The image of the public health nurse that beginner public health nurses have at the time of employment: The career choice motive, and the image of the public health nurse

| メタデータ | 言語: eng |
|-------|---------------------------------|
| | 出版者: |
| | 公開日: 2017-10-04 |
| | キーワード (Ja): |
| | キーワード (En): |
| | 作成者: |
| | メールアドレス: |
| | 所属: |
| URL | http://hdl.handle.net/2297/6044 |

The image of the public health nurse that beginner public health nurses have at the time of employment —The career choice motive, and the image of the public health nurse—

Okura Mika Saeki Kazuko Ohno Masami Uza Miyoko*
Izumi Hisako ** Ohyanagi Toshio ** Tsukada Hisae ***

Yomo Masayo **** Yokomizo Terumi **

ABSTRACT

The purpose of this study is to clarify the image of the public health nurse(PHN) and the motive for selecting the profession that Beginner public health nurses, who will be engaged in work in the administrative organization, have at time of employment. Semi-structured interviews and observations were conducted on 14 Beginner PHNs by four interviewers.

As a result of content analysis, 3 categories were found for PHN's image, which were; one, focusing on details of the activities of the PHN, two, focusing on the relationship to residents, and three, concerning social image. Concerning Conviction level of PHN's image, Beginner PHNs eloquently stated text-bookishly but scarcely referred to specific episodes or own thoughts, and had no confidence in own expressions. In addition, there were 2 Career choice motives. Beginner PHNs had some interest in the cherished praise, and they came to some vague reasons.

It will be important to approach Beginner PHNs by presenting effective model of the PHN, and by having them go through actual experiences.

KEY WORDS

PHN's image, Career choice motive, Professional identity, Beginner PHNs

INTRODUCTION

Through the integration of the curriculum for general nurses and public health nurses (PHNs), caused by a rapid increase in Nursing Universities, the time for practical training was relatively reduced, and the level achieved at the time of graduation could not be evaluated as adequate enough to perform work as a public health nurse (PHN) in the community¹⁾.

Moreover, through changes in the social climate surrounding the PHN, such as the enactment of the Community Health Law and the Health Promotion Law, and the implementation of a nursing-care insurance system, the social ethics of administrative organization employees who engage in the administrative organization are rigorously questioned, with an emphasis on accountability and privacy pro

School of Health Sciences, Faculty of Medicine, Kanazawa University

^{*} School of Health Sciences, Faculty of Medicine, University of the Ryukyus

^{**} School of Health Sciences, Sapporo Medical University

^{***} Minami-Kaga Public Health Center, Ishikawa Prefectural Government

^{****} Ishikawa Central Public Health Center, Ishikawa Prefectural Government

Table 1. Public health nurse's image

| Category | Sub-Category |
|--|--|
| | I had a PHN's image that PHNs have working to be involved with a broad range of people in terms of both age and physical condition. |
| I had a PHN's image of performing prevention and health promotion activities for individuals, groups, and communities. | I had a PHN's image that PHNs have working to perform prevention and health promotion activities. |
| | I had a PHN's image that PHNs have working to do on creating changes in groups, communities, and whole towns. |
| | I had a PHN's image that PHNs have working to provide proper information the residents through consulting with that person. |
| I had a PHN's image of being partners with | I had a PHN's image that PHNs have working as someone close to the residents in community and closely related to their life. |
| residents. | I had a PHN's image that PHNs have working to bring out the strengths of a person. |
| | I had a PHN's image that PHNs have working together as partners of the residents. |
| I had a PHN's image as a highly skilled profes- | I had a PHN's image that PHNs have working to supervise the residents and to lead the community. |
| sional. | I had a PHN's image that PHNs have working to need more high skill than general nurses. |

tection, and promotion of community participation activities¹⁾, etc. Against the backdrop of such a social climate, over half of Beginner PHNs made a response that the majority of administrative organization employees "have no conviction" in their competencies as an administrative officer, in regard to their conviction in personal health services¹⁾.

Meanwhile, the systemic continuing education program and consulting system are not yet set up at present¹⁾. However, no matter how the systems for knowledge and technology acquisition and the surrounding environment are put into place, no results can be expected if they are accompanied by no will and desire on the part of Beginner PHNs. What is important in educating Beginner PHNs is how the PHNs themselves clarify the meaning and positioning of their profession, how PHNs see their so-called professional identity, and how PHNs can facilitate the development of their career. Moreover, what is needed first when forming their professional identity is an understanding of the current circumstances as their starting point.

