

ROLE STRAIN IN NON-TRADITIONAL FEMALE NURSING STUDENTS

By

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ABSTRACT

The purpose of this study was to measure role strain in non-traditional female nursing students utilizing the Lengacher Role Strain Inventory (LRSI) and to identify the demographic variables that may contribute to elevated role strain. This study was a replication of a study by C.A. Lengacher (1993). The study utilized a convenience sample of 39 traditional female nursing students and 43 non-traditional female nursing students.

A nonexperimental, descriptive, correlational study design was used to collect data employing a demographic survey and the LRSI.

Role Strain occurred in the non-traditional student group and in the traditional student group. There was no significant difference between the groups. None of the demographic variables correlated with the scores emerged as significant factors.

Future research should include comparisons of the groups with other traditional and non-traditional female, non-nursing students. The LRSI needs to be refined and reduced in length.

Efforts should be made to determine ways to alleviate the stress in nursing education and to develop interventions that provide life-long coping skills for meeting the demands of a stressful profession.

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Chapter I

INTRODUCTION

In order to understand the focus of this study, it is necessary to consider three elements - multiple roles with role strain, non-traditional students, and students enrolled in nursing. Each aspect will be introduced separately with an effort made to explain how they relate and impact on each other.

Societal structure is composed of roles that individuals fulfill within their lives. Often, these roles determine our identity as a spouse or significant other, as a parent, as a worker, or as a student. Each role is composed of obligations that must be met for the roles to be fulfilled. Unfortunately, we exist in a finite order constrained by time and energy. Even desire can not overcome the burden of too many things to do and so little time.

According to Goode (1960) the fact that individuals have multiple roles is normative. The problem occurs when the demands from one role make it difficult to fulfill the obligations of another - role strain. This inherent conflict from the overload can impair well-being. Therefore, the individual is constantly negotiating ways to manage the role burden so as not to be overwhelmed.

Until the past 20 years, roles were very well defined and compartmentalized. Women were homemakers and mothers.

Men were fathers and providers. Individuals executed their roles within the confines of developmental stages. They went to college in their late teens and early twenties. They married and had children in the late twenties and thirties and provided for their families until retirement at sixty-five.

The feminist movement and the economic developments of the 1970's have caused an upheaval in the traditional role patterns. Women, in particular, have been affected. They are working outside of the home in increasing numbers. Some women are single parents who are sole providers for their children. Other women are career oriented trying to achieve professional success, while others have returned to school to complete or add to their education. Often, these pursuits are coupled with having to fulfill traditional homemaker, spouse and mother roles simultaneously with employment, career, or education goals.

It does not appear that male roles have changed as dramatically in the past twenty-five years. While men do engage in multiple roles, they have not necessarily taken on more role burden. They may assist in household and family tasks as directed, but the ultimate responsibility remains with women. Duxbury & Higgins (1991) conducted a study that indicated that there has been no redistribution of tasks inside the home to compensate women for their new roles outside.

So, although multiple roles are filled by both genders, women have assumed more roles outside of the traditional pattern. As they add to their load, well-being can be affected. Although there are conflicting results on the positive or negative effect of multiple roles for women (Gerson, 1985; Baruch & Barnett, 1986), it is obvious that role strain can occur when the demands of one role are in conflict with the fulfillment of another.

The literature on role strain reflects some of the conflicting results from studies of this complex phenomenon. Role strain does not always result in negative outcomes (Gerson, 1985). It is generally accepted that it is a subjective appraisal (Baruch & Barnett, 1986). The positive or negative outcomes are often determined by the individuals ability to cope (Jones, 1993) and the amount of control they have over the conflict (Piechowski, 1992). It is beyond the purpose of this study to appraise the psychological response to role strain. This study is attempting to identify its presence in a certain group of students.

An interesting development during the past two decades has occurred on college campus' throughout the country. Not only have women entered the work force in larger numbers but many have returned to school to complete or continue their education. Therefore, a new role has been added to the female mix - that of non-traditional student.

This trend is reflected in recent demographic studies

of the American undergraduate population. Adult students (age 25 years or older) now account for almost 40% of the undergraduates. (Kasworm & Pike, 1994). Hirschorn's study for the College Board (as cited in Chartrand, J.M., 1990) indicated that 60% of non-traditional students are women. These non-traditional students have life circumstances and needs that differ substantially from the traditional (age 17-22) undergraduate population (Breese & O'Toole, 1994). The female non-traditional student often juggles multiple roles not only as a student but as a parent, as a spouse, or as an employee (St. Pierre, 1985). The traditional student is often economically supported by the family and is less likely to be married or a parent (Seidl & Sautrer, 1990). For the non-traditional student the simultaneous commitment to a student role and other important life roles can be difficult (Chartand, 1990) and cause strain. These multiple roles compete for the individual's time and emotional energy causing conflict between various role obligations (Dyk, 1987).

In the realm of undergraduate academia, nursing is known as a demanding and difficult area of concentration. Nursing has historically attracted women to the profession and although more males are entering nursing, it is still an attractive area of concentration and career orientation for women. When non-traditional female students select nursing as their major, they are not only adding the student role

to their blend of roles but they are selecting an area of study that can be stressful and demanding. Meissner (1986) states that minutiae-filled examinations and stressful clinical evaluations make it difficult for students. Baccalaureate nursing students face some of the same stressors in education as medical students -long hours of study attempting to grasp difficult and tentative material as well as performing under pressure in the clinical setting (Beck & Srivastava, 1991). Preparation for the profession can be stressful (Russler, 1991). Nursing programs are often designed for "full-time, single students between the ages of 18 and 23. The timing of the courses and the rigidity of the program can be a problem for non-traditional students attempting to juggle multiple roles" (Stephens, 1992, p. 315). The typical female, non-traditional nursing student is "faced with many role expectations in addition to the academic pressures of a nursing program" (Lengacher, 1993, p.71).

To summarize, role strain is a recognized phenomenon that occurs when multiple roles have competing demands for fulfillment. In the last two decades, women have assumed more roles outside of the home resulting in additional role burden. Not only are more women employed, but increasing numbers of women have returned to college to complete or continue their education. This additional student role can be demanding and difficult to manage while maintaining other

role functions.

A difficult area of concentration, such as nursing, adds even more strain to the student role. As holistic nursing educators, faculty need to be aware of the individual needs of the students and recognize that the non-traditional student is operating from a different framework than the traditional undergraduate.

Purpose

It is the purpose of this study to measure role strain in non-traditional female nursing students utilizing the Lengacher Role Strain Inventory and to identify the demographic variables that may contribute to elevated role strain.

Research Questions

The research questions that will be examined are: 1) What is the incidence and level of role strain in a group of non-traditional female nursing students? 2) How do role strain levels in non-traditional female nursing students compare to traditional female nursing students? 3) What is the relationship between the demographic variables and the experience of role strain?

