more autonomous roles. Applying the principles related to the shared governance model (SGM) is one of the strategies that have been advocated by recent research to empower nurses and improve their satisfaction. This model is believed to promote organizational effectiveness by empowering nurses with decision making and accountability for their practice (Shwaihet & Nasaif, 2015). Nurse leaders need to show a more active role in driving the nursing agenda and make sure that the nursing profession keep its voice to encourage changes that have positive impact on nursing and patient care (Dodson, 2015).

High school students’ perceptions can both contribute to and prevent the possibilities of becoming a professional nurse, which makes it essential that Bahrain and other GCC countries ensure a well-informed, best practice and positive nursing recruitment strategy. The model of best practice for recruiting Arab Muslim nurses presented by this study, is a unique and ambitious example of helping address the current and projected future nursing shortage in Bahrain and other GCC countries. According to Matutina (2008) because high school students reject many careers based on early perceptions, efforts to enhance positive perceptions about nursing must be taken from early school years. Hoke (2006) warned that nursing may not be considered without well-organized recruitment efforts in place. Neilson & McNally (2013) found that even though students rated nursing as second most important of the health professions, these students were still not encouraged to pursue nursing as a career choice. The work of Sand-Jecklin & Schaffer (2006) elevates the importance of this study, when they pointed out that students’ perceptions of nursing upon entry into a nursing education programme may provide clues about their decisions to remain in nursing.

It is also empirical to note that, successful strategies to retain nurses are believed to facilitate the recruitment of future nurses. To improve the retention of nurses,
there is a need for greater awareness and understanding by health policy makers and members of the profession of the barriers that nurses face and how these barriers have an impact on both male and female nurses in the profession (Tawash, et al., 2012). The working conditions of nursing needs to be reviewed to promote an environment that supports professional collegiality and enhance the quality of nursing practice. Health organizations need to enhance a culture that values the contribution of nurses. According to Buchan & Aiken (2008) poor incentive structures and inadequate career support were considered important causes for the nursing shortages.

Like other professions, nursing is shaped by external factors because it exists as part of the society it serves (Grehan, 2014). In Bahrain, nursing has traditionally not been an attractive, and at worst has been an unacceptable, career option. The perceptions of Bahraini people of nursing may be grounded in strong cultural influences (Tawash & Cowman, 2015). It is time that nurses make a move from the position of being aware about the forces that shape the images of nursing, to one of more positive action (Darbyshire, 2014). The respondents of this study claimed that nursing is not very well accepted socially however, it was suggested that building on the history of nursing as a respected occupation in Islam may serve as a driving force in developing a strategy to reinforce the public views about nursing in society. In addition, any efforts to improve the enrolment and retention of Bahraini nurses should consider enhancing the social values of the nursing profession. Only by positively addressing the culturally sensitive boundaries of nursing in Bahrain and the gulf can we reassure and inform communities and support the indigenous growth of nursing among nationals from the gulf region (Tawash et al., 2012). Considering the large numbers of females in the nursing taskforce, health policy makers need to focus efforts to provide balance between nursing roles and family responsibilities, which may improve the image of nursing.

Furthermore, increasing the number of male nurses is important in meeting health care needs (O’Lynn, 2007b). Compared to other professions, the numbers of male
nurses are still falling below the desirable levels (Cash, 2015). Males continue to be difficult to attract to nursing and a particular emphasis should be placed on identifying strategies to recruit them. Establishing gender balance within the nursing profession is critical to the maintenance of power relations and the formation of a more positive identity in nursing (Speedy, 2014). Noteworthy, culturally, in Bahrain and the Arab world it is more acceptable for male patients to be taken care of by male nurses, and the notion of females providing care and services to male patients is developing, however it remains fragile (Tawash & Cowman, 2015). As was evidenced by this study, males are more likely to choose a career based on anticipated financial rewards. It is important that nursing salaries are increased to meet the expectations of prospective male candidates. Based on the findings of this study, there was a general consensus that nurses were generally low payed. Although the respondents could not identify what salary nurses take, most probably they have concluded that nurses are not paid well because of the recent ask for higher salaries represented by the local and international media.

It was apparent that the media act as one of the biggest influences on students and general public's perceptions of nursing. More emphasis needs to be put on producing documentaries, which are informative and provide a far more accurate reflection of what nursing really is (Harrison, 2015). According to Daly et al. (2014) nursing and nurses have been subject to myths and misconceptions more than any other professional groups. The media frequently represented nurses in the role of helpers to physicians, which influenced the ways in which nurses are perceived by the public and nurses themselves. Nursing is often portrayed as females’ work, which create a deterrent that inhibits recruitment of males into the profession (Daly et al., 2014). It is pivotal that recruitment efforts are taken to challenge all stereotypes that aids promotion of low status of nursing and worsen gender imbalances in the nursing workforce.
It is hoped that this study will influence health policy initiatives and interventions in both the education and health service sectors, as the study provides an insight of the challenges facing the creation of an indigenous nursing workforce, and recommends strategies to overcome them. A strong nursing profession is central to the future development of health services in Bahrain with less reliance on expatriate nurses and an increase in Bahraini nurses. The results of our study provide valuable insights to health policy makers and strategists (Tawash et al., 2012). It is essential to highlight that failure to positively respond to nursing shortage will lead to failure of health care.

23.2 Recommendations
Given the current international nursing shortage, it is incumbent on nursing educators, clinicians and employers to work together to adopt new and creative strategies that can be employed to combat unfounded negative perceptions of nursing which may exist (Tawash et al., 2012). There is a need for a strategic approach in managing and directing nursing recruitment drives in high schools coupled with ongoing nursing research on nursing careers and improvement of the nursing working conditions (Tawash & Cowman, 2015). This findings of this study provides a significant evidence and foundations for change in nursing recruitment policy.

Recommendations for Nursing Promotion

- Empower the role of nursing alumni and senior nursing students as ambassadors of nursing in nursing recruitment campaigns.
- Nursing work experience should be introduced as an elective course in high schools with deadlines and responsibilities, like other classes. These courses should be planned and monitored by nurse educators, while implemented by school nurses with the support of nurse alumni.
- Media including TV and radio should be used to enhance positive images of nursing and improve the general public perceptions about the profession.
Nurses should be actively involved in presenting accurate and adequate portrayals of nursing in the media.

- Mini Nursing School provided by Universities for senior High School Students. In these schools, will have opportunities to interact with nursing role models and gain more knowledge and awareness about the nursing profession.
- Nurse educators must work more closely with career guidance counselors and school nurses in high schools to develop materials that portray positive nursing perceptions and role models for students who are potential candidates for nursing education.
- Invite career guidance counselors to University Schools of Nursing, where they can attend purpose built nursing programmes aimed at enhancing their understanding of nursing entry, selection, and the role and career of the nurse.
- School of Nursing in association with schools and career guidance counselors should provide information sessions on nursing for parents.
- Specific recruitment campaigns targeted to recruit male students, using existing male nurses as role models.
- Development of fit for purpose developed nursing promotion materials, including DVD, brochures, TV advertising. These materials must be displayed on University websites.
- Use of Social Media in targeted recruitment campaigns to ensure a wider range of the population is reached.
- Universities must increase their efforts to disseminate nursing promotion materials and attend career fairs as appropriate.

**Recommendations for the Nursing Profession and Policy Makers**

- Workplace empowerment of nurses needs to be embraced by the health services employers, so as to enhance working conditions that promote work effectiveness, positive work attitudes and better staff satisfaction. In health
care environments mechanisms need to be put in place to ensure that nurses enjoy greater appreciation and respect by physicians and the administrative team.

- Plans for the enhancement and further development of nursing leadership is essential to strengthening the nursing profession and increasing the scope of nursing practice.
- Establish a National Nursing Select Committee to examine and make recommendations on the future of the nursing education, practice and management.
- Review nurses’ salaries, and conditions with an international benchmark.
- Nurses need to become more active participants in health and nursing policy-making and planning. They need to be empowered for more autonomy in decision making.
- Career pathways in clinical nursing including Clinical Nurse Specialist and Advanced Nurse Practitioner need to be established.

**Recommendations for further Research**

- Joint and comparable studies of Western and Arab cohorts of nurses to determine specific differences and similarities.
- Follow up research on the Nursing Recruitment Intervention implemented in this study, to evaluate its effectiveness on larger groups of students.
- Investigate the motivations and barriers impacting on the recruitment of males to nursing in Bahrain is recommended as a positive action in terms of improving the perceptions of males and inspire their decisions to join nursing.
- Study the influence of the appearance of nurses in white uniforms in shaping their perceptions of nurse professionalism.
23.3 Study Limitations

There are a number of study limitations;

- The use of a pretest-posttest quasi experimental design to evaluate the nursing recruitment intervention was not ideal, considering the limitations of the design in lacking control and randomization.
- The study conducted one focus group interview for the HSS parents only. Conducting more than one focus group could have added additional perspectives to the findings of the study and could have uncovered new dimensions.
- There are two University Schools of Nursing in Bahrain and students from only one school were used in the perceptions of nursing students’ element of the study. The inclusion of the other nursing students from the government school might have strengthened the findings. However, as there is only two schools of nursing in Bahrain the results may be reflective of other student attitudes, given that the nursing students from the two nursing schools share similar demographics and cultural backgrounds.
- Implementing the nursing recruitment intervention to three schools only, resulted in a relatively small sample size that did not allow testing whether the improved desire of participants to join nursing was directly related to improvement in their knowledge and awareness after the recruitment intervention.
- Using a control group of HSS to compare with the participants in the nursing recruitment intervention could have supported the findings related to the effectiveness of the intervention.
- The focus group interviews conducted for the nursing students consisted of a relatively large number of students (more than 10 students in each).
- The inclusion of a cohort of students from another jurisdiction outside of Bahrain would have provided further enriching insights into Arabic nursing perspectives.
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APPENDICES
Appendix 1: Publications Arising from the Research

Publication 1: A Triangulation study: Bahraini nursing students’ perceptions of nursing as a career

Tawash Eman, Cowman Seamus, Annunciation Edgar

Abstract

**Background:** There is a broad international literature examining the perceptions, experiences and values of nursing students with very little investigative work from the Gulf region and no published work on the perceptions of student nurses from Bahrain. The literature shows that students have a wide range of pre-existing perceptions about nursing and that those early perceptions have a profound influence on their decision to continue with their nursing studies. Historically, in a context of migration, Bahrain has been attractive to expatriate nurses and this has created an overreliance on external manpower which leads to the detriment of developing an indigenous nursing profession. This study aims to identify the perceptions and experiences of student nurses in Bahrain about nursing as a career choice and generate an understanding of the factors influencing recruitment to nursing from the Bahraini population.

**Methods:** A triangulation research design engaging quantitative and qualitative data collection methods was used in the study. Data were obtained through student nurses’ written reflections, self-reporting questionnaires and focus groups collected during their nursing programme. The study participants were the first ever cohort of 38 Bahraini nursing students attending the first private University in Bahrain where the study took place. Qualitative data was analysed using Collaizzi’s methodology and quantitative data was analysed using SPSS Version 17.

**Results:** The participants perceived nursing as caring, helping people and a humanitarian job. Nursing was considered to be a tough job and not well accepted socially with cultural issues impacting on the values attached to nursing as a career choice. Participants prior to entering nursing used the internet as the most potent source of information and they were also motivated by their parents and friends to join nursing. Participants stated their commitment to a nursing career, and their plans to continue with participation in higher education.

**Conclusions:** Some of the issues raised in the study are reflective of the international literature; however there are fundamental issues particular to the Gulf region, which will require attention in a context of an overall national nursing recruitment strategy.

**Key words:** Undergraduate nursing students, Middle-eastern nursing perceptions, Culture, Recruitment strategies, Bahrain
1 Introduction

The worldwide shortage of nurses has focused political and professional discourse on the current shortfall in the number of individuals who are pursuing nursing as a career and those who are leaving the profession. Such trends have serious implications for the health care industry as a whole. To attract more individuals to the profession, a positive image of nursing needs to be engendered by nurse education and the general community. The projection of a positive image of nurses and nursing has been a principal concern of the profession with resultant changes through the creation of a graduate profession in many jurisdictions and efforts to enhance the clinical nursing career pathway.

The experiences and concerns of nursing students is a constant theme in the professional press and consume many hours of deliberation in Schools of Nursing. The student nurse issues are multiple and include trying to survive on a meagre bursary and difficulty with finding employment at the end of training. It therefore would appear that dedication and altruism in caring for people are not the only considerations.

We have a general understanding of the issues associated with student nurses in the west; however there is little appreciation of the issues that affect a steadily increasing number of nationals from the gulf region entering the nursing profession. In that regard this study is significant as it will place the perceptions of a cohort of Bahraini student nurses in a context of the international literature. The study was located in a new University in Bahrain established in 2004, which was the first independent college to undertake the undergraduate and postgraduate education and training of nurses. The establishment of an undergraduate nursing programme by a private western university in September 2006 represented an important opportunity for Bahraini persons to enter nursing. This study reports on the perceptions of the first cohort of student nurses recruited to the university. In order to ensure a rich data source encompassing quantitative and qualitative data, a methodological triangulation research design was utilized.

1.1 Context of the study

The Kingdom of Bahrain is a small island country with a population of just over 1 million inhabitants [1] and is located near the southern shores of the Arabian Gulf. At the beginning of the 20th century, Bahrain was one of the first countries in the gulf region to initiate formal health services. However, nursing as a profession only became visible in 1931 when the first qualified nurse, Indian educated, was appointed to work in Bahrain [2]. The first nursing school in the Arabian Gulf was officially inaugurated in Bahrain in October 1959 offering a 4 year training programme. In the 1970s Bahraini nurses were sent abroad to obtain specialization in areas of nursing practice [3].
With the development of health services in Bahrain in the 1960s, there was a requirement for more qualified nurses. The increasing number of nurses and the need for quality assurance in 1987 gave rise to the publication of ‘The Regulation of Practicing Nursing and Midwifery’ [3].

In 1991 the Bahrain Nursing Society was established with an aim to develop the nursing profession and to make recommendations on strategies and policies to regulate nursing practice.

1.2 Nursing regulation

The Ministry of Health (MOH) in Bahrain is responsible for planning and providing health services with limited but growing participation from the private sectors. The Office of Licensure and Registration within the MOH is responsible for regulation, licensing and re-licensing, accreditation and other issues related to the regulation of health professions including nursing [4].

Based on the Gulf Cooperation Council (GCC) regulations, Bahrain has enacted a policy that regulates the registration and licensure of nurses and midwives. Although the policy is enacted as part of an umbrella law covering the allied health professions, nursing and midwifery, each profession had its own implementing resolution [5]. In 2002, the Office of Licensure and Registration in collaboration with Bahrain Nursing Society developed the national code of professional conduct for nurses.

1.3 Nursing shortages

According to the most recent Bahrain health statistics, the number of registered nurses in Bahrain is 2,655 and 1,328 are Bahraini nationals [6], while the need is for 4,000 more nurses [7]. It has been reported that, in Bahrain there are 550 nurses for every 100,000 people [4]. Bahrain health services require further nurses if the country is to fulfil the World Health Organization’s parameters [7].

The International Council of Nurses [8] identified that every geographic area of the world is short of nurses. Health policy experts predict that the current shortage of nurses will persist and perhaps even deteriorate during the next 30 years and one of the most important reasons for the shortage is that very few young people are choosing nursing as a career.

The 2001 World Health Assembly Resolution on Nursing and Midwifery acknowledged the critical shortage of nurses and the key role that nurses play in health care, and called for the World Health Organization to assist countries in optimizing their contribution to solve this problem [9].

1.4 Nursing recruitment

Nurse migration is a global phenomenon with a dominant pattern of nurse migration from low-income to middle and high-income countries. Over the years the driving forces behind nurse migration has
challenged nursing employers and focused the attention of international organizations such as the International Council of Nurses \[10\] and the World Health Organization \[11\]. Internationally, the current rates of migration are difficult to accurately assess. However, the link between economic conditions in a country and ‘push and pull’ factors \[12\] in migration is clear.

Bahrain continues to be attractive to expatriate nurses and this has created an overreliance on external manpower which leads to the detriment of developing an indigenous nursing profession. Over the years, nursing recruitment initiatives have been undertaken in many countries of the world to meet the demand for nurses in Bahrain. Today, there continues to be high dependence on expatriate nurses to maintain the health services of Bahrain. From an observer point of view, there seems to be an emerging policy of commitment to the development of undergraduate nursing education in Bahrain and the recruitment of student nurses with a long-term objective to lessen the dependence on expatriate nurses.

The establishment of an undergraduate nursing programme by a private western university in September 2006 represented an important opportunity for Bahraini persons to enter nursing. The University which was established in Bahrain in 2004 became the first independent college to undertake the undergraduate and postgraduate education and training of nurses.

It is an objective of the University to attract the highest calibre candidates to study nursing and this was reflected during the promotional and recruitment campaigns in Bahrain. In order to build a valid and reliable process which enhances nursing recruitment in Bahrain, an understanding of the perspectives of the first group of students about nursing is important.

1.5 Cultural perspectives

In attracting local candidates to study nursing, the public image of nursing in the Middle East has been of great concern. It has been suggested anecdotally that the perceptions of Bahraini people about nursing may be grounded in strong cultural influences.

In the Eastern Mediterranean Region, the role of nurses was traditionally part of the role of women, but only for their own families. To take up nursing as a career, girls required education and training, for which there were limited opportunities. Generally, nursing schools were perceived as simply training students to carry out physicians’ orders \[13\]. In addition, in most Arab countries, nursing has been generally restricted to the area of maternal care provided by dayas (the ancient sisterhood of midwives) \[14\].

Within the Middle Eastern region, it has been reported by the WHO \[5\] that despite the great progressive developments in both nursing practice and education, nurses were not involved in policy
decisions related to the nursing profession. According to WHO [5], this may be attributed to work undertaken by a predominantly female work force: low pay, low status, poor working conditions and few opportunities for promotion.

In Bahrain, nursing has traditionally been an unacceptable career option, and few females studied professional nursing. At present, there is increasing recognition that nursing has become a career opportunity. Yet it would appear that families in Bahrain may be influencing their daughters not to enter nursing because they perceive nursing as an unsuitable profession for girls. Observations made about the public image of nursing in Bahrain suggest nursing is perceived as a low paying, low status job involving much hard and unpleasant work. There is also anecdotal evidence that, culturally, it is not appropriate for females to take care of male patients. Socially, working shift duty presents problems for females, considering their responsibilities as wives and mothers.