Therefore, the purpose of this study is to clarify the image of the PHN and the motive for selecting the profession that Beginner PHNs, who will be engaged in work in the administrative organization, have at time of employment.

METHODS

1. Subjects

The subjects were 14 Beginner PHNs with $1\sim3$ years of experience who are employed by municipal governments in three prefectures, who agreed to participate in the study project: "Development of distance learning and continuing education for Beginner PHNs," Health Scientific Study Project, in-aid for Scientific Study, Ministry of Health, Labour and Welfare. The subjects belonged to the $22\sim27$ age group and have $1\sim5$ years of professional experience, and 7 of them were public health training facility educated or junior college educated, with 7 being university educated or graduate school educated.

2. Data collection and analysis method

Interview dates were scheduled in July to August of 2003 whenever was convenient for the subjects, and the interview time was approximately 1 hour. 4 interviewers conducted a semi-structured interview and observation. All interviewers have done qualitative study in the past, but we held meetings several times with them in advance until a common understanding on the intent and details of the interview questions was obtained, and interviews were then conducted based on certain guidelines. Details of the interview concerned the subjects' image of the PHN prior to employment(PHN's image) and their motive for selecting this profession(Career choice motive).

Using content analysis, the sentence of the interviews were coded and classified into type of content, with consideration for Career choice motive or PHN's image, and categories and sub-categories were then built. Furthermore, with regard to the subjects' level of conviction in the PHN's image(Conviction level of PHN's image), with due consideration for the observations and statements in the interview, categories and sub-categories were then built.

The period of reflection since time of employment differed in years of experience of Beginner PHNs; however, no difference was found in the analyzed interviews, so the findings were treated as one.

3. Ethical considerations

Prior to conducting the study, the gist of the study was explained in writing and verbally to the subjects. based on the study plan that was approved by the ethical committee on medicine of Kanazawa University, and agreement was obtained with a consent form. Furthermore, subjects were assured that they could freely decide whether to participate in the study or not, and they would not be affected negatively by not participating, they would be free to terminate their participation, their data would be kept confidential, findings would be announced without disclosure of their identity, and assurance was given in regard to the method of disposal and data management.

RESULTS

A result of analysis on PHN's image is presented in Table 1, and categories in this paper are shown in one side parenthesis as a subhead and a thick letter, with sub-categories as tilt letter, and open-code as in single quotes.

1. PHN's image

PHN's image has 3 categories: One focuses on the details of the activities of the PHN, one focuses on the relationship with residents, and one focuses on social image.

1) Performing prevention and health promotion activities for individuals, groups, and communities

With regard to this first category that I had a PHN's image of performing prevention and health promotion activities for individuals, groups, and communities, the focus of this category was placed upon the activities of the PHN, this included those of sub-categories which PHNs have working to perform prevention and health promotion activities, PHNs have working to be involved with a broad range of people in terms of both age and physical condition and PHNs have working to do on creating changes in groups, communities, and whole towns. The depth and broadness of these expressions was expressed in terms of the impressive characteristics of the interpersonal services, compared to primarily general nurses; however, no reference was made to the specific activities of the PHN and their methodologies.

2) Being partners with residents

With regard to this second category that I had a PHN's image of being partners with residents, the focus of this category was placed on relationships with residents wherein this included those of subcategories which PHNs have working to bring out the strengths of a person, PHNs have working as someone close to the residents in community and closely related to their life. The relationship between PHNs and residents was expressed in terms of comparisons to relationships with general nurses and patients. However, there was little on specific details such as meaningfulness, fun, complexity, and hardship, which derive from those relationships, and Beginner PHNs were unable to escape textbook responses, being unable to express themselves in words of their own choosing.

3) Highly skilled professional

With regard to this third category that I had a PHN's image as a highly skilled professional, the focus of this category was that Beginner PHNs tended to perceive the social image of the PHN as PHNs have working to supervise the residents, and PHNs have working to need more high skill than general nurses.

2. Conviction level of PHN's image

When the content was something that Beginner PHNs thought they could describe using textbook-like responses like an honor student, their response was eloquent and their confidence was high; however, when asked about specific episodes and their own thought, their responses were short, became vague,

and their confidence was low; therefore the difference between the two types was big.

In regard to categories for the Conviction level of PHN's image, the following 2 were obtained (Table 2).

1) Eloquently stated text-bookishly but without referring to specific episodes, own thoughts

This Conviction level of PHN's image was expressed by the following Beginner PHNs' telling; 'I used words and expressions found in texts, with no expression deeper or broader', and 'I responded while searching for words, mindful of standard answers'. Although, interviewers asked Beginner PHNs why, how, when, who, and to whom, or how Beginner PHNs felt at the various times, and how they perceived those events. In other words, we asked specifically using the so-called 5Ws1H.