Summary

The three key components of the study have been briefly examined indicating that women perform multiple traditional roles in society. Adding the role of student to that of employee, spouse, significant other, parent, and homemaker

can be burdensome. If the student role includes a major in nursing, the burden can become particularly overwhelming and impair well-being. It is hoped that by identifying the degree of role strain in these non-traditional nursing students, the students and the faculty can make adjustments enabling the students to complete the degree with minimal stress and anxiety.

Chapter II

REVIEW OF THE LITERATURE

Introduction

The review of the literature is presented in three parts -addressing the three components of the study - role strain, non-traditional students, and nursing students.

Role strain

In order to acquaint the reader with the concept of role strain, some of the current literature is reviewed.

Gerson (1985) studied a group of women age 30-50 who returned to school at midlife. This group was compared to another with the same age and demographics that remained in their role as housewives. It was found that the students had more positive outcomes from their multiple roles than the housewives did with their more single focused role. This challenged the assumption that multiple roles necessarily implies strain.

In a study conducted by Baruch & Barnett (1986) women ages 35-55 were studied to measure well-being in multiple role women. The results suggested that it is the qualitative aspect of the role that is more important than the quantitative. It was concluded that well-being may be linked to a particular role and the subjective experience of the quality of the role. The findings suggested that if a particular role yields a net gain of benefits over costs, involvement in that role will have a positive impact on

well-being even if the number of roles increases.

Coverman (1989) attempted to clarify contradictory evidence regarding the relationship between multiple role demands and psychological well-being. Some of the problem surrounds the understanding of the concepts of role overload and role conflict. These two concepts were differentiated by the discomfort induced. Perceived role conflict causes stress but role overload does not. It was postulated that role overload and role conflict may affect stress differently. Fulfilling several roles simultaneously is role overload whereas role conflict occurs when pressure from one role is incompatible with pressure in another. Role overload was envisioned as leading to role conflict when one of the multiple roles makes it difficult to fulfill the demands of another. It was concluded that "perceived role conflict is detrimental to women's psychological health but role overload as measured by time expenditures is not" (Coverman, 1989, p. 980).

The complex relationship between multiple roles and depression is explored by McBride (1989). It was reported that multiple roles do have certain benefits but that there is anecdotal evidence that juggling multiple roles is a source of distress. In conclusion it was suggested that researchers need to avoid the count the burden approach and look at the dynamism involved in the relationship between reaction to roles and eventual consequences. McBride (1990)

reviewed the problems and benefits associated with women who are juggling multiple roles. A need for sensitivity to the experiences of the individual while taking into context the individual-to-family fit and the family-to-community fit was emphasized. It is the dynamism of the roles and the feedback loop that colors the individuals experience of juggling multiple roles.

Gender differences in work-family conflict were studied by Duxbury & Higgins (1991). They studied 131 men and 109 women in managerial/professional jobs with children whose spouse was in a managerial/professional job. It was concluded that roles have not been redistributed in the family to match the increased role responsibility outside the home. They suggested that women "have fewer options than men for achieving control over competing demands" (Duxbury & Higgins, 1991, p.71).

Piechowski (1992) reviewed the literature concerning the relationship of women's multiple roles to mental health. It was noted that the impact is unclear but reinforces the view that it is the quality of the roles that affects outcomes. This article focused on how the "interaction between the level of demands and degree of control affects the mental health of multiple role women" (Piechowski, 1992, p.132). It was concluded that psychological strain occurs when an individual has a high level of demands with low control over those demands.

Lengacher (1993) presented the development and study of an instrument to measure role strain. The purpose of the Lengacher Role Strain Inventory is to "assess the characteristic of role strain in female nursing students who have multiple roles (Lengacher, 1993, p.71). The purpose of the identification of role strain is seen as an assessment which can enable educators to assist female students so that they can meet their career goals and prevent role strain problems. The conflicting literature on role strain and well-being concluded that there can be positive as well as negative outcomes. Lengacher Role Strain Inventory (LRSI) was developed to measure the characteristic of role strain so that researchers can examine this characteristic in relationship to other variables. The LRSI is based on 10 content areas derived from a review of the literature: homemaker, support of husband or significant other, school, time pressures, economic pressures, personal health, children, career, community activities, and recreational activities. The instrument development is described in detail. Lengacher tested her instrument on five groups of students. Three groups were composed of nursing students. Group four was composed of female non-nursing students, and group five contained male non-nursing students. The results supported the premise that nursing student groups experienced higher role strain than non-nursing female and male college students.

Based on the review of the literature presented here, role strain in women is a dynamic phenomenon that can have positive or negative outcomes. The outcome depends on the individual perception of the quality of the role and the amount of control that can be exercised. It is important to identify its presence quantitatively so that the psychological effects on well-being can be evaluated.

Non-traditional students

A review of some of the current literature on non-traditional students is presented for consideration.

Dyk (1987) discussed the student/family conflict experienced by graduate students indicating that multiple roles compete for limited time and energy such that "increased time spent with family members usually means less time available for student responsibilities. Likewise, increased stress in the student role can make it difficult to comply with family obligations" (Dyk, 1989 p. 330). A strategy for effective role management was outlined indicating that anticipation of role strain can enable the student to develop strategies for dealing with the potential conflict.

Ross (1988) conducted a descriptive/qualitative research study to investigate the developmental factors involved in women entering or returning to college after age 25. The interview questionnaire indicated that the decision to return to school is a complex one for women over 25. It

is "influenced by a combination of internal and external factors" (Ross, 1988, p. 117) that are unique to the individual's history and goals. External factors may be related to work, changes in financial status and change in geographic location. Internal factors may be related to life situations such as divorce, empty nest, or the pursuit of postponed goals (Ross, 1988).

St. Pierre (1989) synthesized the information and research on the non-traditional female student. The growth of the female non-traditional student population since 1960 was recognized. The demographics of the reentry students was examined as well as the motivation of these women to return to college. The problems of reentry women were identified. Each woman should be viewed as a "unique individual who has to balance a wide variety of responsibilities while taking classes and pursuing her education" (St. Pierre, 1989, p. 230). It was concluded that "it is the responsibility of higher education to see that every adult woman who wants to pursue her education can with as little stress as possible" (St. Pierre, 1989, p.232).

Chartrand (1990) looked at non-traditional student adjustment to the college environment. It was noted that non-traditional students often underestimate their abilities and have difficulties making commitments to the student role and other important life roles simultaneously. A model to

enhance positive student self-evaluation was suggested. An unexpected correlation between commitment to the student role and distress was found. The students with heavy commitments in other roles and a high degree of commitment to the student role have increased distress. Interventions addressing the needs of the non-traditional student were suggested. Counseling interventions early in the academic career with orientation programs, workshops, and follow-up support groups were proposed as ways to build student confidence and success.