For many years, Bahrain has taken several initiatives to make the profession attractive for Bahraini males and females. Despite the cultural issues, the majority of nurses in Bahrain are female. In 2008, there were 149 male nurses compared to 1,179 female nurses [6].

Since newly graduated nurses are a key resource for addressing the nursing shortage [13], it is essential to influence the public image of the nursing profession as a means of encouraging young people in Bahrain to enter the nursing profession. To this end, understanding the perceptions of Bahraini nursing students is essential.

1.6 International perspective

Noteworthy, the international literature shows that early perceptions of students have a profound influence on their decision as to whether continue with their nursing studies, and students frequently make decisions to leave nursing against the wishes or without the support from their school or family [15].

Students have a wide range of pre-existing perceptions about nursing. A study of 1000 American nursing students reported that students believed nursing to be physically challenging and that there is inadequate respect and recognition of nursing [16]. Other studies reported that nursing students recognize nursing as a caring profession and as an opportunity to help people gain a better health [17-20]. Nursing students also viewed nursing as a noble and well-regarded career path [21] and one which requires strength, patience and compassion [15, 22].

Apart from the traditional perception of nursing as caring, a longitudinal study that examined nursing students' perceptions of nursing showed that students considered nursing as a profession based on
scientific knowledge and requires expertise in nursing and responsibility. They also viewed nursing as a 'medical-technical' activity [23].

Sand-Jecklin and Schaffer [19] added that students most frequently reported choosing nursing because of the availability of career opportunities, jobs security, salary, and interest in nursing. In their study, students identified pursuing further education as a career goal followed by 'doing one's best in nursing'. Another study showed that students choose to study nursing because it offered work abroad and opportunities for further professional development [24]. The influence of role models in choosing nursing as a career was also reported [19]. A number of studies found that past experiences with illness, working in health care and having family members as nurses were important motives for undertaking nursing [17, 18, 25].

Buerhaus, Donelan, Norman and Dittus [16] identified information and advice from practicing nurses as a factor that positively influenced students' decision to become a nurse. Additionally, friends, parents and other family members had a positive influence on students' perceptions of nursing [16, 24]. Information and career advisers were also found to have influenced students' decisions to become a nurse [16]. Some studies highlighted the role of media and society as factors influencing the choice of nursing as a career [19, 26].

2 Methods
The objectives of this study were to: Identify nursing students' perceptions and experiences of nursing as a career choice. Identify sources the students used to obtain information about nursing and factors motivated them to enrol in the nursing programme.

2.1 Research design
A methodological triangulation research approach involving quantitative and qualitative methods of data collection was considered appropriate, as it is ideally used when studying concepts that have different dimensions. Therefore, the primary purpose in using methodological triangulation was to facilitate investigation of the different dimensions of the research question. Also, the combination of both types of data would ensure richness in the findings [27]. In this study, quantitative data were collected using a self-reporting questionnaire and qualitative data were collected using written reflections and focus groups.

Consistent with a between-method methodological approach, where dissimilar but complementary methods are used to aid convergent validity [27], the researchers developed the content of the questionnaire based on the findings from the written reflections, and similarly devised the questions used in the focus groups based on the findings from the questionnaire.
2.2 Sample
A convenient sample of the first intake of nursing students enrolled in the nursing programme at the University in September 2006 (N=38) participated in this study. The cohort included 5 males and 33 females aged between 18-20 years.

2.3 Data collection and analysis

Three different data collection methods were used at different points in the education programme:

1) Written reflections: During the first year of the programme, participants were asked to reflect on their pre entry and early entry experiences and understandings of nursing.

2) Self-rating questionnaire: Respondents were asked to complete a questionnaire on perceptions and experiences of nursing. Consistent with the principles of triangulation, the questionnaire was developed based on the themes extracted from analysing the written reflections. The instrument consisted of two sections; the first included some demographic details like age, gender and marital status. The second section included five questions and focused on: motivation to study nursing, sources of information about nursing, perceptions of nursing as a career and future career intentions. Participants were given instructions to circle one, two or all appropriate items listed under each question. The items were selected based on the findings from the students’ reflections.

3) Focus group: The research cohort was assigned randomly into two focus groups of 19 students and interviews were conducted in English and tape-recorded. The interview schedule was developed based on the results of the data collection from written reflections and the questionnaire. The focus groups were facilitated by two of the researchers. Before the interviews, the facilitators outlined the procedure and process for the conduct of the focus groups.

Feedback from three experienced nursing experts was obtained to ensure face and content validity of the questionnaire. A pilot test was undertaken and minor modifications were made to the instrument. Using the data collected, a Chronbach’s Alpha was applied to ensure the internal consistency of the questionnaire and was reported 0.79 reliability.

Collaizzi’s [28] methodology was applied to analyse the qualitative data. Using this method, significant statements from the qualitative data were first extracted, meanings from those statements were formulated and clusters of themes were determined. Descriptive statistical analysis of the quantitative data was undertaken using the SPSS version 17.

Ethics approval for the study was obtained from the Research Ethics Committee at the University. Anonymity was assured and no names were written on the questionnaire or the reflection.
assignments. Students’ permission to participate in the study was obtained following detailed explanation of the purpose, methods and expectations of the study and voluntary participation was assured.

3 Analysis and Results

In this study, the researchers collected the initial data from the participants’ written reflections. Content analysis of those reflections was done following Collaizzi’s [28] methodology. The first step was to read all the reflections and extract all the significant statements written by the students. The repeated statements were calculated for the purpose of identifying frequency. The second step involved formulating meanings from the statements and clustering them into different categories. The categories revealed three main themes representing the study objectives:

- Perceptions of nursing
- Information and motivation to study nursing
- Future career intentions

The three themes identified from the reflections were further explored through both, the questionnaire and focus groups. The findings will be presented based on these three themes. Qualitative data produced from the reflections will be discussed first, followed by data from the self-reported questionnaires and finally the focus groups.

3.1 Demographic data

The participants included a total of 38 nursing students; 33 (87%) females and 5 (13%) males with an age range 18 - 20 years (mean age 19, SD = 0.95). All students graduated from government high schools.

3.2 Perceptions of nursing

It was found that most of the participants described nursing as a caring profession and a humanitarian job. Good communication was also identified as one of the characteristics of nursing. It is important to note that respondents believed nursing to be a hard and demanding job, but a minority believed that it required patience. Interestingly, one of the key tenets of good nursing management ‘time management’ was raised through the open comments section ‘It is a challenge for nurses to manage their time’

A minority of the participants perceived nursing to be highly skilled and requiring nurses to be knowledgeable. An important finding was, only a minority of respondents perceived nursing to be enjoyable work to do.
Table 1 provides a summary overview of the participants’ based on the questionnaire. Notably, 84% of respondents indicated that they entered nursing on the basis of nursing as a caring profession and helping other people, with 71% describing nursing as a humanitarian job.

**Table 1. Students’ Perceptions of Nursing as reflected in the questionnaires**

<table>
<thead>
<tr>
<th>Characteristics</th>
<th>Number (Percentage)*</th>
</tr>
</thead>
<tbody>
<tr>
<td>Nursing is a caring profession</td>
<td>32 (84%)</td>
</tr>
<tr>
<td>Nursing a humanitarian job</td>
<td>27 (71%)</td>
</tr>
<tr>
<td>Nursing is a hard job</td>
<td>25 (67%)</td>
</tr>
<tr>
<td>Nurses have good communication with people</td>
<td>21 (56%)</td>
</tr>
<tr>
<td>Nursing requires patience</td>
<td>11 (30%)</td>
</tr>
<tr>
<td>Nurses are highly skilled</td>
<td>9 (24%)</td>
</tr>
<tr>
<td>Nurses are knowledgeable</td>
<td>4 (10%)</td>
</tr>
<tr>
<td>Nursing is an enjoyable job</td>
<td>3 (8%)</td>
</tr>
</tbody>
</table>

*Respondents could select more than one characteristic

As indicated previously the focus group interview schedule was developed out of the results of the reflections and questionnaire. In the focus groups, participants confirmed that nursing is a caring and humanitarian profession with no exceptions. Participants qualified this point by suggesting that nurses have close and personal contact with patients and providing holistic care. Some respondents commented:

‘Nurses stay with patients and look after them throughout their shift’ ‘Nurses not only take care of patients, but also their relatives’

The participants explained what they meant by describing nursing as a hard job by reporting that there are new things to learn every day, it requires being exposed to the human bodies and doing dirty things. It was stated that:

‘Nursing accepts no mistakes as it involves dealing with human life’

Respondents also suggested that nursing is not very well accepted socially, as it is difficult for females bearing children to work shift duty. It was indicated that nurses were faced with stress related to overload of work and have many health problems like backache and varicose veins. A respondent suggested:

‘My aunt is a nurse and she developed varicose veins because of standing throughout her shift’
3.3 Information and motivation

The participants listed in their reflections a variety of sources of information they accessed about nursing, these mainly included the internet, friends and relative nurses. As evidenced by the participants’ responses to the questionnaire, the internet served as an important source of information with 46% having obtained information from the internet. Friends (36%) and relative nurses (24%) were also influential. A minority of participants (12%) acquired information through the media. In using the internet, respondents suggested that chat rooms were helpful. Typically, it was also stated:

‘I talked to my friend who is a nursing student and she told me about nursing’

Table 2 illustrates the factors that motivated the participants to join nursing. In their reflections, participants also highlighted the motivations to study nursing. A majority of respondents (66%) stated that their parents served as the greatest motivation to enter nursing. Many respondents were also motivated by their friends (24%) and relatives who were nurses (15%).

Table 2. Motivating Factors to enter nursing

<table>
<thead>
<tr>
<th>Factors</th>
<th>Number (Percentage)*</th>
</tr>
</thead>
<tbody>
<tr>
<td>Parents</td>
<td>25 (66%)</td>
</tr>
<tr>
<td>Friends</td>
<td>9 (24%)</td>
</tr>
<tr>
<td>Relatives who were nurses</td>
<td>6 (15%)</td>
</tr>
<tr>
<td>Nurses in hospital</td>
<td>3 (8%)</td>
</tr>
<tr>
<td>Self (Childhood dream)</td>
<td>1 (3%)</td>
</tr>
</tbody>
</table>

*Participants could select the two most appropriate factors

In the focus groups, respondents indicated that their parents believed that nursing offered a good job opportunity and the salaries were good. Some parents also thought that nurses help people and they learn many things that are helpful for their personal and social life. The influence of family and personal ambition was clear:

‘My mother always wanted to be a nurse, but she couldn’t and so she wanted me to make her dream becomes true’

‘I chose to study nursing because it was my dream when I was a little girl’

The study also showed that 34% of respondents decided to join nursing on leaving school. They stated that nursing at that time was the best choice compared to other studies available to them, with 29% of respondents making their decision after attending a career day during high school.

3.4 Future intentions

Table 3 outlines the early intentions of respondents in respect to nursing career. Notably further education featured highly with 61% of respondents expressing a desire to do their masters or doctoral
nursing studies after graduation. Other respondents identified a career pathway as nurse supervisors, nurse specialists or continue their career as staff nurses. It is noted that clinical nursing careers do not appear attractive with only 8% selecting staff nurse and 8% selecting to specialize in nursing.

**Table 3.** Intentions of respondents in respect to nursing career

<table>
<thead>
<tr>
<th>Intentions in respect to nursing career</th>
<th>Number (Percentage)</th>
</tr>
</thead>
<tbody>
<tr>
<td>Continue higher education</td>
<td>21 (55%)</td>
</tr>
<tr>
<td>Become a supervisor</td>
<td>9 (24%)</td>
</tr>
<tr>
<td>Work as a staff nurse</td>
<td>3 (8%)</td>
</tr>
<tr>
<td>Specialize in nursing</td>
<td>3 (8%)</td>
</tr>
<tr>
<td>Become a nurse educator</td>
<td>2 (5%)</td>
</tr>
</tbody>
</table>

4 Discussion

The study indicated that, Bahraini nursing students, generally hold positive perceptions of nursing and this is indicative of the international literature, however there are particular issues in terms of culture and tradition that requires consideration.

4.1 Nursing and caring

The majority of respondents in this study perceived nursing as a caring profession and in essence helping people, and this is a strong theme in the literature \[^{17-20}\]. This finding emphasizes the importance of ensuring that caring is not undervalued and is prominent in education programmes as the nursing profession continues to evolve in Bahrain. Consistent with our results, nursing educators have an important role in endorsing the principle that caring for oneself is congruent with caring for others \[^{29}\].

The respondents also described nursing as the provision of holistic care, although it is suggested \[^{30}\] that the delivery of holistic care may be outside the scope of novice practitioners who are likely to struggle with the complexity of holistic care. However O’Brien, Mooney and Glacken \[^{20}\], argue that the provision of caring role models for nursing students in clinical settings may help address this issue. Respondents also recognized nursing as hard work and stressful, which was also identified in previous studies \[^{24}\].

4.2 Nursing and culture

In this study, the impact of society and influence of culture and tradition is strongly reflected in the perceptions of nursing as a career. The respondents claimed that nursing is not very well accepted
socially; however, it was suggested that the strong and positive perception of nursing as caring and helping may serve as a driving force in developing a strategy to reinforce the public views about nursing in society [31].

Whilst the majority of respondents in this study identified the desire to care for others as one important factor for their choice to study nursing, it should be noted that 34% of them had not selected nursing as their first career choice. This finding is not unique to this study as it was also revealed in other studies [17, 20].

The low representation of male students (13%) in the first intake of students (respondents) requires a particular emphasis on recruiting males to nursing. Although the representation of males would be generally reflective of similar international cohorts there are particular issues in a context of Bahrain. Given the sensitivities in terms of culture, religion and gender in a Muslim society, a sufficient number of males in nursing are important in supporting nursing and health policy in Bahrain and in meeting the needs of patients. It has been suggested [20] that media and social influence is important in promoting recruitment of males to nursing. A study of the barriers that impact on recruitment of males to nursing in Bahrain is suggested as a positive action in terms of improving the perception of males in nursing. This point was raised by Al-Kandari and Lew [32] who suggested that encouraging more males to join nursing will help provide more male nurses to care for male clients, thus solve some of the socio-cultural problems encountered by female nurses.

4.3 Motivation and attitudes

Earlier research shows that nursing students’ images of nursing may be traced to relatives who work in health care [33]. This study showed that parents and friends were very powerful motivators for them to join nursing which was congruent with the findings of previous studies [24]. This influence of significant people on students’ perceptions suggests that positive marketing and recruitment strategies through the School of Nursing should target not only the students themselves, but the students’ parents and peers as well.

While the majority of respondents found the internet to be a great source of information about nursing, very few respondents in this study identified other media to be helpful in providing them with information about nursing or to influence their perceptions of nursing, and this finding is consistent with other studies [19]. It is recommended that using the public media to promote and announce nursing developments will impact positively on the nursing profession in Bahrain.

This study also showed that a majority of the respondents reflected a positive attitude towards lifelong learning and they frequently identified pursuing higher education in nursing as a career goal, which
suggests that undergraduate nursing education is viewed by the students as a platform \cite{33} for their future nursing career. The failure of respondents to strongly reflect the desire for clinical career pathways requires much greater discussion and debate on the scope of nursing practice in Bahrain, and is incumbent on policy makers to promote clinical nursing career pathways that are attractive to nurses. Clearly, there are deficits in promoting nursing practice in a professional capacity, and promoting positive public nursing campaigns on the role and scope of nursing practice and contribution to society can be helpful in addressing this deficit.

5 Conclusion

This study is seminal in being the first to report on student nurses' perceptions in Bahrain. The results are important in ensuring indigenous nursing developments in Bahrain. The shortage of nurses is a common problem worldwide \cite{10}, and according to Al-Kandari and Lew \cite{32}, this international shortage will continue unless drastic measures are taken. These facts validate the need to increase the number of Bahraini nationals entering nursing in order to meet future health care needs in Bahrain.

Nursing students’ perceptions can both contribute to and prevent the possibilities of becoming a professional nurse, which makes it essential that Bahrain ensures a well-informed, best practice and positive nursing recruitment strategy. The work of Sand-Jecklin and Schaffer \cite{19} elevates the importance of our study when they pointed out that students’ perceptions of nursing upon entry into a nursing education programme may provide clues about their decisions to remain in nursing.

When educators understand nursing students’ perceptions of nursing before, during and after their education programme, they can be more aware of potential disparities in student’s ideals, expectations and realities of nursing practice \cite{19}.

It is recommended that further research is required to identify whether the perceptions held by this first cohort of Bahraini nursing students represent those of the other general nursing students in Bahrain. To improve the retention of nurses, there is a need for greater awareness and understanding by health policy makers and members of the profession of the barriers that nurses face and how these barriers have an impact on both male and female student nurses in the profession.

Nurse educators should aim to work more closely with high schools to portray a positive perception for students who are potential candidates for nursing education.

6 Relevance to clinical practice

This is a study of nursing students’ perceptions of nursing as a future career and factors that have influenced their choice to study nursing. Having an understanding of the perceptions and future goals
of nursing students may provide information that could be useful in identifying effective strategies to improve recruitment into nursing in Bahrain. In addition, an insight into how the nursing students perceive nursing is important for clinicians, as it provides registered nurses with an understanding of the students’ perspectives and the support they require as they start their clinical practice.

According to this study, the opinions of parents about nursing have influenced career decision making of their children, and so it is imperative to plan recruitment strategies that not alone attract nursing candidates, but also influence the perceptions of parents.

Given the current international nursing shortage, it is incumbent on nursing educators, clinicians and employers to work together to come up with creative strategies that can be employed to combat unfounded negative perceptions of nursing which may exist.

A strong nursing profession is central to the future development of health services in Bahrain with less reliance on expatriate nurses and an increase in Bahraini nurses. The results of our study provide valuable insights to health policy makers and strategists.

There are a number of study limitations. As data was collected at different points during the students’ programme, the study did not examine the effect of the nursing educational programme on changing the nursing students’ perceptions of nursing. Also, the study was located in one educational setting with one cohort of students from the private University, and the inclusion of the other nursing students from the government school would have strengthened the findings.

