



## The working lives of nurse teachers in mainland China and the United Kingdom: A questionnaire survey



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### SUMMARY

**Background:** Nurse education has undergone considerable changes creating new opportunities and challenges for nurse teachers. Limited comparative research of the working lives of nurse teachers has been reported, thus similarities and differences that may exist are unidentified.

**Aim:** This paper reports a study of the working lives of nurse teachers in mainland China and the United Kingdom.

**Design:** A cross-sectional questionnaire survey.

**Participants:** Census sample of nurse teachers working in four nursing schools in mainland China ( $n = 3$ ) and the United Kingdom ( $n = 1$ ). The overall response rate was 56.8% (China = 61, 61.0%, UK = 60, 53.1%).

**Methods:** Completion of questionnaire specifically developed for the study but comprising six validated tools to collecting data on: job satisfaction, sense of coherence, role conflict and role ambiguity, work empowerment and professional identification. Data on self-reported roles and personal details were also collected. Data were collected between September 2008 and January 2009.

**Results:** Both samples were satisfied with their jobs overall but reported low levels of satisfaction with promotion. Chinese nurse teachers working full-time reported the lowest level for sense of coherence and professional identification. Nurse teachers working full-time in the United Kingdom reported the highest role conflict score. Sense of coherence and work empowerment were significantly and positively correlated to job satisfaction. Role conflict and role ambiguity were negatively correlated (but not always significantly) to job satisfaction and its facets. For respondents in mainland China, professional identification was significantly and positively correlated with overall job satisfaction and its facets.

**Conclusions:** Strategies to improve job satisfaction with promotion opportunities for both samples are indicated. Respondents working full-time in both mainland China and the United Kingdom experienced greater challenges at work than their part-time colleagues.

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### Introduction

In mainland China, nursing education began a move into higher education in 1983 (Jiang, 2004) and, currently, there are three routes leading to nurse registration (diploma, associate degree, bachelor degree) provided by schools, colleges and universities (Eddins et al., 2011). The first group of graduate nurses gained their Masters degree in 1994 and the first PhD nursing programme commenced in 2004 (Wong and Zhao, 2012). However, nursing has struggled to integrate fully into the

Chinese university sector largely because there is an insufficient pool of nurse teachers with adequate qualifications to conduct teaching and research, particularly at the postgraduate level (Xu et al., 2000; Wong and Zhao, 2012).

Similar developments are apparent in the UK, although the assimilation of all nurse education into higher education was completed in the 1990s and all new nurses will be educated to at least degree level from 2013 (Nursing and Midwifery Council, 2010). Opportunities for nurses to gain higher degrees is also more firmly established in the UK but, as in mainland China, concerns about the benefits, status and future prospects of nurse education in the university sector have been raised resulting in calls for stronger action to support nursing academia to guarantee its future quality and relevance to healthcare (RCN, 2012).

There are known differences in the cultural perspectives of workers generally, and working patterns of nurse teachers specifically between mainland China and the UK, which are worth noting. First, employee

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attitudes to work in mainland China are based on concern for the collective group and are relationally oriented, whereas in Western countries such as the UK greater value is placed on individualistic and utilitarian attitudes (Wang, 2006). It is possible that these differing perspectives affect not only the level of job satisfaction experienced by nurse teachers but also the factors related to their job satisfaction.

Secondly, there is a different emphasis upon involvement in clinical practice and clinical credibility. In the UK, nurse teachers are primarily based in schools of nursing but are expected to maintain their clinical competence by spending at least 20% of their time in practice (NMC, 2008). While it is unclear to what extent this expectation is fulfilled, there are no established differences in the role of nurse teachers working on a full- or part-time basis. Similar guidelines do not exist in mainland China for full-time nurse teachers but nurse teachers employed on a part-time basis are primarily hospital-based nurses formally appointed by nursing schools to undertake classroom and clinical teaching (Li et al., 2008). In view of these differences, the role of employment status on the working lives of nurses in mainland China and the UK may be different and worthy of exploration.

