



The shift from a medical to a nursing orientation: A comparison of Swedish nursing students' expectations when entering the nursing degree programme in 2003 and 2013



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SUMMARY

Background: The focus of education in nursing has changed over time with a decreased focus on biomedicine and an increased focus on nursing science. It is therefore important to investigate whether these changes are also reflected in the students' conceptions and expectations of the programme over time.

Objectives: The aim of the study was to describe and compare two cohorts of students entering the nursing programme with 10 year in between (2003 and 2013), regarding their demographic background, reasons for wanting to become a registered nurse, expectations of the programme and perceptions of the nursing profession.

Design and Setting: The study was a descriptive cross-sectional cohort study carried out at a university in southern Sweden.

Participants: In all, 177 nursing students participated in the study, 89 from the 2003 cohort and 88 from the 2013 cohort.

Methods: Data were collected at the start of the programme using a questionnaire consisting of predefined and open-ended questions. The responses were statistically analysed and compared.

Results: The students' reasons for wanting to become a registered nurse remained stable over the 10-year period. The main reason stated by the students in both cohort was humanitarian, i. e. wanting to help others. The students' expectations regarding both the programme and the nursing profession had, however, changed significantly from a biomedical to a nursing orientation in the 10-year perspective.

Conclusions: The change in the students' preconceptions of the nursing education towards increasing importance of nursing science indicates the beginning of a paradigm shift.

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Introduction

Students' expectations of the nursing programme are based on previous knowledge and experience (cf. Smith and Wertlieb, 2005), as well as the general picture of nursing in society as a whole. The students' expectations of the programme are in turn important as they have an impact on their learning process (Lilja Andersson and Edberg, 2012). Education in nursing has changed over time, from focussing less on biomedicine and more on nursing science. However, there is little knowledge about whether these changes are reflected among young people entering the programme, and whether there has been a change over time.

In contrast to the long history of medical science, nursing science was not introduced until the 1970s in many Western countries (cf. Edwards, 1999). However, thirty years later, students' expectations

of the programme in nursing were that the content would be based on biomedicine, and that nursing would be concerned with the practical application of medical theory and the execution of medical tasks (Holmström and Larsson, 2005). Students' expectations of the programme were thus not in line with the actual content of the courses, which led to frustration and a period of adaptation before the actual process of learning occurred (Lilja Andersson and Edberg, 2012). Nursing science is since the early 1990s the main subject in Swedish nursing degrees, underlining the fact that nursing is a profession requiring autonomous responsibility (Swedish National Board of Health and Welfare, 2005; ICN, 2010). The requirements for enrolling in the Swedish degree programme in nursing changed at the same time, meaning that students were no longer required to have any previous experience or education in health care. This is similar to the situation in the USA, for example, where McEwen et al. (2013) showed that the consequence of this is that today's students are considerably less experienced, and not as well prepared as previously. In studies carried out in Australia concern was raised about the influence that the media, for example, might have on the way the nursing profession is

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portrayed in television series (Weaver et al., 2013), and the risk that students' expectations and perceptions of the nursing programme and the nursing profession were influenced more by the picture provided by medical drama television series, than real life.

Furthermore, the Swedish nursing programme has shifted from being a professional programme, to an academic education leading to a Bachelor's degree (Swedish Higher Education Act, 1992). The development towards higher education in nursing started in the early 1980s, and the Swedish nursing programme became a three-year university programme in 1993. Today's nursing programme is based on academic demands where critical thinking and a scientific approach are emphasized (Swedish Higher Education Act, 1992). Contemporary nursing education focuses on professional as well as academic skills, to train nurses who are not only competent, but capable of adapting to unfamiliar circumstances in unfamiliar contexts (Watson, 2006), and who can deal with the complexity of modern health care provision (Frenck et al., 2010). This increases the demands placed on both the teachers and the students. The question we set out to investigate is: do the students' preconceptions of the nursing programme also encompass the academic aspect, or are they still focused on the profession itself? It has been stated in several studies that differences between the students' expectations and the reality of the nursing programme are important (Beck et al., 1997; Watson et al., 1999; Last and Fulbrook, 2003; Holmström and Larsson, 2005; Tsai and Tsai, 2005). It is thus important to understand the expectations of nursing students upon entering the nursing programme, and whether they have changed over time.