Kasworm and Pike (1994) studied the differences between adult undergraduate students and traditional students. They stated that their research demonstrates that existing traditional models of academic performance can not be generalized to the adult students. The young adult experience continues to be the basis for undergraduate admissions and student instruction and evaluation but in considering the adult learner "there is growing recognition of life cycle effects, work and family influences and the potential for different perceptions of the nature of commitment and motivation to pursue undergraduate education" (Kasworm & Pike, 1990, p.707). They concluded that new criteria should be established for the adult learner.

Breese & O'Toole (1994) studied adult women students in a qualitative study applying role exit theory to life transition in these women. They found that the role of

student for these women is a bridge to a new role. In order for these women to be successful, university administrators and faculty must have an understanding of the life transition taking place and acknowledge that the priorities of these women may not be the same as the overall university population.

In light of this, non-traditional female students should be viewed as unique individuals with different needs than the traditional college population. It is necessary for faculty and administrators to identify these needs and respond appropriately.

Nursing students

Several articles are presented to support the notion that nursing is a stressful area of concentration for undergraduate students.

Meissner (1986) chastised nursing faculty and practitioners for destroying the confidence of the student or beginning nurse. It was pointed out that the educational experience of nursing students is one in which many students fail to thrive. This continues right into the professional ranks where confidence is shattered and criticism is rampant. Educators and administrators were called upon to evaluate their interactions with the novice nurse and begin to nurture the future of the profession.

Seidl & Sauter (1990) conducted a study comparing traditional undergraduate nursing students with a group of

non-traditional students. They found that non-traditional students were unlike the traditional students not only in demographics but in learning patterns. It was suggested that as more non-traditional students are admitted, faculty may have to evaluate their teaching styles. The non-traditional student may be involved in multiple roles which may require some faculty flexibility regarding course expectations. It was suggested that there should be institutional awareness of support facilities for financial aid, day care arrangements and resources for part-time jobs. On a positive note, it was recognized that on the basis of life experiences, non-traditional students have acquired the skills to make superior professional judgments and are highly motivated and committed to practice (Siedl & Sauter, 1990).

Russler (1991) studied stress management in nursing education. The highly stressful environment of nursing education necessitates an attempt to find ways to help students reduce their anxiety. Although faculty emphasize the need for student sensitivity to emotional needs of patients, they fail to show the same sensitivity to their students. Although the study intervention did not have any significant effect on the students' anxiety, reported emotions or coping style, continued research was encouraged to respond to the high levels of stress in nursing education.

Stephens (1992) also looked at anxiety in nursing students. Her intervention involved using audiotaped imagery to reduce anxiety and improve test scores. Test scores did not improve but anxiety was lower in the treatment group. The problem of nursing student anxiety has not changed over the years and faculty need to be open to innovative anxiety reducing strategies that may help students cope.

According to these articles, stress and anxiety are well-known outcomes of nursing education. It is important for nursing faculty to be sensitive to the needs of the students and to assist with interventions to relieve the stress and maintain well-being.

Theoretical Framework

Goode's (1960) theory of role strain will be used as the theoretical framework for this study. It is Goode's contention that individuals can have a number of role obligations that can cause strain when the roles are in conflict. He states "If a person conforms in one direction, fulfillment will be difficult in another" (Goode, 1960, p.485). It is the individuals problem "to make his whole role system manageable, that is how to allocate his energies and skills so as to reduce role strain to some bearable proportions" (Goode, 1960, p.485).

Several of the researchers (Gersen, 1985, Baruch & Barnett, 1986, Lengacher, 1993) cited in the literature

review used the Goode theory as the framework for their studies. Applying Goode's theory to this study, role strain would occur in non-traditional nursing students when time and energy limits make it difficult to fully conform to all roles. The student role during a time of tests and papers may conflict with the needs of spouse and children. Employment roles do not always conform to clinical hours. Added to this is the time needed to study, to prepare care plans, to practice skills, and to study for the licensure examination. Within these given time demands, there is often no time for social outlets and recreation.

Summary

Three areas of literature review were examined - role strain, non-traditional female students, and the stress of nursing students. The theoretical framework based on Goode's (1960) theory of role strain was presented.

Chapter III

METHODOLOGY

Introduction

The research questions and definition of terms pertinent to this study are presented. Theoretical and operational definitions for the dependent and independent variables are given. The research design, sample, and data collection methods are discussed. The assumptions and limitations of the study are stated.

Study Variables

The major dependent variable is role strain. The major independent variable is the non-traditional student status in a nursing curriculum.

Theoretical definitions

For the purpose of this study, the variables are theoretically defined as follows:

Role strain - "the felt difficulty in meeting role obligations" (Goode, 1960, p.483) a "subjective experience that can be describe as a tension, a driving force, anxiety, and or a frustration that a woman may experience due to the multiple demands she puts upon herself or demands put upon her by others" (Lengacher, 1993, p.72).

Non-traditional students - undergraduate students age 25 years or older who have multiple roles - student, mother, significant other or wife, and employee (Lengacher, 1993) whose education has not been continuous. Also included will

be students less than 25 years who meet all other criteria.

Traditional students - undergraduate female students age 17-22 who are full-time students, who are attending college with no interruption in their education from high school, who have no full-time work experience or other obligations prior to starting their education (Seidel & Sauter, 1990) and who are unmarried with no children. Also included will be students older than 22 years who meet all other criteria.

The operational definitions of the variables for this study are as follows:

Role strain - as measured by the 100 item Lengacher Role Strain Inventory (LSRI). Score range is 0-500.

Nursing students - those enrolled in a nursing curriculum matriculating towards an RN or a bachelor's degree in nursing

Study Design

This study was a replication of a previous study by Lengacher (1993). Every effort was made to maintain the original study design.

A non-experimental, descriptive, correlational design was used to obtain information regarding the study population. The focus of this study was to determine if role strain is experienced by non-traditional female students enrolled in a nursing curriculum. Subjects for this study were obtained in a convenience sample of students

enrolled in a traditional nursing curriculum leading to a BS in nursing and those enrolled in an accelerated nursing curriculum leading to a BS in nursing designed for students who hold a previous non-nursing undergraduate degree.

Data were collected using a demographic form and using the Lengacher Role Strain Inventory developed by Lengacher (1993). The surveys were distributed at the end of a class period to four nursing lecture classes during a two week time period at the end of the spring semester. The original study was conducted during a stressful time of the semester for nursing students. It was determined that the end of the spring semester in 1996 qualified for that criteria. The subjects were asked to complete the survey at the time of distribution.