### Background

Holopainen et al.'s (2007) review of 207 studies examining nurse teachers' job satisfaction indicated that nurse teachers were generally quite satisfied, although there were aspects of their work which caused dissatisfaction (e.g. time pressures, workload, lack of support). Gui et al.'s (2009a,b) review of the empirical literature drew upon 30 papers and demonstrated that organisational factors such as role strain, organisational climate and leadership styles contributed to nurse teachers' job satisfaction. While both reviews reported that demographic and professional characteristics such as age, educational background and job title can also exert an influence on job satisfaction, the findings were inconsistent. Most studies recruited full-time nurse teachers and, as a consequence, the role of employment status on nurse teacher satisfaction is under explored. In addition, very few studies explored the experience of clinical teachers who are similar to Chinese part-time teachers, although some insights are afforded by the work of Zheng et al. (2003), Davies et al. (2006) and Kelly (2006) working in mainland China, Canada and the United States (US), respectively.

Thus, most of the literature draws upon relatively dated research. Holopainen et al.'s (2007) review included papers between 1990 and 2004, while only seven studies used in Gui et al.'s (2009a) work drew upon papers published since 2000. In view of the significant and ongoing developments in nurse education globally, this is problematic. Data on the working lives of nurse teachers has been collected predominantly in Western countries, with few papers from Asia. Although this is beginning to change (Gui et al., 2011; Tang and Ghani, 2012), 23 of the studies in Gui et al.'s (2009a) paper originated in North America alone. Further, very few studies have explored part-time nurse teachers' working lives or undertaken comparative research of the working lives of nurse teachers in different countries, meaning that similarities and differences that may exist are unidentified.

### Methods

#### Aim

The study aimed to compare the working lives of nurse teachers in mainland China and the UK. The objectives were:

- To measure the levels of nurse teachers' job satisfaction in mainland China and the UK;
- To explore the relationships between job satisfaction and: sense of coherence (SOC), role conflict and role ambiguity, work empowerment, professional identification as a nurse and self-reported roles in both countries;

- To compare the levels of nurse teachers' job satisfaction by SOC, role conflict and role ambiguity, work empowerment, professional identification as a nurse and self-reported roles in mainland China and the UK by number of hours worked;
- To identify the similarities and differences in the relationships of job satisfaction and sense SOC, role conflict and role ambiguity, work empowerment, professional identification as a nurse, self-reported roles and selected demographic and professional variables in both countries.

#### Design

A cross-sectional questionnaire survey design was selected to address the study aim and objectives.

#### Sample

Four purposefully selected publicly funded nursing schools offering doctoral degrees in mainland China ( $n = 3$ ) and the UK ( $n = 1$ ) were selected. The Chinese schools were located in major cities in different provinces and were members of the government's strategy to promote excellence in higher education in the 1990s (i.e. Project 211). Two were subsequently members of the later Project 985 in recognition of their research standing. The UK school was also located in a major city and, as a member of the Russell Group of universities, is committed to excellence in research, teaching and learning. All nurse teachers who held a minimum contract of 9 months (applicable to China only) and had been in post for at least 6 months were invited to participate (excluding those on long-term absence). A designated contact person in each school was asked for information about their organisation. This information indicated that each of the three Chinese nursing schools had approximately 500 students and employed 50 nurse teachers, of who half or less worked full-time (i.e. at least 40 h per week). A total of 100 nurse teachers met the study's inclusion criteria. The nursing school in the UK was larger having in excess of 2500 students and employing 137 nurse teachers, of whom over three quarters worked on a full-time basis (i.e. at least 35 h per week). A total of 113 nurse teachers met the inclusion criteria. The overall response rate was 56.8% (China:  $n = 61$ , 61.0%; UK:  $n = 60$ , 53.1%).

#### Data Collection

Data were collected between September 2008 and January 2009 using a self-completed paper questionnaire. Permission to conduct the study was sought and granted by the dean of each school who was also asked to designate a contact person, to sign a consent form, and to provide data about the organisation (e.g. number of students and faculty members). Each contact person was asked to distribute the data collection packs (incl. cover letter explaining the purpose of the questionnaire and return envelope) to all potential respondents via their internal mail boxes, with re-distribution after 4 weeks to maximise response rates. Completed questionnaires were returned to the internal mail box of each contact person to ensure anonymity.

#### The Questionnaire

The questionnaire was developed specifically to meet the study aim and objectives and comprised eight sections, including six established scales. These are summarised in Table 1.

Additionally, data on self-reported roles were collected in order to gauge the extent of role diversity. This was achieved by asking respondents to indicate which of 12 activities they undertook (e.g. classroom teaching, clinical liaison, marking, grant applications, publications). The list was developed using Gui et al.'s (2009a, b) international review of the work of nurse teachers and advice from the research panel which included experienced nurse teachers in both mainland China and the UK: high (9–12), medium (5–8), and low (1–4). The final section of

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