Acknowledgement

All academic nursing staff from the School of Nursing & Midwifery RCSI-Bahrain, with special thanks to Ms. Naila Zayani for her contributions. The nursing students of the 2006 cohort who volunteered to participate in this study deserve sincere thanks and acknowledgements for their participation.

Conflict of interest

The authors declare that there is no conflict of interest.

Contributions

Study design: SC; data collection and analysis: ET, EA, NZ; and manuscript preparation: ET, SC.

References


Publication 2: Bahraini Nursing Students’ Attitudes; From Student to Nurse: A Longitudinal Research Study

Tawash Eman & Cowman Seamus

Abstract

Nursing manpower in the Middle East is highly dependent on expatriates and this presents a challenge in establishing and sustaining indigenous nursing developments. Understanding the perceptions of local nursing students and nurses joining the profession is essential to successful strategies for recruitment and retention of nurses. In contrast to the west, very little is known about this topic in the Middle East. This article aims to identify the perceptions of a Bahraini cohort of nursing students about nursing as a career choice and how these perceptions may change during the course of a programme of nursing education and one year after graduation as a nurse. A longitudinal research design was employed to study the perceptions of the first intake of nursing students enrolled into a new School of Nursing & Midwifery providing a BSc Nursing Programme; data were collected between 2006 and 2012. A methodological triangulation research approach was used incorporating quantitative and qualitative dimensions. The data collection methods included written reflections, self-administered questionnaires and focus groups. Bahraini nursing students expressed positive perceptions about nursing from their graduate programme years and through the staff nurse year. Observations made about the public image of nursing in Bahrain suggest that nursing is perceived as a low paying, low status job involving excessive hard and unpleasant work. The public perceptions of Bahraini people about nursing may be grounded in strong cultural influences. Any efforts to improve the enrolment and retention of Bahraini nurses should consider enhancing the social values of the nursing profession.

Keywords: perceptions, nursing, Middle Eastern nursing image, nursing students, nurse graduates, nursing in Bahrain, culture.

1. Introduction

Sustaining a nursing workforce is fundamental to all health care systems and the quality of patient care. The worldwide nursing shortages and aging workforce highlight the importance of improving the recruitment and retention of new nurses within the health care systems. The World Health Organization (WHO) [1] reported a shortage of 4.3 million healthcare workers globally and estimated that this figure would increase by 20% over the next two decades. The importance of adequate nursing manpower was highlighted in a recent study by Aiken and colleagues [2] which showed that increasing a nurse work load by one patient increased the likelihood of an inpatient dying within 30 days of admission by 7%.

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There are 2,800 nurses employed in Bahrain, and 50% of them are nationals [3]. In some countries of the Middle East, the expatriate nursing workforce may be as high as 80% [4]. A WHO report [1] declared a world shortage of nurses with a need to increase nurses by 70%. A report on the Gulf Cooperation Council (GCC) Healthcare Challenge 2050 [5] states that 230,000 nurses will be required across the GCC countries. At present, in Bahrain there are 4 nurses per 1,000 population compared to the Organization for Economic Cooperation and Development (OECD) average of 8.7 [5]. Lovering [6] argued the case for the provision of nursing care that is based on the Muslim worldview. Lovering presented a unique nursing model for Arab Muslim care, which was based on nurses’ cultural beliefs and values which supports the case for the indigenous growth of nursing with an increasing Arab nursing workforce.

According to Emehebo [7] the decision to enter nursing, remain in nursing and to advance in a nursing career may be a result of nurses’ perceptions of the profession. The current shortfall of the number of individuals who are pursuing a career in nursing compared with the increasing numbers of those leaving the profession suggests that a positive image of nursing needs to be encouraged by nurse education and the general community in order to attract more individuals to the nursing profession [8].

Studying the perceptions of the nursing students and newly graduated nurses about nursing as a career is very essential as it may give an indication about their plans to remain in the profession. In Bahrain, like in other GCC countries, there is very little research done in this area. This article aims to identify the perceptions of a first cohort of Bahraini nursing students to a newly established school of nursing and midwifery. A particular objective of the study was to explore the perspective of students about nursing as a career choice and how perceptions may change during the course of a programme of nursing education and one year after graduation as a nurse. A longitudinal research design was employed to study the perceptions of the first intake of nursing students enrolled into a new School of Nursing & Midwifery providing a BSc Nursing Programme; data were collected between 2006 and 2012. The study was conducted in two stages, during the programme years of study and one year after graduation and experiencing work as staff nurses. Some elements related to stage 1 of the study have been previously reported [8]. This paper will focus on comparing the two stages and making conclusions about the changes in the participants’ perceptions.

1.1 International Perspectives

The international literature suggests that the image of nursing as perceived by nurses and the public, affects recruitment of new nurses and retention of experienced nurses [9], however, Emeghebo [7] claims that no recent studies have been done on how nurses perceive the profession. Researchers have examined perceptions of students at different points in the educational programmes. Studies
examining students’ perceptions at the beginning of the programme showed that students held idealistic views of the profession, encompassing concepts of caring, nurturing and helping others [8, 10]. After experiencing clinical practice, nursing was perceived in terms of technical tasks, documentations and procedural skills [11].

Prospective nursing studies have investigated and defined changes in students’ perceptions occurring over time [12, 13, 14]. Students’ perceptions of nursing evolved from lay to professional images. Nursing studies suggest that these changes occur as a result of students’ education [7]. Safadi and colleagues [12] studied Jordanian nursing students’ perceptions over 4 years of the nursing programme, and concluded that students’ perceptions progressed from traditional altruistic beliefs to biomedical, technological perceptions. A Changing focus from caring to carrying out procedures was also identified by Pearcy [15] who reported that despite the new trends in nursing that advocate the move away from tasks and routines; holistic care remains a term that is followed by a list of physical tasks with no indications that this term is fully understood by students.

Grainer and Bolan [16] reported a positive image of nursing from first and fourth year students, however, fourth year students had more knowledge of the role of nurses and a realistic perception of the multiple roles and opportunities within nurses. Brodie and colleagues [17] reported that changes in students’ perceptions of nursing were related to the amount of education and clinical experiences to which they were exposed. Emeghbo [7] conducted a qualitative study to explore the perceptions of 13 American nurses’ about their professional image from just prior to entering the profession and at various stages of their career. The results showed that nursing students begin their nursing education with stereotypical, inaccurate images of nursing and that their nursing school experience seems to neutralize any negative images of nursing. The study also showed that positive nursing role-models reinforced nursing students’ beliefs that nursing is a distinguished profession, and notably a survey of registered nurses showed that 36% of the participants stated they would not recommend nursing as a career option for young people [18].

While rich literature about students’ perceptions of nursing is available from the west, very little is known about the perceptions of Arabic nurses.

1.2 Study Aims
The aims of this study were to identify the perceptions and experiences of a Bahraini cohort of nursing students about nursing as a career choice and how these perceptions may change during the course of nursing programme education. A unique and additional objective was to track and identify changes of the cohort one year after graduation as a nurse.
The research questions as stated included: What perceptions do nursing students in Bahrain have about nursing as a career, and do these perceptions change following one year’s experience as a staff nurse?

2. Method

2.1 Study Design
A longitudinal research design was employed and data were collected in two stages between 2006 and 2012; stage 1 focused on determining the nursing students’ perceptions of nursing during their graduate programme, while stage 2 of data collection took place one year following graduation and after the graduates experienced working as hospital staff nurses. Some elements related to stage 1 of the study have been previously reported [8]. This paper will report on the perceptions of nursing during stage 2 (following graduation). The paper will also draw conclusions by comparing both stages.

2.2 Sample/Participants
The research population was the first intake of nursing students enrolled into a new School of Nursing & Midwifery providing a first BSc Nursing Programme in September 2006 (n=38). The entire class of 38 nursing students participated in the study. The cohort was all Bahraini nationals and included 5 (13%) males and 33 (87%) females aged between 18-20 years.

2.3 Data Collection
A methodological triangulation research approach was used incorporating quantitative and qualitative dimensions in order to enrich the findings [19]. The data collection methods included written reflections, self-administered questionnaires and focus groups. Data collection was divided into two stages;
Stage 1: Collection of data from student nurses during their years of participation in the nursing education programme and included three points of data collection:
Year 1 - Written reflections: participants were asked to reflect on their pre-entry and early entry experiences and understandings of nursing.
Year 2 - Self-rating questionnaire: participants were asked to complete a questionnaire on perceptions and experiences of nursing. The questionnaire was developed based on the themes extracted from analysing the written reflections (Year 1).
Year 3 - Focus group: the participants were assigned randomly into two focus groups of 19 students and interviews were conducted in English and tape-recorded. The interview schedule for the focus groups was developed based on the results of the data collection from written reflections and the questionnaire.
Stage 2: This stage of data collection occurred one year after graduation as a staff nurse. A self-administered questionnaire which was adapted from Anderson [20] was used. The questionnaire was
divided into two main sections; section 1 covered the demographic data related to the graduates. Section 2 included four questions and focused on graduates’ perceptions of the nursing profession, their career intentions and their satisfaction with the career decision they made after one year of working as a staff nurse.

The nursing graduates were asked to rate their perceptions of nursing on a 4 point Likert Scale: (1) meant strongly disagree, (2) disagree, (3) agree and (4) strongly agree. The 19 items of this section were grouped into 4 categories; perceptions of nursing education and career potential, nursing professionalism, socioeconomic status of nurses and nursing working conditions. Following coding, entry of data into SPSS, review and checking was undertaken. The scores related to the negative items on the questionnaire were reversed during computer analysis. Simple descriptive statistical analysis of the quantitative data was undertaken.

**2.4 Validity and reliability**

Content and face validity of the instruments was undertaken through peer review by experienced academics and clinical nursing experts. Pilot tests were undertaken and minor modifications were made to the instruments accordingly. Cronbach’s Alpha reported a reliability of 0.79 for stage 1 instrument and 0.72 for stage 2 instrument.

**2.5 Ethical Consideration**

Ethics approval for the study was obtained from the University Ethics Committee. Anonymity of the participants was assured throughout the study and no names were written on the questionnaires or the other data collection documents. Students’ permission to participate in the study was obtained following detailed explanation of the purpose, methods and expectations of the study and voluntary participation was assured.

**3. Results**

The perceptions of nursing students during the nursing education programme were reported in an earlier study [8]. In this paper, the main focus of data reporting will be the perceptions and experiences of the participants one year after graduation (stage 2). This data will be compared with the data collected from participants during the education programme (stage 1). SPSS version 21 was used to analyze quantitative data and Collaizzi’s [21] methodology was applied to analyze the qualitative data. Collaizzi’s method included extracting significant statements from the qualitative data, formulating meanings from those statements and finally determining clusters of themes.
3.1 Demographic characteristics
Thirty two participants graduated, but only 30 progressed to staff nurse and they were invited to participate in stage 2 of the study (graduates). A total of 28 graduate students responded (93%). The participants included 93% (n=26) females and 7% (n=2) males, and the age was 22 - 24 years from which 79% (n=22) were single and 21% (n=6) were married.

3.2 One year after nurse graduation
During the data analysis of the findings, a point which is above the mid-point of the 4 point scale used in the self-administered questionnaire was considered positive by the researchers, so a mean of 2.5 and above was considered a positive perception and a mean of 2.4 and below was considered a negative perception. It was identified that “nursing education and career potential” (mean 3.23, SD 0.43) and “nursing professionalism” (mean 3.17, SD 0.46) were the two most highly perceived categories. Participants’ perceptions related to the “working conditions” of nurses were the lowest rated category (mean 1.91, SD 0.36).

3.3 Nursing education and career potential
Table 1. Nursing education and career potentials (n=28)

<table>
<thead>
<tr>
<th></th>
<th>Mean</th>
<th>SD</th>
</tr>
</thead>
<tbody>
<tr>
<td>Nurses follow directions from other people</td>
<td>2.39</td>
<td>0.74</td>
</tr>
<tr>
<td>Nurses are active in health care research</td>
<td>2.86</td>
<td>0.85</td>
</tr>
<tr>
<td>Nurses are well educated</td>
<td>3.36</td>
<td>0.62</td>
</tr>
<tr>
<td>Nurses are effective teachers</td>
<td>3.36</td>
<td>0.62</td>
</tr>
<tr>
<td>There are opportunities in nursing for men and women</td>
<td>3.43</td>
<td>0.63</td>
</tr>
<tr>
<td>Nurses are team members with physicians and others</td>
<td>3.75</td>
<td>0.65</td>
</tr>
</tbody>
</table>

The participants viewed nurses as team members with physicians and other health care providers (mean 3.75, SD 0.65). They also viewed nursing as having opportunities for both males and females (mean 3.43, SD 0.63). Noteworthy, the participants rejected the idea of nurses following directions from other health care workers (mean 2.39, SD 0.74) which was the lowest rated item (Table 1).
3.4 Nursing professionalism

Table 2. Nursing professionalism (n=28)

<table>
<thead>
<tr>
<th></th>
<th>Mean</th>
<th>SD</th>
</tr>
</thead>
<tbody>
<tr>
<td>Nurses lack control of their own practice</td>
<td>1.96</td>
<td>0.79</td>
</tr>
<tr>
<td>Nursing is an autonomous profession</td>
<td>2.68</td>
<td>0.82</td>
</tr>
<tr>
<td>Nurses are powerful people</td>
<td>3.07</td>
<td>0.90</td>
</tr>
<tr>
<td>Nurses are important when you are sick</td>
<td>3.36</td>
<td>0.73</td>
</tr>
<tr>
<td>Nursing is a caring profession</td>
<td>3.71</td>
<td>0.53</td>
</tr>
</tbody>
</table>

The caring aspect of nursing was highly rated as reflected in the two items; nursing is a caring profession (mean 3.71, SD 0.53) and nurses are important when you are sick (mean 3.36, SD 0.73). Noteworthy the participants rated nurses as lacking control (mean 1.96 SD 0.79) and as autonomous professionals (mean 2.68, SD 0.82) as the two lowest items, although they viewed them as powerful people (mean 3.07, SD 0.90) (Table 2).

3.5 Socioeconomic status of nurses

Table 3. Socioeconomic status of nursing (n=28)

<table>
<thead>
<tr>
<th></th>
<th>Mean</th>
<th>SD</th>
</tr>
</thead>
<tbody>
<tr>
<td>Nursing offers high pay</td>
<td>2.39</td>
<td>1.03</td>
</tr>
<tr>
<td>Nursing offers job security</td>
<td>2.57</td>
<td>0.84</td>
</tr>
<tr>
<td>Nursing is a high prestige occupation</td>
<td>2.61</td>
<td>0.79</td>
</tr>
<tr>
<td>Nurses are important when it comes to keeping people well</td>
<td>3.50</td>
<td>0.58</td>
</tr>
</tbody>
</table>

The importance of nurses in keeping people well was rated highest by the participants (mean 3.50, SD 0.58). It was also interesting to find that although the participants perceived nursing to offer job security (mean 2.57, SD 0.84), they did not agree that nurses were highly paid (mean 2.39, SD 1.03) (Table 3).
3.6 Working conditions for Nursing

Table 4. Working conditions for nursing (n=28)

<table>
<thead>
<tr>
<th></th>
<th>Mean</th>
<th>SD</th>
</tr>
</thead>
<tbody>
<tr>
<td>Nurses are exposed to dangerous diseases</td>
<td>1.14</td>
<td>0.45</td>
</tr>
<tr>
<td>Sometimes nurses have to perform unpleasant tasks to care for their patients</td>
<td>1.75</td>
<td>0.65</td>
</tr>
<tr>
<td>Nurses work in dangerous environment</td>
<td>1.75</td>
<td>0.70</td>
</tr>
<tr>
<td>Nursing includes much technical work</td>
<td>3.00</td>
<td>0.54</td>
</tr>
</tbody>
</table>

Participants rated working conditions as the lowest category. Nurses were perceived to be exposed to dangerous diseases (mean 1.14, SD 0.45) and the working environment to be dangerous (mean 1.75, SD 0.70). The participants also negatively perceived the fact that nurses perform unpleasant tasks when caring for patients (mean 1.75, SD 0.65) (Table 4).

3.7 Career plans and intentions

Table 5. Graduate nurses’ career plans and intentions (n=28)

<table>
<thead>
<tr>
<th></th>
<th>n</th>
<th>%</th>
</tr>
</thead>
<tbody>
<tr>
<td>Enrol in additional education in nursing full time</td>
<td>14</td>
<td>50.0%</td>
</tr>
<tr>
<td>Work as a staff nurse</td>
<td>7</td>
<td>25.0%</td>
</tr>
<tr>
<td>Work part time in nursing while continuing nursing education</td>
<td>7</td>
<td>25.0%</td>
</tr>
<tr>
<td>Enrol to study another non-nursing field</td>
<td>0</td>
<td>00.0%</td>
</tr>
</tbody>
</table>

The participants were asked about their future plans related to the nursing career (Table 5). The findings illustrated that 75% (n=21) of the participants expressed their interest to continue with their education. It is important to note that only 25% (n=7) of the participants were interested in continuing their work as staff nurses.

3.8 Satisfaction with the nursing career

Table 6. Graduates level of satisfaction with their decision related to a nursing career (n=28)

<table>
<thead>
<tr>
<th></th>
<th>n</th>
<th>%</th>
</tr>
</thead>
<tbody>
<tr>
<td>I am enthusiastic about my work</td>
<td>6</td>
<td>21.4%</td>
</tr>
<tr>
<td>I am satisfied with my work</td>
<td>17</td>
<td>60.7%</td>
</tr>
<tr>
<td>I am unhappy, plan to change career</td>
<td>5</td>
<td>17.9%</td>
</tr>
</tbody>
</table>
Majority of the participants (61%: n=17) stated they were satisfied with their work as nurses and 21% (n=6) were enthusiastic about their work in nursing (Table 6). A relatively high number of participants, 18% (n=5) expressed their unhappiness and were planning to change their career.

4. Discussion
A central aim of this study was to explore changes that occurred during the transition from student to staff nurse (stage 1) which has been previously reported [8]. Bearing in mind that this was the first cohort of student nurses at the University and that nursing is a relatively new choice of career in Bahrain, the findings from stage 2 of the study were reassuring in that Bahraini nursing students have continued to express positive perceptions about nursing from their graduate programme years through to the staff nurse years. According to Rheaume and colleagues [22] a positive image of nursing is crucial in attracting applicants to the profession.