Study Population and sample

The study population consisted of all nursing students enrolled in either the traditional or accelerated curriculum. The sample was a convenience sample of 43 traditional nursing students and 39 non-traditional nursing students enrolled at Salisbury State University in separate tracks toward a BS in Nursing. One is a group of students following the traditional curriculum while the other is a group of previous degree students in an accelerated curriculum. Participation was voluntary. Completion and return of the survey was considered consent to participate.

Instrumentation

The Lengacher Role Strain Inventory (LRSI) developed by Lengacher (1993) was used to measure the dependent variable. It consists of a 100 item Likert-type instrument with 5 responses ranging from strongly agree (SA) to strongly disagree (SD) which allows for attitude intensity. The items are coded so that the higher the response number the higher the role strain. The items are proportionally structured questions - time pressures (18%), husband/significant other support (16%), school (16%), children (14%), career (12%), homemaker, (8%) economic pressures, (6%) personal & community activities (8%), and recreational activities (2%). The possible range of points varies from 0-500. A zero indicating absolutely no role strain and 500 indicating role strain choice in all items (Lengacher, 1993). Scoring information indicates that the results tell how much role strain an individual currently is having between multiple role obligations of student, family, and career. Scores above 250 indicate more difficulty in meeting all role obligations. Those below 250 indicate the ability to handle role obligations.

Cronbachs alpha was used to establish instrument reliability and internal consistency. Coefficients of .93, .94, and .95 were obtained for female nursing students and .95 and .87 were obtained for non-nursing community college groups. Construct validity was evidenced by comparing the

mean scores of female nursing students and male and female non-nursing students using a contrasted groups approach. Significant differences between the nursing student groups and the non-nursing students were $p < .05$, $p < .01$, $p < .0001$, and $p < .0000$. The internal consistency was quite high and resulted in high reliability coefficients. "Construct validity was evidenced by comparison of non-nursing groups with nursing groups by utilizing t tests for independent samples resulting in significant differences between groups" (Lengacher, 1993, p.75).

A personal information data form was also given to the participants. It consisted of check-list responses to a demographic survey. It was used to obtain demographic information pertinent to this study. The participants were not identified by name or personal identification number.

Reliability

A reliability analysis for this study was obtained on the LRSI using Cronbach's alpha coefficient. Five surveys from each group - traditional and non-traditional - were randomly selected to be used for computing the reliability. The rating for each item from the 10 surveys was entered as data, and the alpha coefficient was computed. The overall alpha score on the LRSI for this sample was .7132.

Data Collection

Written permission from the original researcher to use the LRSI was obtained (Appendix A). A copy of the survey

(Appendix B) and the scoring scale (Appendix C) were included with permission to reproduce it for this study.

The survey packets containing a letter of explanation (Appendix D), a demographic form (Appendix E), and the LRSI were distributed to nursing students at the end of a lecture class setting. Each packet was numbered for collating purposes. The participants were informed that participation was voluntary. They were asked to complete the form at the time of distribution. However, participants who chose to participate and did not have time were instructed to return it at a later time. The participants were informed that the survey took about 15 minutes to complete. Completion and return of the survey was considered consent to participate in the study.

The LRSI contained Likert Scale responses to 100 questions. There were five possible responses - SA (strongly agree), A (agree), U (uncertain or does not apply), D (disagree), and SD (strongly disagree). In consultation with the developer of the instrument, the participants were instructed to use the U (uncertain response to those questions that "did not apply".

Method of Data Analysis

Each survey was scored using the LRSI scoring scale criteria. Individual total scores were computed for each participant. The demographic survey responses were coded for data entry.

The test scores and the demographic codes were used for statistical analysis via SPSS/X - vax system at Salisbury State University. The demographic surveys were analyzed for frequency and percentage for each category - status (traditional or non-traditional based on the study definitions), marital status (married or not married), degree (no degree or previous degree), program (BS or Acc BS), employment (not working, part time, full time), student (part time, full time).

The mean LRSI scores for the traditional and non-traditional groups were compared using a t test for independent samples. A t test for independent samples was performed comparing the mean scores for the demographic variables categories to determine if any of the variables produced a significant difference in the mean scores.

Analysis of variance was used to analyze the mean scores for the three categories of the work variable.

Correlational analysis was conducted to determine if there was a significant relationship between any of the variables and the LRSI score.

Ethical Implications

The approval of the Salisbury State University Human Volunteer's Committee was obtained prior to beginning this study (Appendix F). Participation was voluntary. Every effort was made to protect the rights and well being of the participants. Information from the demographic

questionnaire was destroyed after coding. No substantial psychological or physiological stress was caused by the questions asked.

Assumptions of the Study

The researcher assumed that participants would complete and return the questionnaires and would answer the questions truthfully. It was assumed that the instrument (LRSI) measured the phenomenon of role strain.

Limitations of the Study

This was a convenience sample of baccalaureate nursing students at Salisbury State University which limits the generalizations that can be drawn from this study.

This study utilized a self-administered questionnaire completed during a class period rather than an interview with open ended questions which could have illuminated the participants' responses. The survey contained 100 items which made some statistical analysis more complicated. The length of the survey may have affected participants' concentration in answering consistently.

Summary

The research methodology used to conduct this study has been outlined in this chapter.

CHAPTER IV

DATA ANALYSIS

Introduction

The demographic characteristics of the study population are described. The results of the data analysis are presented. The three research questions are addressed.

The statistical package for Social Science (SPSS-X) was used to analyze the results of the data collection. The alpha level was set at 0.05 as the level of significance for the study.

Sample Characteristics

This study utilized a convenience sample of 82 baccalaureate nursing students enrolled at Salisbury State University. Thirteen of the participants were enrolled in an accelerated BS track for those with a previous degree. Sixty-nine students were enrolled in the traditional four year BS track (Table 1) Participants were categorized by responses to the demographic questionnaire into two groups - traditional and non-traditional students based on the criteria established by the study. In this study, 43 (52.4%) were identified as traditional students while 39 (47.6%) were identified as non-traditional (Table 1).

The other demographic variables were analyzed for frequency and percentage of occurrence as summarized in Table 1. Fifty-eight (70.7%) of the participants were not married. Twenty-four (29.3%) were married. Sixty-three

(76.8%) had no children while 19 (23.2%) had children. Sixty-one (74.4%) had no previous degree while 21(25.6%) had a previous degree. In terms of employment, 21 (25.6%) were not working while 54 (65.9%) worked part time. Seven (8.5%) of the participants worked full time. Most of the participants were full time students - 62 (75.6%) while 20 (24.4%) were enrolled parttime.