So, first type was that I described eloquently stated text-bookishly but without referring to specific episodes, own thoughts.

2) Having no confidence in own expressions

Furthermore, 'That's how it may be expressed in words', 'I think it happens in some parts', and 'I think I felt like that' were *I added to the front and end of*

expressions, making overall description vague, and 'Is this kind of explanation okay?' was used to ask for consent at the end of the conversation.

So, second type was I had no confidence in own expressions.

3. Career choice motive

In regards to categories for the Career choice motive, the following 2 were obtained (Table 3).

1) Aspiring a little to being an attractive role

This first motive was included in the next subcategory. 'I explained the lively atmosphere of activities as if the job was a lot of fun', and 'I listened empathically to us with a positive attitude', and 'I felt that the PHN was not a job but a personality', and felt my liveliness to be attractive, based on the attitude of the PHN towards activities and stories of instructors. Furthermore, 'I was allowed to freely do things how I wanted to, and they supported me', and this I had a lot of fun and fulfilling practical training was a deciding factor in their becoming a PHN. Or, the deciding factor was I felt the importance of preventive activities, from my experience with the illness

Table2. Conviction level of public health nurse's image

| Category | Sub-Category |
|--|--|
| I described PHN's image eloquently and text- bookishly but without referring to specific epi- | I was able to describe PHN's image eloquently through textbook-like responses like an honor student. |
| sodes and own thought. | My responses was very short of description of specific episodes, own thoughts and feelings. |
| I had no conviction in own expressions. | I added to the front and end of expressions, making overall description vague. |

Table3. Career choice motive

| Category | Sub-Category |
|---|---|
| | I felt my liveliness to be attractive, based on the attitude of the PHN towards activities and stories of instructors. |
| I aspired a little to being an attractive role model. | I had a lot of fun and fulfilling practical training. |
| | I felt the importance of preventive activities, from my experience with the illness of someone close to me and encounters with difficult cases. |
| | I were recommended to become a PHN from my family. |
| I partly somehow thought of the PHN as a job that helps people. | I thought of the PHN as a profession that is close to home and helps people and is not as harsh as general nursing. |
| | I had somehow become a PHN. |

of someone close to me and encounters with difficult cases.

2) Partly somehow thinking of the PHN as a job that helps people

The second motive was that I partly somehow thought of the PHN as a job that helps people, and this was included in the next sub-category. 'There was an employment ad near my parent's home', and 'I also wanted to return home where I grew up', and I were recommended to become a PHN from my family.

Or, 'being a nurse is a job that requires you to work quickly and efficiently, and I felt a nurse is in a fidget', and 'I thought of the PHN as a nursing-type job that I, who don't have stamina, could do, and there are no night shifts', and I thought of the PHN as a profession that is close to home and helps people and is not as harsh as general nursing.

And, 'I started to feel a little like perhaps I should try out being a PHN', and 'I received a PHN license so I decided to at least take the employment examination', and when I took the examination 'I was lucky enough to be able to find employment', and 'my employment was gone smoothly', and when I look back 'there was no particular episode where I wished to be a PHN', and I had somehow become a PHN, which included other forces as part of the process of achieving their wish.

DISCUSSION

1. PHNs' image and their Conviction levels

With regard to PHN's image of performing prevention and health promotion activities for individuals, groups, and communities and the PHN's image of being partners with residents, the emphasis is placed on relationships with residents, which are recipients of their care; however, the level of specificity that expresses those relationships is low, and it is believed that Beginner PHNs at the time of pre-employment are only able to perceive the PHN's image from a comparative viewpoint, that is, in terms of the PHN's activities described in textbooks, such as the state of superficial activities or communities as subjects of activities.

Meanwhile, there is a trend in which social image of PHN is perceived as a highly skilled profession, and such an elite consciousness would create a distance from residents or many other occupations. Furthermore, what is needed to become a supporter who can be there for and support people as a caregiver is first to listen humbly to the thoughts of that person, and know, feel, and learn that person as a whole³⁾. It creates the concern that the ethical foundation of nursing care professionals may go askew. Therefore, improvements are needed in education relating to attitude and value perspectives concerning the formation of personal relationships from when basic education is started.

The following characteristics and background must be considered in interpreting Conviction level of PHN's image.