Manninen [23] believed that the nursing curriculum can influence students’ perceptions of nursing as they progress through the programme. The findings of our study were consistent with other international longitudinal studies. Both Bolan and Grainger [13] and Sand-Jecklin and Schaffer [24] reported that their participants had changed their perceptions of nursing over time. The findings of both studies revealed that as the nursing students progressed in their nursing programme, they showed significantly more positive perceptions towards nursing. In our study it became clear that as the participants mature, their views and perceptions of nursing as a profession maintained a level of consistency, which is congruent with the published literature [13, 25].

4.1 Nursing professionalism
Nursing as a caring profession and the role of nurses in helping people was clearly articulated during the student and staff nurse transition. It was identified that caring tenets identified during the student stage continued to be a dominant theme; the participants maintained very positive perceptions about the role of nurses in caring for people and being important in keeping people well [8]. Importantly, exposure to work as staff nurses further emphasized this positive perception. Nursing as a caring profession has been presented as a strong theme in the literature [26, 24, 22, 27].

It was interesting to find that as the students matured in their programme, they valued the holistic approach that nurses use in their care of patients which also includes the care of their relatives. The results of this study are in agreement with findings from earlier studies regarding the changes in nursing students’ perceptions, that is, students become more professional and see nursing as holistic with the patient as the focus [25]. One year after graduation, the participants perceived nurses to be powerful which was in contrast to participants viewing nursing as having a lack of autonomous and control over their practice. Given that nursing is an evolving profession in Bahrain, it is noteworthy
that the findings of the study disagree with Trossman [28] who reported that nurses were stereotypically viewed as women wearing white caps and following physicians’ orders without question. Taft and Nanna [29] reported that historically, nurses rarely participated in policy developments that impacted health care delivery and were rarely recognized for their contributions to health care. It has also been reported by WHO [30] that despite the great developments in both nursing practice and education, nurses were not involved in policy decisions related to the nursing profession. Instead, policies and regulations related to the nursing profession were influenced by politicians, lawyers, doctors and teachers, particularly in relation to nursing education. Among the factors identified as impeding nurses’ involvement is the undervaluing of nursing with its associated subordination to medicine and sex discrimination. Nursing includes the characteristics associated with work undertaken by a predominantly female work force: low pay, low status, poor working conditions and few opportunities for promotion. This picture is reflective of the historical evolution of nursing internationally.

It was also interesting that the study participants started viewing the nursing profession as a high prestigious occupation which offers job security. This reflects the participants’ “life orientation” towards nursing, which is described by Vanhanen and Janhonen [31] as nursing viewed as a means of fulfilling life requirements such as balancing family life and career or providing employment and economic security.

4.2 Status and conditions
At the beginning of the graduate programme and before the participants were exposed to the clinical experience, they perceived nursing as not enjoyable. As they moved to third year and after having enough experience in the clinical placements they started to realize nursing was challenging and not well accepted socially [8]. The one year experience of working as a staff nurse was vital in reshaping and consolidating the participants’ perceptions. In terms of the socioeconomic status of nursing, the participants rating pay as the lowest ranked factor is somewhat juxtaposed to nurses being important in keeping people well. The recognition of nursing as a high prestigious profession was an obvious change compared to the earlier perceptions of students.

Observations made about the public image of nursing in Bahrain suggest nursing is perceived as a low paying, low status job involving much hard and unpleasant work. Socially and culturally in an Arabic society, working shift duty presents problems for females, considering their responsibilities as wives and mothers [8]. In this study, nursing was perceived by the participants as a tough job throughout all stages of the study from student to staff nurse. Whilst students during the first two years of the programme, the participants reported that such perceptions were derived as part of what they have heard from the people they identified as sources for their information about nursing. The
most important sources identified included the internet, friends and relative nurses, with the internet being most prominent [8]. As the participants moved to their third year, there was a clear effect of the clinical experience they had. They were more explicit in describing what makes the nursing practice tough and reported issues such as dealing with dirty things, exposure to human bodies, the work load of nurses, as well as the health problems that nurses may suffer from as a result of the type of work they are involved with. This perception was identified further at the staff nurse stage, when the participants indicated that nurses, work in dangerous environments and that they perform unpleasant tasks. These perceptions are realistic considering the nature of nurses’ work. Previous themes of nursing as a hard and stressful work have also been expressed in the international literature [32]. According to Sand-Jecklin and Schaffer [24], the participants in their study believed they had a better understanding on the role of nurses, the complexity of nursing and the high level of work involved in nursing after experiencing a clinical rotation. Seago and colleagues [33] also indicated areas of continued vulnerability for the image of nursing as a profession as most participants considered nursing to be an occupation associated with significant risk of injury which was also reflected earlier in Marriner-Tomey and colleagues [34].

4.3 Nursing education and career potential

One of the most important findings related to how the participants perceived nursing education, career potential and the reciprocal relationship between both. At the beginning of the programme, the participants did not perceive nurses to be highly skilled or knowledgeable. During their third year, they were able to recognize the amount of learning and knowledge the nurses are required to gain every day. The actualization of nurses to be well educated was identified clearly one year after graduation. Whilst student nurses (stage 1 of the study), nurses were not perceived to be skilled or knowledgeable [8], but after working as staff nurses, they recognized the knowledge and high level skills they required to be a professional nurse. These findings agree with Etheridge [35] showing that newly joining nursing students do not appreciate the amount of knowledge required to make important decisions related to patient care. This serves to highlight the importance of a strong knowledge base to nursing education. As McFarlane [36] claimed over 27 years ago “What we have to learn is the intense practicality of theory in practice discipline and its power to transform practice” p.41.

During stage 2, the participants witnessed the important roles of nurses in research, patient teaching, and as a member of the health team. This positive change might be related to both the nursing programme and the exposure to clinical nursing work. Consistent with international studies, participants perceived nurses to follow directions from other members of the health team and this further supports the perception of nurses as lacking control on their practice.
4.4 Cultural Influences

The fact that the participants recognized the opportunities available in nursing for both males and females in stage 2 of the study is very crucial, given the international efforts to recruit more males to nursing. In Bahrain, like every other country with a Muslim and Arab culture, people prefer to be cared for by the same gender. There is anecdotal evidence from Bahrain that, culturally, it is not appropriate for females to take care of male patients. The health statistics reported that only 8% of the nurses in Bahrain are males, although the number of males entering nursing in Bahrain is increasing. In the past most cultures in the Middle East, including Bahrain perceived nursing as a natural gift, which required nothing but a caring wife, mother or daughter. Hence, nursing was very much seen as a female job, a fact that discourages many families from encouraging their sons to join a nursing career. Acknowledging this fact, collaborative initiatives should be taken to clear those misconceptions and improve the numbers of male students entering nursing, knowing that attracting more males from Bahrain to join the nursing profession will definitely improve the satisfaction of patients.

Bahrain society is rich in tradition and heritage; however it has experienced profound changes following the discovery of oil. According to Al-Shaikh those changes modified the well-known traditional role of women as to produce children and bring them up. They had an active role in their own homes having no problems serving the family and the supply of “life necessities” was their greater demand. Nowadays, women have gained education and established their position in different jobs and careers. This change and the move from having a family structure of the extended families to more nuclear families increased the demand for women to start depending on domestic maids rather than themselves and their family members to help them raise their children and serve their families. As a consequence of economic developments there is anecdotal evidence to suggest that some young people in Bahrain and other GCC countries may view nurses as maids. The perception of nursing as a “maid’s” job might be related to the mass employment of domestic maids as well as using them as nurses in the health care institutions. Again this is another factor to be considered in the development of positive nursing recruitment campaigns.

Any efforts to improve the enrollment and retention of Bahraini nurses should consider enhancing the social values of the nursing profession. According to Cowman, expatriate nurses are a transitory workforce, and this may result in a lack of solidity in creating a nursing workforce, which further presents a challenge in establishing and sustaining health policy and indigenous nursing developments. In addition, indigenous Muslim nurses are believed to provide nursing care that is based on the Muslim worldview. From this perspective, Lovering developed a unique nursing model, the Crescent of Care, which was based on the ways in which nurses’ cultural beliefs about health, illness and healing blended with their professional values and care experiences. The
indigenous growth of nursing with an increasing Arab nursing workforce is essential to a culturally sensitive care and enhanced communications with Arabic patients [39].

4.5 Career plans and satisfaction

Career plans of nursing students are important to health policy developments and also nurse retention in the health services. Spouse [40] reported that students’ perceptions of nursing are strengthened or altered depending on the support they receive as they proceed with the programme as well as influencing decisions to leave or continue with the programme. It was very interesting to find that despite having low perceptions in relation to the work conditions, the majority of the participants were satisfied or enthusiastic about being nurses.

The fact that the participants have clear plans to continue their higher education in nursing is promising. Previous studies [41, 24] have also found that further study was one of the most frequently cited choices of nursing graduates. On the other hand, the fact that only a minority of the participants, plan to continue their career as staff nurses must be of concern and highlights the importance of structured nursing career clinical pathways. Traditionally in Bahrain, promotion in nursing tends to be away from clinical practice, towards education and management. This finding requires attention from nurse leaders, both in nursing services and education. O’Brien-Pallas and colleagues [42] and an earlier study by Williams and colleagues [32] found that some nursing students use their training in nursing as a foundation course for other careers. Evidence suggests that career advancement programmes help retain expert, highly motivated and effective nurses at the "sharp end" of nursing care delivery, serving as an effective mechanism for developing nurse leaders in clinical practice [43]. From this instance, joint efforts need to be made to ensure that appropriate educational and training opportunities are available for these nurses in order to enhance their satisfaction with their nursing careers in clinical practice.

It is noteworthy that although the working conditions of nursing does not seem to be very satisfactory, none of the participants of this study have intentions to join other non-nursing studies. The finding related to the intention of the “unhappy” participants to change their career is forewarning. It is important that the factors lying behind this unfavorable decision are carefully investigated and efforts to be put in place to promote the retention of nurses. New graduate nurses are a precious human resource and every attempt must be made to ensure enough support for their transition to the professional role of nurses through a positive work environment that promotes their development [44].
5. Conclusion

There is very limited discourse on the public image of nursing in the Middle East and the findings of this study provide us with some useful indicators for manpower planning. In Bahrain, nursing has traditionally not been an attractive, and at worst has been an unacceptable, career option. The perceptions of Bahraini people of nursing may be grounded in strong cultural influences. Al Jarrah claimed that students enter nursing education with inherent amateur beliefs of nursing that develop over the years of their nursing education, empowering them to be professionally socialized into the nursing career. As reflected in the literature, there is a general understanding of the social, educational and political values affecting nursing students, and nursing recruitment and retention in western countries. However, there is very little known about such issues in Bahrain and the other Arabian Gulf countries. There is a need for a strategic approach in managing and directing nursing recruitment drives in high schools coupled with ongoing nursing research on nursing careers. Males continue to be difficult to attract to nursing and a particular emphasis should be placed on this element of recruitment. Noteworthy, culturally, it is more acceptable for male patients to be taken care of by male nurses, and the notion of females providing care and services to male patients is developing, however it remains fragile. Only by positively addressing the culturally sensitive boundaries of nursing in the gulf can we reassure and inform communities and support the indigenous growth of nursing among nationals from the gulf region.

Workplace empowerment of nurses needs to be embraced by the health services employers so as to create working conditions that promote work effectiveness, positive work attitudes and better staff satisfaction. The desire to continue higher education supports the requirements for a framework for postgraduate nursing education linked to the scope of nursing practice in Bahrain.

5.1 Study Limitations

There are a number of limitations to the study; the sample size was relatively low which does not encourage generalizability of the findings. There is only two schools of nursing in Bahrain and the results are reflective of other student attitudes, given that the nursing students from the two nursing schools share similar demographics and cultural backgrounds.

Acknowledgements

We wish to thank all academic nursing staff from the School of Nursing & Midwifery in RCSI Bahrain for their support as well as the nursing students of the 2006 cohort who volunteered to participate in this study and deserve sincere thanks and acknowledgements for their participation.

This research received a research grant from RCSI Bahrain (USD 7,950) with special thanks and appreciation.
References


396


[28] Trossman S. Caring knows no gender: Break the stereotype and boost the number of men in


## Appendix 2: Framework for Extracting Information from Research-Based Literature (Sample)

<table>
<thead>
<tr>
<th>Author(s)</th>
<th>Aims/Objectives</th>
<th>Research Approach/Design</th>
<th>Methods of Data Collection</th>
<th>Sample</th>
<th>Main Results</th>
</tr>
</thead>
</table>
| Al-Kandari & Lew (2005) | Aim: explore Kuwaiti HSS’s perceptions of nursing, their resources of information & factors affecting their choice of nursing. | Quantitative Survey      | Self-administered Questionnaire   | 289 female HSS Convenience | - **Perceptions**  
Positive: nursing is important to society, requires advanced technology, requires broad knowledge, caring  
Negative: nursing is physically exhausting, demands mental work, challenging, choose working ours & vacancies.  
Mixed: salaries are adequate, long years of study, perform unpleasant duties.  
- **Sources of Information**  
Primary: hospital visits, television, journals.  
Least: friends & schools.  
- **Considering Nursing**  
81% will not consider (don’t like nursing, exhausting, contact with men, night shift) |
| Achilles (2010)    | Objective: assess knowledge & attitudes of secondary school students in Ilala district towards the nursing profession. | Qualitative & Quantitative Cross-sectional | Self-administered Questionnaire | 50 males, 50 females Convenience | - **Awareness**  
Positive: nurses patients’ advocates, protect patients’ health, participate in health policy development, care for people  
Negative: nursing independent practice, make decisions for themselves, work with high technology, follow Dr.s orders without questioning, always work in hospital, work hard  
- **Considering Nursing**  
10% will consider nursing |
| Law & Arthur (2003) | Aim: identify factors influencing HSS choice of nursing, guide the identification & implementation of strategies to recruit and retain well qualified, high motivated people into nursing. | Quantitative Descriptive survey | Self-administered Questionnaire | 1246 HSS | - **Perceptions**  
Positive: nurses make good salaries, work with sick people, jobs available,  
Negative: programme too expensive & difficult, good status, work inflexible time.  
- **Nursing choice influenced by** gender, academic achievement, mother’s occupation, perceptions of nursing, parents, |
<table>
<thead>
<tr>
<th>Author(s)</th>
<th>Aims/Objectives</th>
<th>Research Approach/Design</th>
<th>Methods of Data Collection</th>
<th>Sample</th>
<th>Main Results</th>
</tr>
</thead>
</table>
| Kohler & Edwards (1990) | Aim: investigate HSS’s beliefs about nursing & nurses, primary sources of information about nursing & identify potential numbers of future nursing students. | Quantitative | Self-administered Questionnaire | 306 HSS | - **Perceptions**<br>Positive: nursing requires college degree, knowledge, profession<br>Negative: costly & difficult programmes, technical occupation, challenging, nurses perform unpleasant tasks, inflexible hours, don’t always find jobs, low status, paid well.  
- **Sources of Information**<br>Nurses, television, printed media.<br>- 76.9% not considering nursing. |
Appendix 3: Parents’ Focus Group Study Protocol

1. Purpose of the focus group
The perceptions of Bahraini people about nursing may be grounded in strong cultural influences. There is increasing recognition that nursing has become a career opportunity. Yet it would appear that many parents in Bahrain are hesitant to encourage their children to enter nursing as a career. International literature identified the influence of adolescents’ parents on their career choice as one of the major factors affecting their decision to select a career in nursing; however there is no published work on the influence of parents’ on their children’s choice of a nursing career in Bahrain. This focus group is planned to provide an answer to the following research objective: Describe the extent of influence the students’ parents/families have on their career choice.

2. Design of the focus group
In line with the triangulation design of the research study, this focus group aims to provide answers to the findings related to high school students’ perceptions of nursing and the factors that influence their decision to join a nursing career. To fulfil this purpose, the researcher believes that one or two focus groups should be sufficient to find the answers required. As there is no intention to compare and contrast the findings of the focus groups based on other characteristics related to high school students’ parents, it is planned to use a single-category design (Krueger & Casey, 2009). This means that participating parents of students coming from government boys’ schools, government girls’ schools and private schools will be joined together in the focus groups regardless of the type of school, their age, gender or any other characteristics.

3. Listening to the target audience
As it is important to make sure that the focus group will work, meetings with a number of people who have similar characteristics of the research participants will be conducted. The purpose of the meetings will be to get views on when would it be easiest for the parents to come (time of day, day of week), where would be the best place to hold the focus group, what would be some questions to ask, and what do they think about the questions the researcher is planning to ask.

4. Consents and ethical consideration
Before conducting this study, a research proposal was submitted to the RCSI Bahrain Research Ethics Committee and an approval to conduct the study was obtained. Consent from students’ parents to participate in this study will be assured. The consent will include information about the purpose of the study and explanation of what the respondents will be asked to do. The consent will also include information about how data will be treated and presented and ensure the confidentiality of the respondents. Respondents will be asked explicitly to participate in the research and will be told that they can quit participating at any time (Attachment 1: Consent Form).
On arrival to the focus group meetings, the participants will be asked to complete a registration form to gather important background information about the participants (Attachment 2: Registration Form). The consent forms will be presented to the participants before the focus group discussions begin. The consent forms will be explained to individual participants and questions answered before the participants are asked to sign a statement that they are willing to participate in the study.

5. Designing the focus group interviews
The below written plan will help organize the focus group interviews in a logical manner, clarify ideas and prevent short falls that may be caused of important things were missing. In addition, the plan will ensure that adequate resources are available. The plan will be discussed with 4-5 research experts for feedback.