Research Questions

The first research question asked what is the incidence and level of role strain in a group of non-traditional female nursing students. As noted in Table 2, of the 39 non-traditional students surveyed, 29 (74%) scored >250 on the LRSI indicating role strain. In the traditional group, of the 43 participants 27 (62%) scored >250 indicating role strain.

The second question asked if there were significant differences in the mean scores between the traditional and the non-traditional students. The mean score for the traditional students was 259.30 with a SD of 37.34 while the mean score for the non-traditional students was 270.35 with a SD of 39.49 (see Table 3) Parameters for this study indicated that a score >250 indicates role strain. There was no significant difference between the groups ($t=-1.30$, $p=.911$).

Table 1

Demographic Characteristics of the Sample

Variable	Frequency (n)	Percent
STATUS		
traditional	43	52.4%
non-traditional	39	47.6%
MARITAL STATUS		
not married	58	70.7%
married	24	29.3%
CHILDREN		
no children	63	76.8%
children	19	23.2%
DEGREE		
no degree	61	74.4%
degree	21	25.6%
PROGRAM		
BS	69	84.1%
acc BS	13	15.9%
WORK		
not working	21	25.6%
part time	54	65.9%
full time	7	8.5%

Table 1 Continued

Demographic Characteristics of the Sample

Variable	Frequency (n)	Percent
STUDENT		
part time	20	24.4%
full time	62	75.6%

Table 2

Incidence and Level of LRSI > 250 in Traditional and Non-traditional Female Nursing Students

Status	n	Score >250	Percent
Trad.	43	27	62%
Non-trad.	39	29	72%

Table 3

t test for Mean LRSI Scores with respect to Traditional and
Non-traditional Status

Variable	n	M	SD	t val.	prob.
Trad.	43	259.30	37.34	-1.30	.911
Non-trad.	39	270.35	39.49		

df =

8

p < .05

The third research question asked if there was a relationship between the demographic variables and the experience of role strain. Each demographic variable was compared for the two groups using a t test for independent samples.

The mean LRSI scores for the two academic BS tracks were compared in Table 4. The BS group score was 264.98 with a SD of 39.10. The acc BS group mean score was 262.30 with a SD of 36.81. There is no significant difference between the two groups ($t=.23$, $p=.970$).

Table 5 illustrates the results from comparing the mean LRSI scores for the demographic variable of marital status. The mean score for the not married group was 267.55 with a SD of 36.88. For the married group, the mean score was 257.33 with a SD of 42.22. There was no significant difference between those who were married and those who were not ($t=1.09$, $p=.645$). The mean LRSI scores for parent role are found in Table 6. The mean score for those without children was 266.30 with a SD of 40.14. The mean score for those with children was 258.78 with a SD of 32.96. There was no significant difference between the two groups ($t=.74$, $p=.460$).

Those participants without a previous college degree were compared with those who had a previous degree (Table 7). The group with no degree had a mean score of 263.45 with a SD of 40.10. Those with a previous degree had a mean

Table 4

t test for Mean LRSI Scores with respect to BS Track

Variable	n	M	SD	t value	prob.
BS	69	264.98	39.10	.23	.970
Acc B	13	262.30	36.81		
					df =
					80
					p < .05

Table 5

t test for Mean LRSI with respect to Marital Status

Variable	n	M	SD	t value	prob.
Not Marr.	58	267.55	36.88	1.09	.645
Marr.	24	257.33	42.22		

df =

80

p < .05

Table 6

t test for Mean LRSI with respect to Parental Status

Variable	n	M	SD	t Value	prob.
no child.	63	266.30	40.15	.74	.460
child	19	258.78	32.96		

df =

80

p < .05

Table 7

t test for Mean LRSI Score with respect to Previous Degree

Variable	n	M	SD	t Value	prob.
no degree	61	253.45	40.10	-.44	.369
degree	21	267.76	34.31		

df = 80

p < .05

Table 8

t test for Mean LRSI with respect to Part-time and Fulltime
Student Status

Variable	n	M	SD	t Value	prob.
Part time	20	268.30	35.91	.50	.669
Full time	62	263.35			df =

80

p < .05



College of Nursing
Health Sciences Center
University of South Florida
12901 Bruce B. Downs Blvd., MDC Box 22
Tampa, Florida 33612-4799
(813) 974-2191

Maurer, McAllister

Dear Colleague:

Thank you for your interest in using the Lengacher Role Strain Inventory in your research. Enclosed is a copy of the Lengacher Role Strain Inventory which you may duplicate for use in your specific research project as submitted in your signed agreement.

Please feel free to duplicate the inventory for the necessary number you need in your research project. This permission does not allow for free distribution of the inventory for use by any other individuals.

In addition, I have enclosed the scoring sheet, which you will need for scoring of your results. Normative data is published in the **Journal of Nursing Education**, February 1993, Volume 32, Number 2 in the article "Development and Study of an Instrument to Measure Role Strain."

Thank you for the interest in this concept. I am continuing to refine the instrument and will notify you of future changes.

Sincerely,

Cecile A. Lengacher

Cecile A. Lengacher, RN, PhD

APPENDIX B

LENGACHER ROLE STRAIN INVENTORY

The following questions are concerned with the role strain that nursing students experience. Role strain is the difficulty felt in meeting multiple role obligations. Please indicate to what degree you agree or disagree with each of the statements below by CIRCLING the correct answer.

SA - Strongly agree

A - Agree

U - Uncertain or does not apply

D - Disagree

SD - Strongly disagree

- | | |
|---|-------------|
| 1. My family does not make me feel guilty for having less time for them. | SA A U D SD |
| 2. My role as student does not cause me strain. | SA A U D SD |
| 3. I don't worry about my children when I am in school. | SA A U D SD |
| 4. I do not feel guilty if I need to set aside study time away from family. | SA A U D SD |
| 5. I find myself unable to satisfactorily manage routine household tasks. | SA A U D SD |
| 6. My family/significant other get much criticism because I am in school. | SA A U D SD |
| 7. I am going to school to please others. | SA A U D SD |
| 8. I am often tired and it is very difficult to handle strain. | SA A U D SD |
| 9. My family/significant others support me in my return to school. | SA A U D SD |
| 10. My significant others decrease my role strain. | SA A U D SD |
| 11. I feel better when my husband/father of children spends time with them. | SA A U D SD |
| 12. Going back to school challenges me intellectually. | SA A U D SD |
| 13. Returning to school will never be worth the economic rewards. | SA A U D SD |
| 14. Returning to school is necessary for my career, therefore the strain is worthwhile. | SA A U D SD |
| 15. Returning to school is not vital to my career and the strain is not worthwhile. | SA A U D SD |
| 16. Going back to school only adds to my mental fatigue. | SA A U D SD |
| 17. Going back to school makes me feel I am on my way to better things. | SA A U D SD |
| 18. Taking time to relax and meet my personal needs makes me feel better. | SA A U D SD |
| 19. I am able to maintain good relationships with my family while in school. | SA A U D SD |
| 20. I can pay for extra help such as typing which gives me more time. | SA A U D SD |
| 21. My family/significant others resent my returning to school. | SA A U D SD |
| 22. I feel strain when husband/father of children does not spend time with them. | SA A U D SD |
| 23. I seem to be ill more often since I am in school. | SA A U D SD |
| 24. Going back to school will not give me future security. | SA A U D SD |
| 25. Not being able to afford to pay for typing adds to my time pressures. | SA A U D SD |
| 26. I am able to handle the strain of going to school. | SA A U D SD |
| 27. I can manage my time for different roles (student, professional, personal). | SA A U D SD |
| 28. My job makes me feel worthwhile. | SA A U D SD |
| 29. I worry about my children when I am in school. | SA A U D SD |
| 30. Working in my profession is time consuming and exhausting. | SA A U D SD |
| 31. I have received no praise/recognition from colleagues since I have been in school. | SA A U D SD |