Another issue of importance concerns the nursing students' motives for choosing nursing. There is a large body of research showing that students who choose nursing as a career often express altruistic motives, i.e. a desire to help others, and these motives appear to have remained stable over time (Boughn, 2001; Shatell et al., 2001; Mooney et al., 2008; Lilja Andersson and Edberg, 2012; Crick et al., 2013; Price et al., 2013; Arrigoni et al., 2014; Halperin and Mashiach, 2014). However, another study, carried out in the UK (Miers et al., 2007), showed that the students' altruistic motivation seemed to decrease as the programme progressed. Other studies have shown that aspects such as salary, benefits, working conditions and job security are not primary motivational factors when choosing nursing as a profession (Boughn and Lentini, 1999; Boughn, 2001), although one third of the students in an Indian study stated that one reason for becoming a nurse was to improve their financial situation (Poreddi et al., 2012), indicating that conditions differ between contexts. Although several studies have focused on the reasons for becoming a nurse, there is still little knowledge on the students' expectations regarding the content of the programme and their view of their chosen profession. Such knowledge is of significance when the students enter the programme in order to be able to facilitate their process of learning.

Aim

The aim of the study was to describe and compare two cohorts of students starting the nursing degree programme with 10 years in between (2003 and 2013), regarding their socioeconomic, educational and professional background, their reasons for wanting to become a registered nurse (RN), their expectations of the programme and perceptions of the nursing profession.

Material and Methods

Design

The study was a descriptive cross-sectional cohort study based on 89 students starting the nursing programme in 2003 who participated in a study with focus on aspects being important for their learning (Lilja Andersson and Edberg, 2012) and a follow-up cohort consisting of 88 students starting the same programme in 2013. The 10-year interval

was considered suitable in order to be able to capture possible changes in society being reflected in the students' preconceptions of the nursing degree programme and the profession. The data were collected during their first week of education using the same questionnaire.

Context

The study was carried out at a university in a medium-sized southern Swedish town. The nursing programme was in line with the national guidelines, a 3-year programme (equivalent to 180 credits, according to the European Credit Transfer and Accumulation System, ECTS), in which theoretical education and clinical practice accounted for approximately half each. The main subject, nursing science, corresponded to 115 ECTS credits, medical science 50 ECTS credits and public health care 15 ECTS credits. The programme led to a professional degree as a RN, as well as a Bachelor's degree. The same programme was provided in 2003 and 2013 with only minor changes concerning the order of the courses.

Sample

All students present during the first week of the programme were invited to participate in the study. They received oral and written information about the study and were informed that their participation was voluntary. A questionnaire was distributed to the students present on a particular day, to be completed in the classroom. A total of 96 students agreed to participate in the programme in 2003 and 93 in 2013, of which 89 and 88 students, respectively, were present on the day of data collection. The response rates were thus 93% (2003) and 95% (2013). For a description of each cohort, see Table 1.

Table 1

Characteristics of the students at the start of the programme in 2003 and 2013, comparisons between the cohorts calculated with Pearson's chi-squared test.

Characteristics	2003 n = 89	2013 n = 88	p-Value
Age, mean (SD) ^a	26.7 (6.48)	23.7 (6.31)	.002
Sex			.178
Women, n (%)	80 (89.9)	73 (83.0)	
Men, n (%)	9 (10.1)	15 (17.0)	
Born outside Sweden, n (%)	7 (7.9)	12 (13.6)	.270
Europe	4	7	
Middle East, Asia and Africa	3	5	
Civil status ²			.181
Single	40 (46.0)	44 (56.4)	
Married/cohabiting	47 (54.0)	34 (43.6)	
Having children, n (%)	28 (31.5)	18 (20.5)	.095
Upper secondary education, n (%) ¹			1.56
Natural Sciences	12 (13.6)	22 (25.3)	
Social Sciences	27 (30.7)	28 (32.2)	
Health and Social Care	29 (33.0)	20 (23.0)	
Other	20 (22.8)	17 (19.5)	
Mother's highest education, n (%) ¹			.000
Compulsory school (9 years)	40 (46.0)	10 (11.5)	
Upper secondary school	30 (34.5)	38 (43.7)	
University	16 (18.4)	25 (28.7)	
Father's highest education, n (%) ¹			.006
Compulsory school (9 years)	45 (51.1)	22 (25.6)	
Upper secondary school	22 (25.0)	37 (43.0)	
University	20 (22.7)	26 (30.2)	
Nursing programme first choice, n (%)	79 (88.8)	85 (96.6)	.046
Nursing programme first university education, n (%) ¹	69 (78.4)	68 (77.3)	.856
Previous working experience, n (%) ¹	85 (96.6)	82 (93.2)	.217
Previous working experience in the health care sector, n (%)	58 (68.3)	53 (67.9)	.798

Missing: ¹n ≤ 5, ²n = 12.

^a T-test.

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