5.1 The participants
Keeping in mind that the intent of the focus group is to provide insight about how people in the group perceive a situation and understand certain phenomenon, and not infer or generalize, a non-probability quota sampling will be used to identify the participants of the study. Students’ parents will be selected on the criteria that they would have something to say on the topic, are within the age range, have similar socio-economic characteristics and would be comfortable talking in the focus group (Rabiee, 2004). The career advisors who participated in the study will be asked to nominate 2 parents based on the below criteria:

- Bahraini nationals
- Age range between 40-55 years
- Middle socioeconomic status
- Have a son or daughter in the last year of high school
- Speak and understand Arabic fluently

According to Krueger & Casey (2009) the preferred number of participants in a single focus group is 5-8. This will allow the individual participants to have enough time and opportunities to share their insights and experiences. To ensure representation of the different types of schools, 3 parents from girls’ government schools, 2 from the boys’ government schools and 2 from the private schools will be invited to participate in the study. To avoid problems with non-attenders, the strategy of over-recruiting by 10-25% will be implemented (Rabiee, 2004). An additional parent will be included in the sample. So a total of 8 parents will be invited to participate in the focus group. These participants will be selected randomly from the list of nominees proposed by the career advisors.
**Invitation of participants**

After the list of potential participants is finalized, the researcher will communicate with the participants by personalized telephone calls to explain the study, discuss invitation and get a verbal acceptance for participation (Attachment 3: Telephone Screening Questionnaire). The calls will be done two weeks before the date of the focus group interview. After confirming the participants’ agreement to participate in the focus group, personalized, official invitation letters will be sent to the parents one week before the date of the focus group through the career advisors. The letters will also include additional details about the study, location and topic of discussion (Attachment 4: Letter of Invitation). A reminder phone contact will be done one day before the focus group to remind the participants of the session and confirm their intention to attend.

**5.2 Questioning route**

In focus groups, it is advisable that the moderators use conversational questions to encourage participants to have a conversation in response to a question and help the moderator becomes less dominating. Krueger & Casey (2009) suggest that the conversations allow for more spontaneity, relax the participants, create a more natural atmosphere and help the participants take the discussion to new and deeper levels of information.

Sample group questions were developed using Krueger and Casey (2009) model of open-ended question methodology: opening questions to allow everyone to talk early in the discussion, introductory questions to introduce the topic of discussion and get people to start thinking about their connection with the topic, transition questions to move the conversation into the key questions of the study, key questions that drive the study and ending questions that bring closure to the discussion (Attachment 5: Questioning Route). Five nursing lecturers from RCSI reviewed the questions for content and face validity. To ensure that the questions are stated in a simple language, clear and easy to be asked, the questions were translated to Arabic and 2 people similar to the participants were asked to review them.

**5.3 Timeline**

Focus group interviews usually last 1-2 hours based on the complexity of the topic under investigation, number of questions and the number of participants (Rabiee, 2004). This focus group will be planned for two hours including the introduction period.

The date and time of the interview will be selected based on the convenience of the participants. Public holidays and weekends will be avoided as well as dates of special social events. The timings will also be agreed with the participants based on their preference.
5.4 Resources
The below resources has been identified for the focus group interview:

5.4.1 Location of the meeting
The participants will be invited to attend the focus group in RCSI Bahrain campus. The room selected will be big enough to accommodate the participants, well lighted, well ventilated, comfortable, and quiet with few distractions. The chairs will be arranged in a circular seating to allow participants to see each another easily.

5.4.2 Moderator, assistant moderator and research assistant
It is always advisable to use a moderating team; a moderator and an assistant moderator. Each person will perform certain tasks:

The moderator will be concerned with directing the discussions and keeping the conversation flowing. In this focus group interview, the researcher will take the role of the moderator as she has adequate knowledge of the topic, is familiar with the questioning route and has previous experience with conducting focus groups. The moderator is expected to show respect to all participants, create warm and friendly environment, communicate clearly, listens carefully to what they say considering that what will be said by the participants is important and wise, is open and not defensive, and is able to use pause and probe to allow more in-depth information.

An assistant moderator will also be available to help the participants sit in designated locations, provide and collect registration and consent forms, monitor the recording equipment, take notes throughout the discussions, give an oral summary and provide a debrief with the moderator. The assistant moderators will not participate in the discussions. The assistant moderator will take notes of the notable, enlightening phrases and the well said statements that illustrate an important point of view as well as place the name or initials of the participant after the quotation. The assistant moderator will be asked to give a short (2-3 minutes) summary of the important themes discussed and get confirmation from the participants as well as add some follow up questions on topics of interest at the end of the focus group. The assistant moderator will also make notes of factors which may aid analysis of the focus group interviews. These may include certain body language or non-verbal activity such as head nodes, eye contact between the participants and other clues that would indicate level of agreement, support or interest.

Because the interview will be in Arabic, both the moderator and assistant moderator will be Arabic native speakers. The notes will also be taken in Arabic and will be translated by the researcher for analysis.
The research assistant will help receive the participants and direct them to the location of the meeting, arrange the room, handle the refreshments and respond to unexpected interruptions so the moderator and assistant moderator can focus on the discussions.

5.4.3 Tape recorder
Because taking notes when many people are speaking is not easy, it is useful to use a tape-recorder to record the focus group interviews. A digital audio-recorder will be used in this focus group. The recordings will be downloaded to a computer after the focus group is over, and will be transcribed by the researcher.

5.4.4 Gifts for the participants
RCSI Bahrain marketing packages containing some souvenirs carrying RCSI logo will be provided to participants at the end of the interview in appreciation of their participation in the focus groups.

5.4.5 Stationary
Enough copies of the registration forms and consent forms will be provided. Papers and pens will need to be provided to allow the assistant moderator take notes of the focus group discussions. Name tents carrying the names of participants will be prepared.

5.4.6 Snacks and refreshments
Snacks, water and light refreshments will be offered before the beginning of the focus group discussions as part of greeting the participants.

5.4.7 Budget required
A total of BD 500 will be required to cover the costs of the above resources. This is mainly to cover the cost of the food and drinks. The other resources will be provided by RCSI Bahrain with no cost.

5.5 Steps for conducting the focus group interviews
- The participants will be received at the reception area of the University by a research assistant and will be directed to the room of the meeting.
- The researcher (moderator) will welcome the participants and discuss the consent forms with them. The participants will then be directed to get a seat inside the meeting room where the assistant moderator will be providing them with the registration forms to complete and the consent forms to sign.
- Introduction: at the beginning of the interview, the moderator will provide a 3-5 minutes introduction. The researcher will start by welcoming the participants, introducing the moderator and the assistant moderator, giving an overview of the topic, discussing the
ground rules before asking the first question (the opening question). (Attachment 6: Introduction to the Focus Group)

- Group discussion: soon after the introductory part is completed and all the participants have an opportunity to speak, the moderator will move to the next question on the questioning route.

- Conclusion: at the end of the discussions, the assistant moderator will summarize the important themes and points discussed and ask for confirmation by the participants. The moderator will then review the purpose of the interview and ask if anything has been missed, will thank the participants and distribute the gifts before the dismissal of participants.

**Reference**


Attachment 1: Consent Form (Participation in a Focus Group)

Study Title: Factors affecting high school students' choice of Nursing as a career in Bahrain

Dear Participant,

You are invited along with other high school students' parents in your child's school to participate in a nursing research study. The study will investigate nursing as a career choice in Bahrain. The aim of the research is to investigate the Bahraini high school students' perceptions of the nursing profession and describe factors influencing their perceptions.

You will be asked to participate in a focus group interview. The purpose of this focus group is to discuss the factors that influence the students’ perceptions and choice of a nursing career. The research forms part of my PhD study which is under the academic supervision of Professor Seamus Cowman, Royal College of Surgeons in Ireland.

Your confidentiality will be respected at all times and your name will not appear on any research documents. Any information that is obtained will remain confidential to the researcher and the supervisor. Research ethics approval has been obtained for the study.

Audio tape recording will be used during the focus group interview. The tapes will be safely stored for data ratification purpose.

You have complete freedom not to join in the study or to withdraw from the study at any time without having to give a reason.

I agree to be a part of the research and have no objections on the interview be tape recorded.

Signature: ___________________________ Date: __________________
Name in block letters: _____________________________________________

Thank you very much for your participation

Eman Tawash
Nursing Lecturer & PhD Student
School of Nursing & Midwifery
Royal College of Surgeons in Ireland-Bahrain
Attachment 2: Registration Form (Participation in a Focus Group)

Please complete this information sheet. All information given will be treated with utmost confidentiality.

Name: __________________________________________________________

Age: _____ years

Gender: 1. Male _____ 2. Female _____

Educational qualifications: __________________________________________

Occupation: _____________________________________________________

Name of the high school your child is attending: _________________________

If any of your older children completed high school, what career did they choose to do?

_______________________________________________________________________________
_______________________________________________________________________________
_______________________________________________________________________________
_______________________________________________________________________________
_______________________________________________________________________________

Attachment 3: Telephone Screening Questionnaire (Participation in Focus Group)

Name of participant: ___________________________________
Mobile number: ________________________________
Better time to call: ________________________________

Hello, this is Eman Tawash, a nursing lecturer from the Royal College of Surgeons in Ireland-Bahrain. I am currently doing my PhD on “Factors affecting high school students’ choice of Nursing as a career in Bahrain”. I got your name from (Name of the career advisor and school) who said that you might be interested in participating in the study and sharing your experiences and insights that would be valuable to the study. I want to talk to parents of high school students.

You are the parent of a high school student who is in the last year, right? I am getting together a small group of parents to discuss the factors that influence their high school children’s perceptions and choice of a nursing career. I am planning to get eight parents together. It will be:

Date, day
Time (two hours)
Place

We will have some refreshments and will give you small gifts from the University as a thank you for giving us your time and ideas.

Would you be able to join us?
No _______ Okay, thank you for your time.
Yes _______ Great. I would like to send you a letter just to confirm everything we discussed.

Is it ok to send you the letter through the career advisor in your child’s school?
Yes _______ Great. The career advisor will send the letter with your child.
No _______ Okay, can you give me an address to send you the letter?

Address
_______________________________________________________________________________
_______________________________________________________________________________

Great. I will send the letter and I look forward to seeing you at the discussion.

Attachment 4: Letter of invitation (Participation in Focus Group)

Date

Name and address of participant

Thank you for accepting to participate in the focus group interview. My name is Eman Tawash, a nursing lecturer from the Royal College of Surgeons in Ireland-Bahrain. I am currently doing my PhD on “Factors affecting high school students’ choice of Nursing as a career in Bahrain”. We are interested in the ideas and experiences of high school students’ parents about factors that influence their children’s perceptions and choice of a career in nursing. The group meeting will be held:

Date, day
Time (two hours)
Place with address
Room __________ a person will receive you at the reception area for assistance.

It will be a small group of around eight parents. We will be providing small snacks and will give you small gifts from the University as a thank you for giving us your time and ideas.

If for some reason you will not be able to join us, please call as soon as possible so we can invite someone else. If you have any questions, please give me a call at 66373730. I am looking forward to meeting you. See you then.

Sincerely,
Eman Tawash
Nursing Lecturer & PhD Student
School of Nursing & Midwifery
Royal College of Surgeons in Ireland-Bahrain
Attachment 5: Parents’ Focus Group Questioning Route

Opening Question
Tell us your name; and if you take one minute to talk about your experience with hospitals in Bahrain.

Introductory Question
It was found from our research work to date with high school students and nursing students that although they have positive perceptions of nursing, a majority of them did not want to study nursing. Why do you think are the reasons for high school students not choosing nursing as a career?

Transition Questions
How much influence do you think you can have on your child’s choice of profession/career?
What careers would you prefer that your children to choose? Why?

Key question
If you are to advise your child to join nursing, what things would encourage you do that?
What things would not encourage you to send your child to nursing?
In your opinion, what influence does the religion and culture in Bahrain has on people’s views and acceptance of nursing?
What do you think about males joining nursing as a profession?

Ending Questions
In your opinion, what can be done to encourage more students join nursing in Bahrain?

After giving the summary: Is this an adequate summary?

To conclude: Is there anything that we should have talked about but we didn’t?
Attachment 6: Introduction to the focus group

The welcome
Good evening and welcome to the Royal College of Surgeons in Ireland-Bahrain. Thank you for taking the time to join our discussion. My name is Eman Tawash, a nursing lecturer from the School of Nursing and Midwifery in RCSI Bahrain. Assisting me is (name of the assistant moderator), also a nursing lecturer in the school.

Overview of the Topic
I am conducting this focus group as part of my PhD study. The aim of the research is to investigate the Bahraini high school students’ perceptions of the nursing profession and describe factors influencing their perceptions.

You were invited because you are parents of high school students who have participated in this study at an earlier phase. We want to discuss your ideas and views about the factors that influence the students’ perceptions and choice of a nursing career. The research study has been approved by an ethics committee and everything you say is confidential and will not be associated with your name.

Ground Rules
“There is no right or wrong answers. We expect that you will have different points of views. Please feel free to share your point of view even if it differs from what others have said”.

We are recording the interview because we don’t want to miss any of your comments. People often say very helpful things in these discussions and we can’t write fast enough to get them all down. We will use your first name tonight, but no names will be included in any reports. As I said earlier your comments will remain confidential. The reports will be used for the research study”.

“We have name tents here in front of us tonight. They help me remember names, but they can also help you. Don’t feel like you have to respond to me all the time. If you want to follow up on something that someone has said, you want to agree, or disagree, or give an example, feel free to do that. Feel free to have a conversation with one another about these questions. I am here to ask questions, listen and make sure everyone has a chance to share. We are interested in hearing from each of you. So if you are talking a lot, I may ask you to give others a chance. And if you are not saying much I may call on you. We just want to make sure all of you have a chance to share your ideas”.

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“The focus group will take approximately one and a half hours. Can you please put your cell phones on the quiet mode, and if you need to answer step out to do so as quietly as possible and re-join us as quickly as you can. Feel free to get up and get more refreshments if you would like to”.

The Opening Question

“Let’s begin. Let us find more about each other by going around the table one at a time. Tell us your name and if you take one minute to talk about your experience with hospitals in Bahrain”.

Starting the Discussion

“We are not going around the table anymore, so just jump into the conversation whenever you want”. And ask the second question.

Appendix 4: High School Students Self-Administered Questionnaire

Student No.: ______________________

Section 1: Demographic Data

All information given will be treated with utmost confidentiality.

Age: ____ years

Gender: 1. Male ____ 2. Female ____

Marital status: 1. Single ____ 2. Engaged ____

Father’s occupation: (Please circle) Mother’s occupation: (Please circle)
1. Health care professional (eg. Doctor, nurse) 1. Health care professional (eg. Doctor, nurse)
2. Non health professional 2. Non health professional
3. Unemployed 3. Unemployed

Father’s educational level: (Please circle) Mother’s educational level: (Please circle)
1. University graduate 1. University graduate
2. High school graduate (Tawjeehia) 2. High school graduate (Tawjeehia)

Name of your school: __________________________________
Last CGPA: __________________

Is any member of your family other than your parents employed in the health care field?
Yes ___ No ____

What career/occupation did your other sisters and brothers take up? Please list.
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### Section 2: Nursing Perception Questionnaire

Question 1: How does each of the following statements reflect your impression of the nursing profession and nurses at present? **Circle the number of the appropriate response using the following codes:**

1. Strongly disagree  
2. Disagree  
3. Agree  
4. Strongly agree

1. Nursing is a profession only for women  
2. There are opportunities in nursing for men and women  
3. Nursing offers job security  
4. Nursing is a high status occupation  
5. Nurses are powerful people  
6. Nurses are paid very well  
7. Nursing is an independent profession  
8. Nurses follow directions from other people  
9. Nurses lack control of their own practice  
10. Nursing is a caring profession  
11. Nurses are well educated  
12. Nurses are important when you are sick  
13. Nurses are important when it comes to keeping people well  
14. Nurses are team members with doctors and others  
15. Nurses work in a dangerous environment  
16. Sometimes nurses have to perform unpleasant tasks to care for their patients  
17. Nursing is easy work  
18. Nurses are active in health care research
1. Strongly disagree
2. Disagree
3. Agree
4. Strongly agree

19. Nurses are effective health teachers | 1 2 3 4
20. Nursing includes much technical work | 1 2 3 4
21. Nurses are exposed to patients with dangerous diseases. | 1 2 3 4
22. Nurses can always get jobs | 1 2 3 4
23. Nurses can choose different areas of specialty in nursing | 1 2 3 4
24. Nursing offers opportunity for personal growth and development | 1 2 3 4
25. Nursing can be a pathway to study medicine | 1 2 3 4
26. Nurses work with people rather than things | 1 2 3 4
27. Nursing is a challenging profession | 1 2 3 4
28. Nurses help people | 1 2 3 4
29. Nursing is a respected profession | 1 2 3 4
30. Nurses use special skills and knowledge | 1 2 3 4
31. Nurses have opportunity for career advancement in nursing | 1 2 3 4
32. Nurses make important contribution to society | 1 2 3 4
33. Nurses can choose days and hours they want to work | 1 2 3 4
34. Nurses obey all doctors’ orders | 1 2 3 4
35. Studying nursing is reasonably priced | 1 2 3 4
36. Getting a degree in nursing requires many years of study | 1 2 3 4
37. Studying nursing is difficult | 1 2 3 4
38. Nurses are equal to doctors | 1 2 3 4
39. Nurses status is same as secretaries | 1 2 3 4
Question 2: What is the primary source for your views about nursing? **Circle the two most important sources:**
1. Watched a programme about nurses on TV
2. Read about nursing
3. School
4. Talked to a nurse
5. Observed a nurse
6. Don’t know about it

Question 3: Based on the information you have about nursing, will you consider studying nursing after graduation from school? **Circle one most appropriate answer:**
1. Yes
2. No
3. Not sure

1. Strongly disagree
2. Disagree
3. Agree
4. Strongly agree

40. Nurses master high technological instruments  
41. Nurses manage large groups of people  
42. Nurses are leaders  
43. Nurses influence national health policy and legislation  
44. Nurses can teach in college or university  
45. Nurses are appreciated  
46. Nurses make decisions about patient care themselves  
47. Nursing is a very busy job
Question 4: Which individuals are most important in influencing your decision to choose a career in nursing? **Circle the two most important people:**
1. myself
2. parents
3. relatives
4. Friend
5. nurse I know
6. doctor I know
7. hospital experience with nurses
8. high school counselor
9. teacher

Question 5: How important are the following factors in your selection of the college or university you want to attend? **Circle the appropriate response using the following codes:**

1. Not a factor at all
2. Not a very important factor
3. An important factor
4. A very important factor

1. Advice of parents
2. Advice of high school teacher
3. Advice of counselor
4. Friends also enrolled there
5. Reputation of the university
6. Amount of financial aid offered
7. Geographic location of the university
8. Campus activities offered
9. Status of the University
10. Size of the University
11. Beautiful campus
12. University is a private institution
13. Programmes are accredited by the Higher Education Council
Appendix 5: Career Guidance Counselors’ Instrument

Section 1: Interview Guide

1. What career guidance activities are provided in your school for the high school students?
2. How are these activities arranged and by who?
3. Which groups of students are targeted?
4. Do the activities include nursing as a career choice? Please explain.
5. If nursing is included, what approaches are used and what is the general students’ reaction towards these activities?
6. If no, explain the reasons for not including nursing.
7. Do you personally encourage students to enrol in a nursing programme? Why? Or why not?
8. Do you get enquiries from students about nursing programmes?
9. If yes, how do these enquiries take place? How often do you get enquiries? Is there a particular time of year that students enquire?
10. What information about nursing do you provide to students?
11. Where do you obtain your information about nursing from?
12. What type of activities do you think will be helpful in orienting the students about a career in nursing?