32. Quitting school would decrease my role strain.	SA A U D SD
33. My husband/significant other is not supportive to my educational pursuits.	SA A U D SD
34. I feel badly that I have eliminated community activities since I have been in school.	SA A U D SD
35. My friends criticize me for not completing my household chores.	SA A U D SD
36. I do not have time to relax or read a book.	SA A U D SD
37. I do not have enough personal time.	SA A U D SD
38. I do not seem to have time for all my life roles (student, professional, and personal).	SA A U D SD
39. Worrying and arranging child care for my children is a strain on me.	SA A U D SD
40. My role as student causes much strain for me.	SA A U D SD
41. Completing my household and student obligations and working is not as difficult as I thought.	SA A U D SD
42. I have a satisfactory place to study.	SA A U D SD
43. Returning to school will give me future economic rewards.	SA A U D SD
44. I have received praise/recognition from colleagues since I have been in school.	SA A U D SD
45. My husband/significant other is not economically supportive of my educational pursuits.	SA A U D SD
46. My family/children do not decrease their demands on me when I have to prepare for a test.	SA A U D SD
47. Going back to school helps make me feel more worthwhile.	SA A U D SD
48. I have maintained good relationships with family/children since I've returned to school.	SA A U D SD
49. My family helps me in completing household duties each week.	SA A U D SD
50. Worrying about the cost of my education adds to my strain.	SA A U D SD
51. I feel pressure from others to go back to school to maintain my skills.	SA A U D SD
52. If I don't get my housework done before school work, it causes strain.	SA A U D SD
53. I have adequate time to complete household tasks.	SA A U D SD
54. Quitting school would only increase my role strain.	SA A U D SD
55. I feel less strain if my school work is completed before housework.	SA A U D SD
56. My career decreases strain because it makes me feel important.	SA A U D SD
57. My family/significant others assist in making meals.	SA A U D SD
58. Giving up recreational activities has helped me cope with demands.	SA A U D SD
59. My family/significant others criticize me when I am unable to complete my household duties.	SA A U D SD
60. I am beginning to think going back to school has no future advantage.	SA A U D SD
61. My husband/significant other is economically supportive of my educational pursuits.	SA A U D SD
62. I do not have adequate time to complete household tasks.	SA A U D SD
63. My professional career has not suffered since I have been in school.	SA A U D SD
64. My husband/significant other is emotionally supportive of my educational pursuits.	SA A U D SD
65. Having little personal time does not bother me.	SA A U D SD
66. I have more conflicts with family/children when I am in school.	SA A U D SD
67. I do not worry about the cost of my education.	SA A U D SD

68. I feel guilty for not having time to do things with my family.	SA A U D SD
69. My role as student makes me feel good about myself.	SA A U D SD
70. My family/friends give me much emotional support.	SA A U D SD
71. I have someone who shares the household tasks and relieves me of this.	SA A U D SD
72. Sometimes I feel I should quit my job to cope.	SA A U D SD
73. I do not have a satisfactory place to study.	SA A U D SD
74. I have a system for organizing my time to meet my obligations.	SA A U D SD
75. I make special time for myself since I have been in school.	SA A U D SD
76. I have no special time for myself since I have been in school.	SA A U D SD
77. I am going to school to please myself.	SA A U D SD
78. I have maintained my personal health which prevents role strain.	SA A U D SD
79. My role as student does not make me feel good about myself.	SA A U D SD
80. My relationships with my family have deteriorated since I have returned to school.	SA A U D SD
81. My friends are supportive of me when I am unable to complete my housework.	SA A U D SD
82. I find it exhausting to continue with my household obligations in addition to studying and working.	SA A U D SD
83. I feel good about wanting to go back to school to improve my skills.	SA A U D SD
84. No one contributes to my household tasks and the burden is on me.	SA A U D SD
85. I feel guilty about eliminating activities in church and community.	SA A U D SD
86. My family/friends do not give me emotional support.	SA A U D SD
87. I have a satisfactory routine for completing household tasks.	SA A U D SD
88. I still participate in community activities that are meaningful to me.	SA A U D SD
89. I feel guilty that my family/significant others are under more stress because I am in school.	SA A U D SD
90. My significant others increase my role strain.	SA A U D SD
91. Having to give up recreational activities has increased my strain.	SA A U D SD
92. My family/children get much recognition because I am in school.	SA A U D SD
93. There never seems to be enough time to complete my obligations.	SA A U D SD
94. I do not have to worry about child care arrangements.	SA A U D SD
95. My family/significant others criticize me when I am unable to make meals.	SA A U D SD
96. I feel guilty if I spend time studying away from family/significant others.	SA A U D SD
97. My family/significant others are not under stress because I am in school.	SA A U D SD
98. My professional career has suffered since I have been in school.	SA A U D SD
99. My family/children do not demand a lot of me when they know I need to study for a test.	SA A U D SD
100. I have maintained my support of church activities and this has helped my strain.	SA A U D SD

APPENDIX C

LENGACHER ROLE STRAIN INVENTORY

SCORING INFORMATION

Your score on the Lengacher Role Strain Inventory will tell you how much role strain you are currently having, between your multiple role obligations of student, family, and career. The highest score you can obtain is 500, and the lowest is 0.

Those scores above 250 would indicate more difficulty in meeting all role obligations. Those below 250 would indicate that the individual is able to handle his/her role obligations.

LENGACHER ROLE STRAIN INVENTORY

The following questions are concerned with the role strain that nursing students experience. Role strain is the difficulty felt in meeting multiple role obligations. Please indicate to what degree you agree or disagree with each of the statements below by CIRCLING the correct answer. When all items are answered, lift the pages to score your inventory.