As the first characteristic and background on Beginner PHNs, in addition to reduction in hours of practical training prior to employment, and for reasons of the rise in residents' awareness of rights and ethical considerations, it has become difficult for students, who have yet to acquire licenses, to perform services directly to communities, and it is believed that there is insufficient preparation, i. e., actual experience of activities are not gained.

As for the second characteristic and background on Beginner PHNs, it is believed that in this world today young people lack care and consideration for the feelings of others, as well as deep relationships with siblings, friends, and neighbors, which foster the ability to imagine a living.

As the third characteristic and background on Beginner PHNs, the addition of modifiers by Beginner PHNs like 'I feel like', and 'I seem to feel so', which escape making a definitive statement, is believed to be a reflection of their worries about how others would see them, and these impacts on their own value as a Beginner PHNs.

It is believed that what is important is to consider these characteristics and backgrounds of Beginner PHNs, and for the experienced PHNs around them to present through actual experiences a strong model of the PHN, and prevent them from losing confidence. That is, it is believed that by providing Beginner PHNs with a wide range of experiences, and having them become aware of and express what was felt and learned from those experiences, the role and functions of the PHN can be clarified, and this itself will lead

Beginner PHNs to have a strong PHN's image with clearer conviction.

2. Career choice motive

This concerns all nursing professions. More nursing students than general nurses selected because it is "a job that creates feeling of fulfillment" as the motive for selecting the nursing profession, and there are study findings that suggest that they were selecting the nursing profession more proactively⁴⁾, and it is believed that, when they are students, they have dreams and desires in the nursing profession. These study results are believed not to reflect the nursing profession as a whole but particularly general nurses, who comprise the biggest part of the nursing profession. However, Beginner PHNs, as part of this study, selected the profession not through proactive selection but through a process of elimination, such as 'it was recommended by family' and 'I selected without conviction'. Therefore Beginner PHNs met an attractive role model, they went no further than having only some admiration. As a background to this, compared to general nurses, the extent of the range of activities, size and complexity of health issues that they handle are difficult to understand for beginners who have not studied about the PHN, and it is believed that, compared to the general nurse profession, the role and function of the PHN may be difficult to picture in detail.

Moreover, before a rapid increase in Nursing Universities, education that pursues in depth the expertise of the PHN was believed to be possible for students who clearly and proactively selected 'I want to become a PHN' at the time of admission into the basic education program at junior colleges or public health nurse training centers. However, the current state of education in the university departments for nursing education is that nursing and public health education are offered basically as comprehensive education, that is, as a set⁴⁾, and it is believed that the curriculum places its focus on facilitating a general understanding of nursing in communities. That is, it is believed that the difference in the level of intention of the student towards becoming a PHN at the start. and the difference in the fulfillment of public health nurse education in the basic education period affect the Career choice motive.

That is, generally Beginner PHNs have become to have no firm professional selection.

Schein⁵⁾ said that the entry of organizational career is the following four steps of issues. At a first, a person will do a certain sort of preparatory career choice, then it will decide how need a kind of training or education. At a second, a person should develop a possible to become the realization of "dream"; useful occupational and organizational image as showing measure of own ability, value and hope. At a third, a person should practice the preparation of the career beginning through "expecting socialization". At a fourth, a person will be faced the real of searching a job. So, Beginner PHNs had become to remain a lack of second and third step.

3. Relation to Career choice motive, PHN's image and their Conviction level

When the consistency of various data was studied in all Beginner PHNs, and the relationship between Career choice motive and Conviction level of PHN's image were examined, and whether the motive was 'I had some admiration for the PHN as an attractive role model' or 'I think of the PHN as a kind of job that helps people', the Conviction level of the PHN's image was mixed, and no unique relationship was observed. Furthermore, the results were the same on the relationship between Career choice motive and PHN's image, and no unique relationship was observed in the data. That is, whatever the Career choice motive, no difference was found at the time of preemployment in their Conviction level of the PHN's image, or the details.

There is an attractive image but no definitive image within Beginner PHNs, so there ultimately is little admiration toward the PHN, and they unable to have a specific PHN's image, and this is believed to be related to their textbook-like responses when asked 'what is a PHN'.

However, with regards to how the later Career choice motive relates to identity growth, additional studies are needed at the same time as considering their experiences after employment.