Section 2: Demographic Data

All information given will be treated with utmost confidentiality.

Age: ____ years

Gender: 1. Male ____ 2. Female ____

Marital status: 1. Single ____ 2. Married ____

Educational qualifications: ___________________________________________________________

Years of experience in current job: _________________ years

Name of school: ___________________________________________________________________

Total number of students in high school: _________________ students

Number of students in grade 12: _________________ students
Section 3: Nursing Perception Questionnaire

In order to gain a better understanding of career guidance for nursing, please answer the following statements. **Circle the number of the appropriate response using the following codes:**

1. Strongly disagree
2. Disagree
3. Agree
4. Strongly agree

1. Nursing is a profession only for women
   - 1
   - 2
   - 3
   - 4

2. There are opportunities in nursing for men and women
   - 1
   - 2
   - 3
   - 4

3. Nursing offers job security
   - 1
   - 2
   - 3
   - 4

4. Nursing is a high prestige occupation
   - 1
   - 2
   - 3
   - 4

5. Nurses are powerful people
   - 1
   - 2
   - 3
   - 4

6. Nurses are paid very well
   - 1
   - 2
   - 3
   - 4

7. Nursing is an autonomous profession
   - 1
   - 2
   - 3
   - 4

8. Nurses follow directions from other people
   - 1
   - 2
   - 3
   - 4

9. Nurses lack control of their own practice
   - 1
   - 2
   - 3
   - 4

10. Nursing is a caring profession
    - 1
    - 2
    - 3
    - 4

11. Nurses are well educated
    - 1
    - 2
    - 3
    - 4

12. Nurses are important when you are sick
    - 1
    - 2
    - 3
    - 4

13. Nurses are important when it comes to keeping people well
    - 1
    - 2
    - 3
    - 4

14. Nurses are team members with physicians and others
    - 1
    - 2
    - 3
    - 4

15. Nurses work in a dangerous environment
    - 1
    - 2
    - 3
    - 4

16. Sometimes nurses have to perform unpleasant tasks to care for their patients
    - 1
    - 2
    - 3
    - 4

17. Nursing is an easy work
    - 1
    - 2
    - 3
    - 4

1. Strongly disagree  
2. Disagree  
3. Agree  
4. Strongly agree

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<td>Nurses are active in health care research</td>
<td>1</td>
<td>2</td>
</tr>
<tr>
<td>19.</td>
<td>Nurses are effective health teachers</td>
<td>1</td>
<td>2</td>
</tr>
<tr>
<td>20.</td>
<td>Nursing includes much technical work</td>
<td>1</td>
<td>2</td>
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<tr>
<td>21.</td>
<td>Nurses are exposed to patients with dangerous diseases.</td>
<td>1</td>
<td>2</td>
</tr>
<tr>
<td>22.</td>
<td>Nurses can always get jobs</td>
<td>1</td>
<td>2</td>
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<tr>
<td>23.</td>
<td>Nurses can choose different areas of specialty in nursing</td>
<td>1</td>
<td>2</td>
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<tr>
<td>24.</td>
<td>Nursing offers opportunity for personal growth and development</td>
<td>1</td>
<td>2</td>
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<tr>
<td>25.</td>
<td>Nursing can be a pathway to study medicine</td>
<td>1</td>
<td>2</td>
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<tr>
<td>26.</td>
<td>Nurses work with people rather than things</td>
<td>1</td>
<td>2</td>
</tr>
<tr>
<td>27.</td>
<td>Nursing is a challenging profession</td>
<td>1</td>
<td>2</td>
</tr>
<tr>
<td>28.</td>
<td>Nurses help people</td>
<td>1</td>
<td>2</td>
</tr>
<tr>
<td>29.</td>
<td>Nursing is a respected profession</td>
<td>1</td>
<td>2</td>
</tr>
<tr>
<td>30.</td>
<td>Nurses use special skills and knowledge</td>
<td>1</td>
<td>2</td>
</tr>
<tr>
<td>31.</td>
<td>Nurses have opportunity for advancement in nursing</td>
<td>1</td>
<td>2</td>
</tr>
<tr>
<td>32.</td>
<td>Nurses make important contribution to society</td>
<td>1</td>
<td>2</td>
</tr>
<tr>
<td>33.</td>
<td>Nurses can choose days and hours they want to work</td>
<td>1</td>
<td>2</td>
</tr>
<tr>
<td>34.</td>
<td>Nurses obey all doctors’ orders</td>
<td>1</td>
<td>2</td>
</tr>
<tr>
<td>35.</td>
<td>Studying nursing is affordable</td>
<td>1</td>
<td>2</td>
</tr>
<tr>
<td>36.</td>
<td>Getting a degree in nursing requires many years of study</td>
<td>1</td>
<td>2</td>
</tr>
<tr>
<td>37.</td>
<td>Studying nursing is difficult</td>
<td>1</td>
<td>2</td>
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<td>1</td>
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1. Strongly disagree
2. Disagree
3. Agree
4. Strongly agree

39. Nurses status is same as secretaries
40. Nurses master high technological instruments
41. Nurses manage large groups of people
42. Nurses are leaders
43. Nurses influence national health policy and legislation
44. Nurses can teach in college or university
45. Nurses are appreciated
46. Nurses make decisions about patient care themselves
47. Nursing is a very busy job
48. There is sufficient information about nursing available to career guidance teachers
49. Health services and schools of nursing should be more active in providing reliable and valid information about nursing.
Appendix 6: Career Guidance Counselors’ Letter of invitation (Template)

Date

Name and address of participant

Thank you for accepting to participate in the semi-structured interview. My name is Eman Tawash, a nursing lecturer from the Royal College of Surgeons in Ireland-Bahrain. I am currently doing my PhD on “Factors affecting high school students’ choice of Nursing as a career in Bahrain”. We are interested in the ideas and experiences of high school students’ career guidance counselors about factors that influence their students’ perceptions and choice of a career in nursing. The interview will be held:

Date, day
Time
Place with address

You will receive a small gift from the University as a thank you for giving us your time and ideas.

If for some reason you will not be available for the interview, please call me as soon as possible so I can rearrange the interview. If you have any questions, please give me a call at 66373730.

I am looking forward to meeting you. See you then.

Sincerely,

Eman Tawash
Nursing Lecturer & PhD Student
School of Nursing & Midwifery
Royal College of Surgeons in Ireland-Bahrain
Appendix 7: Nursing Students Self-Administered Questionnaire (Year 2)

Section 1: Demographics

All information given will be treated with utmost confidentiality.

Age: ____ years
Gender: 1. Male ____ 2. Female ____
Marital status: 1. Single ____ 2. Married ____

Father's occupation: (Please circle) Mother's occupation: (Please circle)
1. Health care professional 1. Health care professional
2. Non health professional 2. Non health professional
3. Not working 3. Not working

Father's educational level: (Please circle) Mother's educational level: (Please circle)
1. University graduate 1. University graduate
2. High school graduate (Tawjeehia) 2. High school graduate (Tawjeehia)

Name of the school you graduated from: ________________________________

Is any member of your family, other than your parents, employed in the health care field?
1. Yes ___ 2. No ____

If yes, please Circle who and Write their position (job).
1. Brother/sister ______________________________________________________
2. Uncle/aunt _________________________________________________________
3. Grand parent _______________________________________________________
4. Other relatives _____________________________________________________

What career/occupation did your older sisters and brothers take up? Please list.
-----------------------------------------------------------------------------------------------------------------------------
-----------------------------------------------------------------------------------------------------------------------------
-----------------------------------------------------------------------------------------------------------------------------
Section 2: Nursing Students Questionnaire

Q1. Who motivated you to study Nursing? (Circle the most appropriate two answers)
1. My Parents
2. Friends
3. Relatives who are nurses
4. Nurses in the hospital
5. Self (childhood dream)
6. Others, specify: ___________________________________________________

Q2. What information did you have about nursing before joining the nursing programme? (Circle all appropriate answers)
1. Nursing is a caring profession
2. Nursing is a humanitarian job
3. Nursing is a hard job
4. Nurses have good communication with people
5. Nursing requires patience
6. Nurses are highly skilled
7. Nurses are knowledgeable
8. Nursing is an enjoyable job
9. Others, specify: ___________________________________________________

Q3. Where did you get the information about nursing from? (Circle the one most appropriate answer)
1. My parents
2. My friends
3. Relative nurses
4. The media
5. The internet
6. Others, specify ___________________________________________________

Q4. When did you first think of becoming a nurse? (Circle the one most appropriate answer)
1. When I was a child
2. During high school
3. During a career day
4. On leaving school
5. Others, specify _________________________________________________
Q5. Which statement best describes your intent with respect to the Nursing Career? (Circle the one most appropriate answer)
1. I plan to work as a staff nurse
2. I plan to continue higher education (Master and PHD)
3. I plan to get a specialization in Nursing
4. I plan to be a nursing supervisor
5. I plan to be a nurse educator

Q6. How do you feel about being a student in nursing education? (Circle the one most appropriate answer)
1. Satisfied
2. Neither satisfied/Dissatisfied
3. Dissatisfied
Appendix 8: Nursing Students’ Focus Group Questions (Year 3)

1. In the data you provided, majority of you stated that you were motivated by your parents to join nursing. What did your parents tell you about nursing that convinced you to take on nursing as a career?

2. In the questionnaire many of you said nursing was a hard job, what are the things that make nursing a hard job?

3. If nursing is caring, what is caring?

4. A large number of you said that they got information about nursing from the internet. What did you read on the internet that made you interested in studying nursing?

5. Most of you decided to study nursing on leaving school. Why did you decide on nursing at this point in your life?

6. What are the things that may influence you either to stay in nursing or leave it
Appendix 9: Nursing Graduates’ Self-Administered Questionnaire

Section 1: Demographics

All information given will be treated with utmost confidentiality.

Age: ____ years
Gender: 1. Male ____ 2. Female ____
Marital status: 1. Single ____ 2. Married ____

Section 2: Questionnaire

Question 1: How does each of the following statements reflect your impression of the nursing profession and nurses at present? Circle the number of the appropriate response using the following codes:

1. Strongly disagree
2. Disagree
3. Agree
4. Strongly agree

1. There are opportunities in nursing for men and women 1 2 3 4
2. Nursing offers job security 1 2 3 4
3. Nursing is a high prestige occupation 1 2 3 4
4. Nurses are powerful people 1 2 3 4
5. Nursing offers high pay 1 2 3 4
6. Nursing is an autonomous profession 1 2 3 4
7. Nurses follow directions from other people 1 2 3 4
8. Nurses lack control of their own practice 1 2 3 4
9. Nursing is a caring profession 1 2 3 4
10. Nurses are well educated 1 2 3 4
11. Nurses are important when you are sick 1 2 3 4

1. Strongly disagree  
2. Disagree  
3. Agree  
4. Strongly agree  

12. Nurses are important when to keeping people well  
13. Nurses are team members with physicians and others  
14. Nurses work in dangerous environment  
15. Sometimes nurses have to perform unpleasant tasks to care for their patients  
16. Nurses are active in health care research  
17. Nurses are effective health teachers  
18. Nursing includes much technical work  
19. Nurses are exposed to patients with dangerous diseases.

Question 2: Based on the information you have about nursing at this time, what do you plan to do following graduation? **Circle the number of the appropriate response**  
1. Work in nursing  
2. Enroll to study another non-nursing field  
3. Enroll in additional education in nursing full time  
4. Work part time in nursing while continuing nursing education  
5. Other _________________________________________________________

Question 3: At this point, how do you feel about your career decision? **Circle the number of the appropriate response:**  
1. I am enthusiastic about my work  
2. I am satisfied with my work  
3. I am unhappy, plan to change career
Question 4: How important the following factors in your selection of the School of Nursing you attended? **Circle the appropriate response using the following codes:**

1. Not a factor at all  
2. Not a very important factor  
3. An important factor  
4. A very important factor  

<table>
<thead>
<tr>
<th>Factor</th>
<th>Code</th>
</tr>
</thead>
<tbody>
<tr>
<td>Advise of parents</td>
<td>1</td>
</tr>
<tr>
<td>Advise of high school teacher</td>
<td>2</td>
</tr>
<tr>
<td>Friends also enrolled here</td>
<td>3</td>
</tr>
<tr>
<td>Reputation of the University</td>
<td>4</td>
</tr>
<tr>
<td>Amount of financial aid offered</td>
<td>1</td>
</tr>
<tr>
<td>Geographic location of the university</td>
<td>2</td>
</tr>
<tr>
<td>Campus activities offered</td>
<td>3</td>
</tr>
<tr>
<td>Prestige of the University</td>
<td>4</td>
</tr>
<tr>
<td>Size of the University</td>
<td>1</td>
</tr>
<tr>
<td>Beautiful campus</td>
<td>2</td>
</tr>
<tr>
<td>University is a private institution</td>
<td>3</td>
</tr>
<tr>
<td>Campus visit was very impressive</td>
<td>4</td>
</tr>
<tr>
<td>Brochures about the school of nursing were interesting and persuasive</td>
<td>1</td>
</tr>
<tr>
<td>Admissions office people kept in touch and were helpful</td>
<td>2</td>
</tr>
<tr>
<td>Personal contact by school of nursing faculty</td>
<td>3</td>
</tr>
<tr>
<td>Personal contact by nursing students</td>
<td>4</td>
</tr>
<tr>
<td>Didn’t have a large choice of colleges</td>
<td>1</td>
</tr>
<tr>
<td>Availability of quality health care facilities for clinical practice</td>
<td>2</td>
</tr>
</tbody>
</table>
Appendix 10: Evaluation of the Nursing Recruitment Intervention (HSS)

Section 1: Demographics

All information given will be treated with utmost confidentiality.

Age: ____ years
Gender: 1. Male ____ 2. Female ____
Marital status: 1. Single ____ 2. Engaged ____

Father's occupation: (Please circle)  Mother's occupation: (Please circle)
1. Doctor 1. Doctor
2. Nurse 2. Nurse
3. Other health care providers 3. Other health care providers
5. Unemployed 5. Unemployed

Father's educational level: (Please circle)  Mother's educational level: (Please circle)
1. University graduate 1. University graduate
2. High school graduate (Tawjeehia) 2. High school graduate (Tawjeehia)
4. No school education 4. No school education

Name of your school: ________________________________________
Last CGPA: __________________________

Is any member of your family other than your parents employed in the health care field?
Yes ___ No ____
If yes, please describe their relation to you and their occupation.
_______________________________________________________________________________
_______________________________________________________________________________
_______________________________________________________________________________
_______________________________________________________________________________
_______________________________________________________________________________
Section 2: Students’ Evaluation of the Educational Session

**Part 1:** The statements below are designed to identify your knowledge and awareness in a number of areas following your participation in a Nursing Education Session. The responses range from 1 (Low knowledge /Low awareness) through 2, 3, 4,5,6 (increasing knowledge /awareness) to 7 (High knowledge /High awareness). Please read each statement and first rank your knowledge/awareness as a result of participating in the education session (After the Session). Next, think back and rank your knowledge/awareness before participating in the session (Before the Session).

Circle the appropriate numbers where you see yourself now as a result of participating in the Nursing Recruitment Session and where you saw yourself prior to participating in the Session.

1 = Low knowledge/awareness through to 7 = High knowledge/awareness

<table>
<thead>
<tr>
<th>Knowledge and Awareness</th>
<th>After the Session</th>
<th>Before the Session</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>Low (1)</td>
<td>High (7)</td>
</tr>
<tr>
<td></td>
<td>Low (1)</td>
<td>High (7)</td>
</tr>
<tr>
<td>1. Awareness of the demand for nurses in Bahrain</td>
<td>1 2 3 4 5 6 7</td>
<td>1 2 3 4 5 6 7</td>
</tr>
<tr>
<td>2. Awareness of the opportunities for males and females in nursing</td>
<td>1 2 3 4 5 6 7</td>
<td>1 2 3 4 5 6 7</td>
</tr>
<tr>
<td>3. Knowledge about the nursing profession</td>
<td>1 2 3 4 5 6 7</td>
<td>1 2 3 4 5 6 7</td>
</tr>
<tr>
<td>4. Awareness of the high level of knowledge and skills for nursing roles</td>
<td>1 2 3 4 5 6 7</td>
<td>1 2 3 4 5 6 7</td>
</tr>
</tbody>
</table>
Circle the appropriate numbers where you see yourself now as a result of participating in the Nursing Recruitment Session and where you saw yourself prior to participating in the Session.

1 = Low knowledge/awareness through to 7 = High knowledge/awareness

<table>
<thead>
<tr>
<th>Knowledge and Awareness</th>
<th>After the Session</th>
<th>Before the Session</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>Low</td>
<td>High</td>
</tr>
<tr>
<td>5. Knowledge about the leadership role of nurses</td>
<td>1 2 3 4 5 6 7</td>
<td>1 2 3 4 5 6 7</td>
</tr>
<tr>
<td>6. Awareness about the laws and ethics regulating the nursing profession</td>
<td>1 2 3 4 5 6 7</td>
<td>1 2 3 4 5 6 7</td>
</tr>
<tr>
<td>7. Knowledge about the research role taken by nurses</td>
<td>1 2 3 4 5 6 7</td>
<td>1 2 3 4 5 6 7</td>
</tr>
<tr>
<td>9. Awareness about nursing as an independent profession</td>
<td>1 2 3 4 5 6 7</td>
<td>1 2 3 4 5 6 7</td>
</tr>
<tr>
<td>10. Knowledge about the role of nurses in the provision of nursing education</td>
<td>1 2 3 4 5 6 7</td>
<td>1 2 3 4 5 6 7</td>
</tr>
<tr>
<td>11. Knowledge about the different specialties available in nursing</td>
<td>1 2 3 4 5 6 7</td>
<td>1 2 3 4 5 6 7</td>
</tr>
</tbody>
</table>
Circle the appropriate numbers where you see yourself now as a result of participating in the Nursing Recruitment Session and where you saw yourself prior to participating in the Session.