SA - Strongly agree
 A - Agree
 U - Uncertain
 D - Disagree
 SD - Strongly disagree

1. My family does not make me feel guilty for having less time for them.	1 2 3 4 5	(1)
2. My role as student does not cause me strain.	1 2 3 4 5	(2)
3. I don't worry about my children when I am in school.	1 2 3 4 5	(3)
4. I do not feel guilty if I need to set aside study time away from family.	1 2 3 4 5	(4)
5. I find myself unable to satisfactorily manage routine household tasks.	5 4 3 2 1	(5)
6. My family/significant other get much criticism because I am in school.	5 4 3 2 1	(6)
7. I am going to school to please others.	5 4 3 2 1	(7)
8. I am often tired and it is very difficult to handle strain.	5 4 3 2 1	(8)
9. My family/significant others support me in my return to school.	1 2 3 4 5	(9)
10. My significant others decrease my role strain.	1 2 3 4 5	(10)
11. I feel better when my husband/father of children spends time with them.	1 2 3 4 5	(11)
12. Going back to school challenges me intellectually.	1 2 3 4 5	(12)
13. Returning to school will never be worth the economic rewards.	5 4 3 2 1	(13)
14. Returning to school is necessary for my career, therefore the strain is worthwhile.	1 2 3 4 5	(14)
15. Returning to school is not vital to my career and the strain is not worthwhile.	5 4 3 2 1	(15)
16. Going back to school only adds to my mental fatigue.	5 4 3 2 1	(16)
17. Going back to school makes me feel I am on my way to better things.	1 2 3 4 5	(17)
18. Taking time to relax and meet my personal needs makes me feel better.	1 2 3 4 5	(18)
19. I am able to maintain good relationships with my family while in school.	1 2 3 4 5	(19)
20. I can pay for extra help such as typing which gives me more time.	1 2 3 4 5	(20)
21. My family/significant others resent my returning to school.	5 4 3 2 1	(21)
22. I feel strain when husband/father of children does not spend time with them.	5 4 3 2 1	(22)
23. I seem to be ill more often since I am in school.	5 4 3 2 1	(23)
24. Going back to school will not give me future security.	5 4 3 2 1	(24)
25. Not being able to afford to pay for typing adds to my time pressures.	5 4 3 2 1	(25)
26. I am able to handle the strain of going to school.	1 2 3 4 5	(26)
27. I can manage my time for different roles (student, professional, personal).	1 2 3 4 5	(27)
28. My job makes me feel worthwhile.	1 2 3 4 5	(28)
29. I worry about my children when I am in school.	5 4 3 2 1	(29)
30. Working in my profession is time consuming and exhausting.	5 4 3 2 1	(30)
31. I have received no praise/recognition from colleagues since I have been in school.	5 4 3 2 1	(31)

32. Quitting school would decrease my role strain.	5	4	3	2	1	(32)
33. My husband/significant other is not supportive to my educational pursuits.	5	4	3	2	1	(33)
34. I feel badly that I have eliminated community activities since I have been in school.	5	4	3	2	1	(34)
35. My friends criticize me for not completing my household chores.	5	4	3	2	1	(35)
36. I do not have time to relax or read a book.	5	4	3	2	1	(36)
37. I do not have enough personal time.	5	4	3	2	1	(37)
38. I do not seem to have time for all my life roles (student, professional, and personal).	5	4	3	2	1	(38)
39. Worrying and arranging child care for my children is a strain on me.	5	4	3	2	1	(39)
40. My role as student causes much strain for me.	5	4	3	2	1	(40)
41. Completing my household and student obligations and working is not as difficult as I thought.	1	2	3	4	5	(41)
42. I have a satisfactory place to study.	1	2	3	4	5	(42)
43. Returning to school will give me future economic rewards.	1	2	3	4	5	(43)
44. I have received praise/recognition from colleagues since I have been in school.	1	2	3	4	5	(44)
45. My husband/significant other is not economically supportive of my educational pursuits.	5	4	3	2	1	(45)
46. My family/children do not decrease their demands on me when I have to prepare for a test.	5	4	3	2	1	(46)
47. Going back to school helps make me feel more worthwhile.	1	2	3	4	5	(47)
48. I have maintained good relationships with family/children since I've returned to school.	1	2	3	4	5	(48)
49. My family helps me in completing household duties each week.	1	2	3	4	5	(49)
50. Worrying about the cost of my education adds to my strain.	5	4	3	2	1	(50)
51. I feel pressure from others to go back to school to maintain my skills.	5	4	3	2	1	(51)
52. If I don't get my housework done before school work, it causes strain.	5	4	3	2	1	(52)
53. I have adequate time to complete household tasks.	1	2	3	4	5	(53)
54. Quitting school would only increase my role strain.	1	2	3	4	5	(54)
55. I feel less strain if my school work is completed before housework.	1	2	3	4	5	(55)
56. My career decreases strain because it makes me feel important.	1	2	3	4	5	(56)
57. My family/significant others assist in making meals.	1	2	3	4	5	(57)
58. Giving up recreational activities has helped me cope with demands.	1	2	3	4	5	(58)
59. My family/significant others criticize me when I am unable to complete my household duties.	5	4	3	2	1	(59)
60. I am beginning to think going back to school has no future advantage.	5	4	3	2	1	(60)
61. My husband/significant other is economically supportive of my educational pursuits.	1	2	3	4	5	(61)
62. I do not have adequate time to complete household tasks.	5	4	3	2	1	(62)
63. My professional career has not suffered since I have been in school.	1	2	3	4	5	(63)
64. My husband/significant other is emotionally supportive of my educational pursuits.	1	2	3	4	5	(64)
65. Having little personal time does not bother me.	1	2	3	4	5	(65)
66. I have more conflicts with family/children when I am in school.	5	4	3	2	1	(66)
67. I do not worry about the cost of my education.	1	2	3	4	5	(67)