4. Future prospects in the early stages for a desirable formation of the PHN identity

There is a need to understand the current situation, which is that Beginner PHNs are not fully able to grasp a specific PHN's image, and a need to define a departure point for continuing education forwarding the future. That is, career growth and career development would be facilitated by incorporating Management by Objectives(MBO)⁶ to achieve consistency with the objectives of the organization, and utilizing the "Individual-Organization Conformity Theory"7). It is, therefore, necessary to seek out where one stands with respect to the PHN's image by establishing an atmosphere wherein experienced PHNs can communicate the objective, the meaning, the effect and expected role of PHNs' activities, and so Beginner PHNs can speak out, and enforce the training program to improve their ability to execute operations.

However, it is important as a premise to understand the characteristics of Beginner PHNs-that Beginner PHNs are unable to express themselves because they are worried about how others would evaluate them, and that the background of Beginner PHNs is that they have little practical work experience, and moreover little life experience. It is, therefore, important to work on becoming a mentor/role model, and to make arrangements to enable intentional accumulation of experiences towards which, through actual work in PHNs' activities, positive satisfaction can be felt.

In the case of general nurses, the longer the years of experience, the more professional identity heightens, and, the higher professional adaptability is, as a result of self assessment, the higher self-education ability becomes; and a relationship, therefore, was found between the formation of professional identity and self-education ability⁸. The results need to be examined to see whether they would be the same for PHNs; however, improvement in self-education ability is one of the guidelines on professional ethics that is needed to guarantee quality⁹).

Moreover, what is important in the formation of an image in the early stages is, for basic education, that the instructors communicate to the students the thoughts and passion towards the PHN that the

instructors themselves have experienced, and that they clarify the meaning and positioning of the profession of the PHN by utilizing the valuable experience of practical training.

ACKNOWLEDGEMENTS

The Health Scientific Study Project, in-aid for Scientific Study, Ministry of Health, Labour and Welfare provided funds for this study.

The authors acknowledge and thank the public health nurses and staff who participated in this study.

REFERENCES

- Study on Improvement of Quality in Community Public Heath Personnel, Investigation and the Study Committee for the Quality Improvement Study on Community Public Health Personnel: Education of Personnel who Support Community Health Future image from the viewpoint of examination of actual situations and case studies. Chuo Houki Shuppan, Tokyo, 2004.
- 2) Nomura, Y.: Recent Public Health Administration in the Community and How Activities are performed by Public Health Nurses. Health Care, 45(5): 327-322, 2003.
- 3) Nishimura, T.: Ethical Consideration in the Clinic Care perspective. INR, 24(3): 97-102, 2001.
- 4) Utsumi, T.: A Study on Image of the Nurses in Nursing Students: Compare with Nursing Staffs from the view-point of the Gender Role. Bulletin of Kagawa Prefectural College of Health Sciences, 2: 81-86, 2001.
- Schein, E. H.: Career dynamics Matching individual and organizational needs. In Nimura, T. and Miyoshi, K.(ed.), Career dynamics Matching individual and organizational needs. 89-104, Hakuto Shobo, Tokyo, 1991.
- 6) Munakata, H.: Chapter Motivation to a job. In Munakata, H. and Watanabe, N.(ed.), Psychology of Career Growth. 81-98, Kawashima Shoten, Tokyo, 2002.
- 7) Watanabe, N.: Chapter9 Occupational stress. In Munakata, H. and Watanabe, N.(ed.), Psychology of Career Growth. 204-212, Kawashima Shoten, Tokyo, 2002.
- 8) Nakajima, S. and Nakanishi, K.: A Study of the Self-Educability and Post Adaptability for Nursing. Bulletin of Institute for Graduate nurses Japanese Red CrossSociety, 15: 1-11, 2000.
- 9) Japan Nursing Association: Ethical Guidelines for Nursing in 1998. INR, 24(3): 124-125, 2001.

就業時に新任保健師が抱いている保健師像 -職業選択動機と保健師像-

大倉 美佳,佐伯 和子,大野 昌美,宇座 美代子,和泉 比佐子 大柳 俊夫,塚田 久恵,四方 雅代,横溝 輝美

要 旨

新任保健師が就職時に抱いている保健師像を明らかにするため、14名を対象とし、4名の 面接者によって半構成面接と観察を実施した。

内容分析の結果、 '保健師像'のカテゴリーは保健師の活動内容に着目したもの、住民との関係性に着目したもの、社会的イメージに関するものの3つが抽出された。その '確信の程度'は、テキスト通りならば雄弁に語るが、具体性に乏しく、自信がないというものであった。また、魅力的な保健師のモデルに淡い憧れを抱いたもの、何となく思いついたものという2つの '職業選択動機'があった。

今後の新任保健師に対するアプローチとしては、実体験を通しながら豊かな保健師モデル を示すことが重要であると示唆された。