1 = Low knowledge/awareness through to 7 = High knowledge/ awareness

<table>
<thead>
<tr>
<th>Knowledge and Awareness</th>
<th>Low</th>
<th>High</th>
<th>Low</th>
<th>High</th>
</tr>
</thead>
<tbody>
<tr>
<td>After the Session</td>
<td>1</td>
<td>2</td>
<td>3</td>
<td>4</td>
</tr>
<tr>
<td>Before the Session</td>
<td>1</td>
<td>2</td>
<td>3</td>
<td>4</td>
</tr>
</tbody>
</table>

12. Knowledge about the different areas where nurses can work

13. Knowledge about the different roles of nurses in caring for patients

14. Awareness about nurses ability to make decisions about patient care themselves

15. Awareness of the career opportunities in nursing

16. Knowledge about the nursing programme in RCSI Bahrain

17. Knowledge about the requirements to join the nursing programme
Circle the appropriate numbers where you see yourself now as a result of participating in the Nursing Recruitment Session and where you saw yourself prior to participating in the Session.

1 = Low knowledge/awareness through to 7 = High knowledge/ awareness

<table>
<thead>
<tr>
<th>Knowledge and Awareness</th>
<th>Low</th>
<th>High</th>
<th>Low</th>
<th>High</th>
</tr>
</thead>
<tbody>
<tr>
<td>After the Session</td>
<td>1</td>
<td>2</td>
<td>3</td>
<td>4</td>
</tr>
<tr>
<td></td>
<td>5</td>
<td>6</td>
<td>7</td>
<td></td>
</tr>
<tr>
<td>Before the Session</td>
<td>1</td>
<td>2</td>
<td>3</td>
<td>4</td>
</tr>
<tr>
<td></td>
<td>5</td>
<td>6</td>
<td>7</td>
<td></td>
</tr>
</tbody>
</table>

18. Awareness of the activities undertaken by nursing students in RCSi Bahrain

19. Awareness of scholarships available to study nursing in RCSi Bahrain

20. Awareness about the flexibility of the working hours in nursing
Part 2: Please answer the following questions:

1. Which of the following was most effective in improving your knowledge and awareness about the nursing profession in Bahrain? Please rate the strategies based on effectiveness as 1,2,3,4,5 where (1) is most effective and (5) is least effective.

   - Class presentation by the Nursing Lecturer ______
   - “Nursing Career in Bahrain” Video ______
   - Nursing skills demonstrations ______
   - “Find Yourself in Nursing” booklet ______
   - Interacting with the Nursing Students ______

2. Which of the following was most effective in encouraging you to think about joining a career in nursing? Please rate the strategies based on effectiveness as 1,2,3,4,5 where (1) is most effective and (5) is least effective.

   - Class presentation by the Nursing Lecturer ______
   - “Nursing Career in Bahrain” Video ______
   - Nursing skills demonstrations ______
   - “Find Yourself in Nursing” booklet ______
   - Interacting with the Nursing Students ______

3. Which of the following strategies did you enjoy most? Please rate the strategies based on how enjoyable they were for you as 1,2,3,4,5 where (1) is most enjoyable and (5) is least enjoyable.

   - Class presentation by the Nursing Lecturer ______
   - “Nursing Career in Bahrain” Video ______
   - Nursing skills demonstrations ______
   - “Find Yourself in Nursing” booklet ______
   - Interacting with the Nursing Students ______
4. Before attending the Educational Session, did you have a desire to join a career in nursing? **Circle the one most appropriate answer:**
   1. Yes
   2. No
   3. Not sure

5. Based on the information you gained through the Educational Session, will you consider studying nursing? **Circle the most appropriate answer:**
   1. Yes
   2. No
   3. Not sure

   If the answer is NO, what career would you consider to join after graduation?
   ____________________________________________
Appendix 11: Career Guidance Counselors’ Evaluation of the Nursing Recruitment Intervention

Thank you for supporting and facilitating the implementation of the Nursing Recruitment Protocol in your school. I would appreciate it if you could provide a report on the protocol by answering the following questions.

1. How would you evaluate the overall organization of the recruitment protocol?
2. How would you evaluate the effectiveness of the overall protocol in improving students’ knowledge and awareness of nursing:
   a. Strengths of the protocol
   b. Weaknesses of the protocol
3. Which of the recruitment strategies, in your opinion were more effective in improving students’ knowledge and awareness? Please rate the strategies based on effectiveness as 1, 2, 3, 4, 5 where (1) is most effective and (5) is least effective.
   - Class presentation by the Nursing Lecturer
   - “Nursing Career in Bahrain” Video
   - Nursing skills demonstrations
   - “Find Yourself in Nursing” booklet
   - Interacting with the Nursing Students

4. How would you evaluate students’ response to the recruitment protocol?
5. Where you approached by the participating students, or their colleagues for inquiries about nursing as an effect of the protocol? State how many and describe their inquiries.
6. What would you recommend to further improve recruitment to nursing?
Appendix 12: Ministry of Education Permission Letter

Kingdom of Bahrain
Ministry of Education
Secretariat General of the Higher Education Council
Scientific Research Directorate

الموضوع
الموافقة على تطبيق أدوات بحث وزارة التربية والتعليم ومدارسها

بالإشارة إلى طلبكم المقدم بتاريخ 13 / 11 / 2011 م بشأن تطبيق أدوات البحث:

المعايير التي تؤثر في اختيار طلبة المدرسة الثانوية للمراقبة والتصويت في البحرين.

يرجى إعلامكم بموضوع الإذن / الإجراءات المتعلقة على تطبيق أدوات البحث وفق

التعليمات والشروط التالية:

1. الالتزام عند التطبيق بدأ / أدوات البحث التي تحت الموقعة عليها دون إضافة أو

حذف 

2. المحافظة على المعلومات التي يحصل عليها وعدم استخدامها إلا للأغراض البحث

العلمية.

3. تزويد إدارة البحث العلمي بنسخة من البحث بعد الانهاء منه.

مع تمنياتنا لكم بالتوافق

توقيع

د. مصومة عبد الصاحب
مدير إدارة البحث العلمي
Appendix 13: Consent Forms for Participation in the Study

1. Consent Form (High school students' parents for the participation of their children)

Study Title: Factors affecting high school students’ choice of Nursing as a career in Bahrain

Dear Parent,

Your son/daughter is invited along with other high school students in their school to participate in a nursing research study. The study will investigate nursing as a career choice in Bahrain.

The aim of this part of the research is to investigate the Bahraini high school students' thoughts about nursing as a profession and describe factors influencing how they think about nursing. The research forms part of my PhD study which is under the academic supervision of Professor Seamus Cowman, Royal College of Surgeons in Ireland.

Confidentiality will be respected at all times and his/her name will not appear on the questionnaire. Any information that is obtained will remain confidential to the researcher and the supervisor. Research ethics approval has been obtained for the study.

Your son/daughter will be asked to complete a simple questionnaire.

You are freed not to allow your child to join in the study, or to withdraw from the study at any time, without having to give a reason.

I agree that my son/daughter be a part of the research.

Signature: ---------------------------------- Date: ------------------
Name in block letters: ____________________________________________

Thank you very much for your response

Eman Tawash
Nursing Lecturer & PhD Student
School of Nursing & Midwifery
Royal College of Surgeons in Ireland-Bahrain
2. Consent Form (High school student)

Study Title: Factors affecting high school students' choice of Nursing as a career in Bahrain

Dear student,

You are invited along with other high school students in your school to participate in a nursing research study. The study will investigate nursing as a career choice in Bahrain.

The aim of this part of the research is to investigate the Bahraini high school students' thoughts about nursing as a profession and describe factors influencing how you think about nursing. The research forms part of my PhD study which is under the academic supervision Professor Seamus Cowman, Royal College of Surgeons in Ireland.

Your confidentiality will be respected at all times and your name will not appear on the questionnaire. Any information that is obtained in connection with this study will remain confidential to the researcher and the supervisor. Research ethics approval has been obtained for the study.

You will be asked to complete a questionnaire.

You are freed not to join in the study, or to withdraw from the study at any time, without having to give a reason.

I agree to be a part of the research.

Signature: ___________________________ Date: ______________
Name in block letters: ____________________________________________

Thank you very much for your participation

Eman Tawash
Nursing Lecturer & PhD Student
School of Nursing & Midwifery
Royal College of Surgeons in Ireland-Bahrain
3. Consent Form (Career guidance counselors)

Study Title: Factors affecting high school students’ choice of Nursing as a career in Bahrain

Dear Participant,

You are invited along with other high school career guidance teachers to participate in a nursing research study. The study will investigate nursing as a career choice in Bahrain. The aim of this element of the research is to investigate the Bahraini high school students’ perceptions about nursing as a profession and describe factors influencing their perceptions.

You will be asked to participate in an interview and to complete a questionnaire. The purpose of this interview is to discuss the career guidance activities provided to high school students in your school and your role as a career counselor in supporting students with their career decisions. The research forms part of my PhD study which is under the academic supervision of Professor Seamus Cowman, Royal College of Surgeons in Ireland.

Your confidentiality will be respected at all times and your name will not appear on any research documents. Any information that is obtained will remain confidential to the researcher and the supervisor. Research ethics approval has been obtained for the study.

Audio tape recording will be used during the focus group interview. The tapes will be safely stored for data ratification purpose.

You have complete freedom not to join in the study or to withdraw from the study at any time without having to give a reason.

I agree to be a part of the research.

Signature: ___________________________ Date: ________________

Name in block letters: ________________________________________________________________

Thank you very much for your participation

Eman Tawash
Nursing Lecturer & PhD Student
School of Nursing & Midwifery
Royal College of Surgeons in Ireland-Bahrain
4. Consent Form (Parents’ focus group)

Study Title: Factors affecting high school students’ choice of Nursing as a career in Bahrain

Dear Participant,

You are invited along with other high school students’ parents in your child's school to participate in a nursing research study. The study will investigate nursing as a career choice in Bahrain. The aim of the research is to investigate the Bahraini high school students’ perceptions of the nursing profession and describe factors influencing their perceptions.

You will be asked to participate in a focus group interview. The purpose of this focus group is to discuss the factors that influence the students’ perceptions and choice of a nursing career. The research forms part of my PhD study which is under the academic supervision of Professor Seamus Cowman, Royal College of Surgeons in Ireland.

Your confidentiality will be respected at all times and your name will not appear on any research documents. Any information that is obtained will remain confidential to the researcher and the supervisor. Research ethics approval has been obtained for the study.

Audio tape recording will be used during the focus group interview. The tapes will be safely stored for data ratification purpose.

You have complete freedom not to join in the study or to withdraw from the study at any time without having to give a reason.

I agree to be a part of the research and have no objections on the interview be tape recorded.

Signature: __________________________ Date: ___________________
Name in block letters: __________________________________________

Thank you very much for your participation

Eman Tawash
Nursing Lecturer & PhD Student
School of Nursing & Midwifery
Royal College of Surgeons in Ireland-Bahrain
5. Consent Form (Nursing students: Longitudinal study)

Study Title: Perceptions of Bahraini nursing students about nursing in a new nursing programme

Dear Student,

You are invited along with the other nursing students from your nursing education programme to participate in a nursing research study. The study will investigate the perceptions of Bahraini nursing students of nursing as a career. The research forms part of my PhD study which is under the academic supervision of Professor Seamus Cowman, Royal College of Surgeons in Ireland. You are invited to participate in this study because you are currently a nursing student in the School of Nursing and Midwifery, RCSI-Bahrain. The aim of this element of the research is to investigate the nursing students’ perceptions and experiences about nursing as a profession, and describe factors influencing the perceptions/experiences of student nurses in School of Nursing and Midwifery.

In this research, data from the reflection assignment you submitted during the first year will be used, in addition to information that will be collected through a self-administered questionnaire and focus group that you will be asked to participate in. The focus group meeting will take one hour and you will require 5-10 minutes to complete the questionnaire. Both will be done separately on independent timings during your study in the nursing programme. The focus group interview will be tape-recorded for the purpose of ratifying the data in a later stage.

Your confidentiality will be respected at all times and your name will not appear on the questionnaire. Any information that is obtained in connection with this study will remain confidential. You have complete freedom not to join in the study or to withdraw from the study at any time without having to give a reason.

I agree to be a part of the research and to be tape recorded during the focus group.

Signature: ----------------------------- Date: ---------------------
Name in block letters: ---------------------------------------------

Thank you very much for your participation

Eman Tawash
Nursing Lecturer & PhD Student
School of Nursing & Midwifery
Royal College of Surgeons in Ireland-Bahrain
6. Consent Form (Nursing graduates: Longitudinal study)

Study Title: Perceptions of Bahraini nursing students about nursing in a new nursing programme

Dear Student,

You are invited along with the other nursing graduates from your nursing education programme to participate in a nursing research study. The study will investigate nursing as a career choice in Bahrain. You are invited to participate in this study because you are a graduate of the School of Nursing and Midwifery, RCSI-Bahrain and because you were part of the first stage of this longitudinal study. The research forms part of my PhD study which is under the academic supervision Professor Seamus Cowman, Royal College of Surgeons in Ireland. The aim of this element of the research is to investigate the nursing graduates’ perceptions and experiences of nursing one year after practicing as staff nurses and describe factors that have influenced these perceptions/experiences as well as decisions about the nursing career. Information which will be collected in this stage will be added to the data obtained earlier from your reflection assignments, focus groups and questionnaire.

Your confidentiality will be respected at all times and your name will not appear on the questionnaire. Any information that is obtained in connection with this study will remain confidential to the researcher and the supervisor. Research ethics approval has been obtained for the study.

You will be asked to complete a questionnaire. You are freed not to join in the study, or to withdraw from the study at any time, without having to give a reason.

I agree to be a part of the research.

Signature: -------------------------- Date: ------------------------
Name in block letters: --------------------------------------------------

Thank you very much for your participation

Eman Tawash
Nursing Lecturer & PhD Student
School of Nursing & Midwifery
Royal College of Surgeons in Ireland-Bahrain
Appendix 14: Consent Forms for Participation in the Nursing Recruitment Intervention

1. Consent Form (High school students' parents)

Study Title: Factors affecting high school students' choice of Nursing as a career in Bahrain

Dear Parent,

Your son/daughter is invited along with other high school students in their school to participate in a nursing research study. The study will investigate nursing as a career choice in Bahrain. The aim of this part of the research is to evaluate the effectiveness of nursing recruitment strategies as perceived by the Bahraini high school students. The research forms part of my PhD study which is under the academic supervision of Professor Seamus Cowman, Royal College of Surgeons in Ireland-Bahrain.

Confidentiality will be respected at all times and your son's/daughter’s name will not appear on the questionnaire or other documents related to the study. Any information that is obtained will remain confidential to the researcher and the supervisor. Research ethics approval has been obtained for the study. Your son/daughter will be asked to participate in a nursing recruitment protocol which includes a number of activities related to nursing and will be asked to complete a simple questionnaire after some time of the implementation of the protocol. The protocol will take place in his/her high school during one of the career advising sessions.

We hope you will agree to allow your son/daughter participate in the study. You may choose not to allow your son/daughter to join in the study, or to withdraw from the study at any time, without having to give a reason.

I agree that my son/daughter be a part of the research.

Signature: ------------------- Date: --------------

Name in block letters: --------------------------------------------------------------

Thank you very much for your response

Eman Tawash
Nursing Lecturer & PhD Student
School of Nursing & Midwifery
Royal College of Surgeons in Ireland-Bahrain
2. Consent Form (High school students)

Study Title: Factors affecting high school students' choice of Nursing as a career in Bahrain

Dear student,
You are invited along with other high school students in your school to participate in a nursing research study. The study will investigate nursing as a career choice in Bahrain. The aim of this part of the research is to evaluate the effectiveness of nursing recruitment strategies as perceived by the Bahraini high school students. The research forms part of my PhD study which is under the academic supervision of Professor Seamus Cowman, Royal College of Surgeons in Ireland-Bahrain.

Confidentiality will be respected at all times and your name will not appear on the questionnaire or other documents related to the study. Any information that is obtained will remain confidential to the researcher and the supervisor. Research ethics approval has been obtained for the study.

You will be asked to participate in a recruitment protocol which will include a number of activities related to nursing. The protocol will take place in your high school during one of the career advising sessions and will last for two hours. You will be asked to complete a simple questionnaire that might take 20-30 minutes after two weeks of the implementation of the protocol.

You are freed not to join in the study, or to withdraw from the study at any time, without having to give a reason.

I agree to be a part of the research.

Signature: --------------------------- Date: ----------------
Name in block letters: -------------------------------------------------------------

Thank you very much for your participation

Eman Tawash
Nursing Lecturer & PhD Student
School of Nursing & Midwifery
Royal College of Surgeons in Ireland-Bahrain
Appendix 15: Consent Forms for Participation in the Recruitment Video

1. Consent Form 1 (Participants)

Dear participant,

You are invited to participate in a video related to a nursing PhD research study which is supervised by the Royal College of Surgeons in Ireland (RCSI). The aim of this part of the research is to investigate the Bahraini high school students’ thoughts about nursing as a profession and describe factors influencing how they think about nursing.

The video will document nurses representing different roles to reflect the broad scope of the nursing profession, which can be used as an important role in marketing nursing and improve recruitment to the nursing programmes in Bahrain.

The video will focus on the opinions and perceptions of high school students in government and private schools as well as their parents and career advisors. The video will NOT be used for commercial purposes.

I agree to be a part of the video.

Signature: ___________________________ Date: ________________
Name in block letters: ____________________________________________

Thank you very much for your participation

Eman Tawash
Nursing Lecturer & PhD Student
School of Nursing & Midwifery
Royal College of Surgeons in Ireland-Bahrain
2. Consent Form (Participants’ relatives)

Dear participant,

Your child/family member is invited to participate in a video related to a nursing PhD research study which is supervised by the Royal College of Surgeons in Ireland (RCSI Bahrain). The aim of this part of the research is to investigate the Bahraini high school students’ thoughts about nursing as a profession and describe factors influencing how they think about nursing.

The video will document nurses representing different roles to reflect the broad scope of the nursing profession, which can be used as an important role in marketing nursing and improve recruitment to the nursing programmes in Bahrain.

The video will focus on the opinions and perceptions of high school students in government and private schools as well as their parents and career advisors. The video will NOT be used for commercial purposes.

I agree for my child/family member to be a part of the video.

Signature: --------------------------- Date: --------------------------

Name in block letters: --------------------------------------------------------------------------------

Thank you very much for your response

Eman Tawash
Nursing Lecturer & PhD Student
School of Nursing & Midwifery
Royal College of Surgeons in Ireland-Bahrain
Appendix 16: “Nursing Career in Bahrain” Video Script

<table>
<thead>
<tr>
<th>Narrative</th>
<th>Video</th>
<th>Area for filming</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Title: Nursing Career in Bahrain</strong></td>
<td></td>
<td></td>
</tr>
<tr>
<td><strong>Introduction to the video:</strong></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Today nurses are a very important part of the health services.</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Since the establishment of the School of Nursing &amp; Midwifery in 2006, RCSI Bahrain has enrolled more than 600 high school students into the Baccalaureate Nursing programme.</td>
<td></td>
<td></td>
</tr>
<tr>
<td><strong>Nurse 1: Nurse Lecturer</strong></td>
<td>Giving a lecture</td>
<td>RCSI Bahrain</td>
</tr>
<tr>
<td>Nursing is challenging. The more education you get, the more doors open.</td>
<td>Facilitating a group discussion</td>
<td></td>
</tr>
<tr>
<td>As a nurse you can acquire educational degrees at the Bachelor, Masters and PHD levels.</td>
<td>Talking to students</td>
<td></td>
</tr>
<tr>
<td>Nursing opens many career opportunities for you.</td>
<td>Having meetings</td>
<td></td>
</tr>
<tr>
<td>As a registered nurse, you can specialize in paediatrics, community, mental health, midwifery, or critical care nursing.</td>
<td>Teaching students in the laboratory</td>
<td></td>
</tr>
<tr>
<td>You can also become a nurse manager, researcher or an educator at a university.</td>
<td>Teaching a patient and family</td>
<td></td>
</tr>
<tr>
<td>Nurses are leaders; they can manage wards, hospitals and nursing homes.</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Today, nurses can practice everywhere, in hospitals, clinics, schools, universities &amp; community health settings.</td>
<td></td>
<td></td>
</tr>
<tr>
<td><strong>This is who I am</strong></td>
<td></td>
<td></td>
</tr>
<tr>
<td>I’m a nurse</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Qualified nurses are needed all over the world.</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Narrative</td>
<td>Video</td>
<td>Area for filming</td>
</tr>
<tr>
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</tr>
<tr>
<td>The demand of nursing is very high which means more jobs opportunities, better salaries and other benefits too.</td>
<td>Taking care of a patient with ventilator</td>
<td>BDF Hospital, Intensive Care Unit</td>
</tr>
<tr>
<td>The biggest reward comes when helping others.</td>
<td>Handling ICU equipment</td>
<td></td>
</tr>
<tr>
<td>Find yourself in nursing</td>
<td>Reading reports</td>
<td></td>
</tr>
<tr>
<td>Nurse 2: ICU nurse</td>
<td>Assessing a patient</td>
<td></td>
</tr>
<tr>
<td>Nursing is a human experience; we deal with life and death situations.</td>
<td>Preparing medications</td>
<td></td>
</tr>
<tr>
<td>Being a professional nurse takes a special kind of a person, we touch a lot of lives every day.</td>
<td>Talking to a sick old patient</td>
<td></td>
</tr>
<tr>
<td>People's life is in your hands</td>
<td>Wearing &amp; removing gloves and masks</td>
<td></td>
</tr>
<tr>
<td>I like the learning, I like the technology, I like staying ahead of nursing research, it helps me take better care of my patients.</td>
<td>Washing hands</td>
<td></td>
</tr>
<tr>
<td>I find it a wonderful way of giving back to my own society.</td>
<td></td>
<td></td>
</tr>
<tr>
<td>I'm a nurse</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Nurse 3: Emergency Nurse</td>
<td>Caring for a patient on oxygen</td>
<td>BDF Hospital, Accident &amp; Emergency Department</td>
</tr>
<tr>
<td>Nursing is challenging, exiting, demanding and sometimes exhausting</td>
<td>Taking care of a sick patient</td>
<td></td>
</tr>
<tr>
<td>It's never routine because you never know what’s going to happen.</td>
<td>Moving a patient on wheelchair</td>
<td></td>
</tr>
<tr>
<td>Working shifts gives me flexibility with my time.</td>
<td>Talking to a patient</td>
<td></td>
</tr>
<tr>
<td>As part of the health care team, registered nurses use their knowledge, experiences and their own talents to provide patient care.</td>
<td>Doing ECG</td>
<td></td>
</tr>
<tr>
<td>I know I saved a life</td>
<td></td>
<td></td>
</tr>
<tr>
<td>I’m a nurse</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Narrative</td>
<td>Video</td>
<td>Area for filming</td>
</tr>
<tr>
<td>-----------</td>
<td>-------</td>
<td>------------------</td>
</tr>
<tr>
<td>Nurse 4: Student nurse</td>
<td>Attending lectures</td>
<td>RCSi Bahrain</td>
</tr>
<tr>
<td>I am a student nurse because it’s a noble profession.</td>
<td>Reading in the library</td>
<td></td>
</tr>
<tr>
<td>Nursing provides spiritual, emotional and physical needs to people.</td>
<td>Working on a laptop</td>
<td>BDF Hospital</td>
</tr>
<tr>
<td>Nursing is a powerful profession. We have our own laws and regulations, societies, and our own research.</td>
<td>In group discussions</td>
<td></td>
</tr>
<tr>
<td>It’s a great profession because it’s offering a lot of opportunities for me.</td>
<td>Working with a staff nurse</td>
<td></td>
</tr>
<tr>
<td>I’m proud to be a nurse because I know I can make a difference.</td>
<td>Caring of a child</td>
<td></td>
</tr>
<tr>
<td></td>
<td>Talking to a child</td>
<td></td>
</tr>
<tr>
<td></td>
<td>Caring for a patient on IV fluid</td>
<td></td>
</tr>
<tr>
<td></td>
<td>Check vital signs</td>
<td></td>
</tr>
<tr>
<td></td>
<td>Washing hands</td>
<td></td>
</tr>
<tr>
<td>Conclusion to the video</td>
<td>If you wish to become a nurse visit RCSi Bahrain website <a href="http://www.rcsibahrain.edu.bh">http://www.rcsibahrain.edu.bh</a> Or</td>
<td></td>
</tr>
<tr>
<td></td>
<td>Contact <a href="mailto:admissions@rcsi-mub.com">admissions@rcsi-mub.com</a> for more information</td>
<td></td>
</tr>
<tr>
<td>Thanks and appreciations</td>
<td>Major General Professor Khalid Bin Ali Al-Khalifa</td>
<td></td>
</tr>
<tr>
<td></td>
<td>Director of Royal Medical Services, BDFRMS</td>
<td></td>
</tr>
<tr>
<td></td>
<td>Professor Sameer Otoom</td>
<td></td>
</tr>
<tr>
<td></td>
<td>President, RCSi Bahrain</td>
<td></td>
</tr>
<tr>
<td>Narrative</td>
<td>Video</td>
<td>Area for filming</td>
</tr>
<tr>
<td>-----------------------------------------------</td>
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<td>-----------------</td>
</tr>
<tr>
<td>Professor Seamus Cowman</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Academic Supervisor, RCSI Bahrain</td>
<td></td>
<td></td>
</tr>
<tr>
<td>RCSI Bahrain Staff and Students</td>
<td></td>
<td></td>
</tr>
<tr>
<td>BDF Hospital Staff and Patients</td>
<td></td>
<td></td>
</tr>
<tr>
<td><strong>Produced By:</strong></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Eman Tawash</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Undertaking PhD study on Nursing Recruitment</td>
<td></td>
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</tr>
<tr>
<td>RCSI Bahrain</td>
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</tbody>
</table>
Appendix 17: “Find Yourself in Nursing” Lecture

Find Yourself in Nursing

What is nursing?

- Nursing is both an art and a science.
- It is practiced by both men and women.
- Nursing focuses on the care of individuals, families and communities whether in hospital or the home.
- Nurse also promote health education

Nurses

- Are very knowledgeable
- Are highly-skilled professionals
- Practice with great responsibility
- Utilize research when making decisions.

Nurses

- Are regulated nationally
- Have their own professional laws and codes of conduct.
- Depending on their level of training, they are legally permitted to practice independently within a variety of settings.

Nurses

- Demonstrate problem-solving and critical thinking ability.
- Have effective time management skills
- Work with high technology and advanced equipment.

Nurses

- Have the ability to interact and communicate effectively with other people
- Provide the best possible care for all patients, regardless of their age, gender, religion or race.

Roles of Nurses

- Care for patients
- Provide comfort
- Ensure hygiene
- Administer medications and intravenous fluids
- Participating in minor therapeutic and diagnostic procedures.

Who works with nurses?

- Doctors
- Physiotherapists
- Dietitians
- Laboratory technicians
- Pharmacists
- Radiography technicians
**Where can nurses work?**
- Hospitals
- Health centers
- Doctors' clinics
- Nursing homes
- Public health agencies
- Schools
- Industry

**How to become a nurse?**
- You must obtain the relevant knowledge and clinical competence for the profession.
- Join a university that provides a Bachelor of Science in Nursing (BSN)

**Nursing education**
- Prepares nurses for a professional in nursing science, research, leadership and nursing informatics.
- Nurses must be registered with the National Health Regulatory Authority (NHRA), Bahrain.

**Opportunities For Nurses**
- Nursing offers excellent job stability.
- Nurses enjoy the flexibility of full-time or part-time hours.
- Nurses can work in a variety of areas within healthcare.

**Career Opportunities**
- Nursing education provides post-qualification courses in specialist subjects within nursing such as cardiac, emergency, midwifery, community health, psychiatric, nursing informatics and nurse educators.

**Career Opportunities**
- Nurses can get management and leadership positions.
- They can also progress to further education at master’s and doctorate levels.
**Nursing in RCSI Bahrain**

- Accredited by the Higher Education Council in Bahrain.
- Accredited by the National University of Ireland.
- Received full confidence by the Quality Assurance Authority for Education and Training in Bahrain.

**Nursing in RCSI Bahrain**

- Four-years programme
- Full-time
- Eight semesters.
- Theory and clinical
- 50% clinical placements

**Qualification**

- Graduates are awarded a Bachelor of Science (Honours) in Nursing (BScN) from the Royal College of Surgeons, Bahrain (RCSI Bahrain) and from the National University of Ireland (NUJ).

**Nursing Scholarships**

- Bahraini students who are eligible can get sponsorship through Tamkeen

**Applying to Nursing**

- Applications for the BScN Programme must be submitted online.
  - CGPA of 80% or equivalent
  - Pass an English language test
  - Pass a personal interview
- Registration to the programme starts in January each year.

**For more information**

- Contact the RCSI Bahrain Admission and Registration Office
  
  Email: admissions@rcsi-mub.com
  Phone: 1735 1450, ext: 5555.

**Questions**
Appendix 18: Content of the “Find Yourself in Nursing” Booklet

Find Yourself in Nursing

Information Booklet about the Nursing Profession
What is nursing?

Nursing is both an art and a science. It is a profession filled with unlimited personal and professional rewards and one that requires compassion and caring to promote the quality of peoples’ lives.

Practiced by men and women, nursing focuses on the care of individuals, families and communities so they may achieve and preserve optimal health and quality of life.

As a profession, it offers excellent job stability. It also enjoys the flexibility of full-time or part-time hours in a variety of areas within healthcare, as well as many options in work schedules, places to work and levels of responsibility.

Nursing can be a very rewarding career, particularly for those who move into more specialized nursing roles, or into management and leadership positions. They can also progress to further education at master’s and doctorate levels or into specialized education programmes such as midwifery, paediatric, cardiac and intensive care.

What is special about nurses?

After completing third-level nursing education with clinical training in hospitals and primary care centres, nurses become highly-skilled professionals who are expected to practice with great responsibility, while utilizing research when making clinical and managerial decisions.

Nurses are regulated nationally and have their own professional laws and codes of conduct. Depending on their level of training, they are legally permitted to practice independently within a variety of settings.

Nurses are educated to be efficient and to demonstrate problem-solving and critical thinking ability in all aspects of their work. Effective time management skills are also essential for taking care of large groups of patients. And in order to provide the best care for their patients, nurses work with high technology and advanced equipment.

A career in nursing is hugely rewarding and offers a valuable opportunity to positively impact on the lives of those who are in most need of assistance.
What do nurses do?

As well as providing healthcare to individuals, families and groups, nurses strive to promote health and prevent disease.

Nurses are involved with all aspects of caring for patients, such as providing comfort; ensuring hygiene; administering medications and intravenous fluids and participating in minor therapeutic and diagnostic procedures.

Who works with nurses?

A medical establishment’s healthcare team relies on nurses to help coordinate the care of patients performed by other team members such as doctors, physiotherapists, dietitians, laboratory technicians, pharmacists and radiography technicians.

Where can nurses work?

As well as having employment opportunities in public and private hospitals, health centres, doctors’ clinics, nursing homes, public health agencies, schools and industry, nurses can also work in specialized areas such as intensive care, coronary care and accident and emergency. They can also work in universities as educators and researchers.

How to become a nurse?

To become a nurse, it is necessary to obtain the relevant knowledge and clinical competence for the profession. This can be achieved by joining a university that provides a Bachelor of Science in Nursing (BScN), which is a four-year academic degree in the science and principles of nursing.

Nursing education includes theoretical, practical and clinical training. This education is provided to nursing students by university lecturers, experienced nurses and other medical professionals who have qualifications and experience in education.

The programme also prepares nurses for a professional role away from the bedside, with coursework in nursing science, research, leadership and nursing informatics.

It is also necessary for nurses to be registered with the National Health Regulatory Authority (NHRA), Bahrain.
What career opportunities are available for nurses?

The nursing field comprises many different types of specialized nurses. Nursing education provides post-qualification courses in specialist subjects within nursing such as cardiac, emergency, midwifery, community health, psychiatric, nursing informatics, and nurse educators.

How to become a specialized nurse

Once they are qualified, nurses can continue with their studies and qualify to work in specialty areas. By completing a continuing-education course, nurses can improve career advancement.

Qualified nurses who wish to further their careers can also avail of a master’s degree and a doctorate degree in nursing.

Where can you study nursing in Bahrain?

Those who are interested in joining nursing education can apply to the Royal College of Surgeons in Ireland, Bahrain (RCSI Bahrain).

The majority of academic staff are from Bahrain, Ireland and a few other European countries. They all meet high quality standards of education and experience.

The nursing programme at RCSI Bahrain

The BSc in Nursing is open to high-school students and also to graduates who have completed an undergraduate degree in another discipline and now wish to pursue a career in nursing.

The four-year undergraduate full-time nursing degree comprises eight semesters. Each 18-week semester comprises 16 weeks’ theory and clinical teaching, followed by one week for revision and one week for assessment.

Work-based learning is a critical component of the nursing education programme. Over four years, students spend almost half the programme hours in clinical settings such as surgical, medical, maternity, paediatrics, psychiatric, critical and primary health.

The healthcare facilities used for clinical teaching include King Hamad University Hospital; Bahrain Defence Force Hospital; BDF Hospital Cardiac Centre; the Ministry of Health’s primary and secondary services including Salmaniya Medical Complex, the Psychiatric Hospital, maternity hospitals, geriatric healthcare facilities, health centres and other community care sites. A number of private hospitals are also used for nursing student clinical placements.
Graduates will be awarded a Bachelor of Science (Honours) in Nursing (BScN) from the Royal College of Surgeons, Bahrain (RCSI Bahrain) and from the National University of Ireland (NUI).

Why Study nursing in RCSI Bahrain?

At the start of the programme, each new nursing student is issued with a pre-configured laptop computer. With this, they can access curricular data, learning materials, the library and timetables via ‘Moodle’, the University's virtual learning environment (VLE).

In the University’s Clinical Skills Laboratory – one of the first of its kind in the region – students can practice skills and techniques in a controlled environment prior to clinical placement. Student wellbeing is greatly valued at RSCI Bahrain. The Student Welfare Office provides a wide range of services and programmes designed to support students’ academic achievements and ensure their wellbeing during their studies. In addition, to help first-year students settle into college life, they are matched to a ‘Buddy’ – a more senior student who is trained to guide and assist.

There are many extracurricular activities at RCSI Bahrain and its Student Services Office encourages participation in a variety of clubs, societies and voluntary activities. Through the Nursing Student Society, for example, students can plan and actively participate in activities both within the University and the wider community.

Sport also plays a big role at the University and, with the assistance of a number of coaches, a full-time sports officer manages a sophisticated student gymnasium and sports programme. RCSI Bahrain has been highly proactive in establishing intervarsity sports competitions throughout the Kingdom.
Are scholarships available for RCSI Bahrain’s nursing programme?

Yes. Bahraini students who are eligible can get sponsorship through Tamkeen.

The vast majority of qualified nurses with BScN degrees from RCSI Bahrain find employment straight from college, and can also be assured of a secure career for the future.

How to apply for nursing at RCSI Bahrain?

Applicants to the BScN Programme must have completed at least 12 years of secondary school education within the Science or Commercial Streams. They must also have achieved a minimum cumulative Grade Point Average (CGPA) of 80% or equivalent.

Applicants must pass an English language test given by RCSI Bahrain.

An applicant can be exempt from the entrance English examination if they provide valid results for the International English Language Testing System (IELTS) or the Test of English as a Foreign Language (TOEFL).

Applicants must also pass a personal interview.

Applications for the BScN Programme must be submitted online.

As places on the programme are limited, early application is advised. Registration to the programme starts in January each year.

For more information, contact the RCSI Bahrain Admission and Registration Office, email: admissions@rcsi-mub.com or phone: 1735 1450, Ext: 5555.