68. I feel guilty for not having time to do things with my family.	5 4 3 2 1	(68)
69. My role as student makes me feel good about myself.	1 2 3 4 5	(69)
70. My family/friends give me much emotional support.	1 2 3 4 5	(70)
71. I have someone who shares the household tasks and relieves me of this.	1 2 3 4 5	(71)
72. Sometimes I feel I should quit my job to cope.	5 4 3 2 1	(72)
73. I do not have a satisfactory place to study.	5 4 3 2 1	(73)
74. I have a system for organizing my time to meet my obligations.	1 2 3 4 5	(74)
75. I make special time for myself since I have been in school.	1 2 3 4 5	(75)
76. I have no special time for myself since I have been in school.	5 4 3 2 1	(76)
77. I am going to school to please myself.	1 2 3 4 5	(77)
78. I have maintained my personal health which prevents role strain.	1 2 3 4 5	(78)
79. My role as student does not make me feel good about myself.	5 4 3 2 1	(79)
80. My relationships with my family have deteriorated since I have returned to school.	5 4 3 2 1	(80)
81. My friends are supportive of me when I am unable to complete my housework.	1 2 3 4 5	(81)
82. I find it exhausting to continue with my household obligations in addition to studying and working.	5 4 3 2 1	(82)
83. I feel good about wanting to go back to school to improve my skills.	1 2 3 4 5	(83)
84. No one contributes to my household tasks and the burden is on me.	5 4 3 2 1	(84)
85. I feel guilty about eliminating activities in church and community.	5 4 3 2 1	(85)
86. My family/friends do not give me emotional support.	5 4 3 2 1	(86)
87. I have a satisfactory routine for completing household tasks.	1 2 3 4 5	(87)
88. I still participate in community activities that are meaningful to me.	1 2 3 4 5	(88)
89. I feel guilty that my family/significant others are under more stress because I am in school.	5 4 3 2 1	(89)
90. My significant others increase my role strain.	5 4 3 2 1	(90)
91. Having to give up recreational activities has increased my strain.	5 4 3 2 1	(91)
92. My family/children get much recognition because I am in school.	1 2 3 4 5	(92)
93. There never seems to be enough time to complete my obligations.	5 4 3 2 1	(93)
94. I do not have to worry about child care arrangements.	1 2 3 4 5	(94)
95. My family/significant others criticize me when I am unable to make meals.	5 4 3 2 1	(95)
96. I feel guilty if I spend time studying away from family/significant others.	5 4 3 2 1	(96)
97. My family/significant others are not under stress because I am in school.	1 2 3 4 5	(97)
98. My professional career has suffered since I have been in school.	5 4 3 2 1	(98)
99. My family/children do not demand a lot of me when they know I need to study for a test.	1 2 3 4 5	(99)
100. I have maintained my support of church activities and this has helped my strain.	1 2 3 4 5	(100)

APPENDIX D

I am currently conducting a study on the presence of role strain in non-traditional female nursing students. I am seeking the assistance of traditional and non-traditional nursing students in completing a questionnaire and demographic form concerned with identifying multiple roles that can cause strain when an individual is attempting to meet various role obligations. The demographic form is brief. The questionnaire is 100 items and should take about 15 minutes of your time to complete. Every effort will be made to keep the information provided confidential. Your name does not appear on the questionnaire.

Your cooperation and participation are strictly voluntary and your choice to participate or not participate will in no way affect your grade or class standing. You may choose not to complete the questionnaire. Your participation is very valuable and will help me measure role strain and correlate its presence with specific demographic variables that may contribute to elevated role strain.

If you have any questions about this study or would be interested in the results, please contact Dr. Shielda Rodgers, Principal Investigator, SSU - Nursing, 543-6401 or Maureen McAllister, RN, Student Investigator, 742-5421. Thank you for your cooperation.

APPENDIX E

DEMOGRAPHIC QUESTIONNAIRE

PLEASE MARK OR ANSWER ALL QUESTIONS THAT APPLY

NURSING STUDENT

ENROLLED IN FOUR YEAR BS DEGREE PROGRAM

ENROLLED IN ACCELERATED BS DEGREE PROGRAM

FULL TIME STUDENT PART TIME STUDENT

AGE _____ GENDER _____ MALE _____ FEMALE

RELATIONSHIP STATUS _____ SINGLE _____ MARRIED _____ SEPARATED

_____ DIVORCED _____ NOT MARRIED BUT INVOLVED
WITH SIGNIFICANT OTHER

CHILDREN IN HOUSEHOLD DURING THE ACADEMIC YEAR

NO YES

IF YES, HOW MANY? _____ AGES _____

EDUCATIONAL STATUS

NO PREVIOUS FOUR YEAR COLLEGE DEGREE

PREVIOUS DEGREE BACHELOR'S MASTER'S OTHER

EMPLOYMENT DURING ACADEMIC YEAR

PART TIME HOURS PER WEEK

FULL TIME HOURS PER WEEK

APPENDIX F

STATEMENT OF APPROVAL

COMMITTEE ON HUMAN VOLUNTEERS

SALISBURY STATE UNIVERSITY

Date 5-15-96

MEMO TO: Shielda Rodgers, Ph.D.

FROM: Chairman, Committee on Human Volunteers

SUBJECT: Role-Strain in Non-traditional female
Nursing Students
Title of Study

Grant Application No.

Sponsoring Agency

Shielda Rodgers

Principal Investigator or Program Director

Maureen Mc Allister

Student Investigator

The Committee on Human Volunteers has considered the above application and, on the basis of available evidence, records its opinion as follows:

- (1) The rights and welfare of individual volunteers are adequately protected.
- (2) The methods to secure informed consent are fully appropriate and adequately safeguard the rights of the subjects (in the case of minors, consent is obtained from parents or guardians).
- (3) The investigators are responsible individuals, competent to handle any risks which may be involved, and the potential medical benefits of the investigation fully justify these studies.
- (4) The investigators assume the responsibility of notifying the Committee on Human Volunteers if any changes should develop in the methodology or the protocol of the research project involving a risk to the individual volunteers.

Stephen Schmid

Chairman

CURRICULUM VITAE

Name: Maureen R. McAllister

Permanent Address: 1710 Crestwood Circle
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Degree and date to be conferred: Master of Science,
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Collegiate institutions attended	Dates	Degree	Degree Date
College of New Rochelle New Rochelle, New York	1964-68	BA	1968
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Table 9

Analysis of Variance of Mean LRSI Scores with respect to
Employment Status

Variable	n	M	SD	F Ratio	F Prob.
Not work.	21	278.06	30.99	1.17	.3139
part time	54	273.48	41.86		
full time	7	311.77	28.17		

df =

79

p < .05

SUMMARY

Sample characteristics were described in this chapter. Results of the data analysis were presented. Tables were presented to provide support for the written description.

Chapter V

SUMMARY/DISCUSSION/RECOMMENDATIONS

INTRODUCTION

The purpose of this study was to determine if there was a significant difference in role strain as measured by the LRSI between traditional and non-traditional female nursing students. Demographic variables and their effect on role strain were examined.

Discussion of Study Findings

In this study, the characteristic of role strain, as measured by the LRSI, was used to compare traditional and non-traditional female nursing students. It was found that role strain was present in both groups and that there was no significant difference in the means of the groups. None of the demographic variables emerged as a significant factor in role strain.

In the original study Lengacher (1993) identified significant differences in role strain levels between female nursing students and male and female non nursing students. The mean scores for role strain in the three nursing student groups were similar to the means obtained in the present study.

Lengacher's (1993) mean values were as follows: nursing pilot - 273.13, nursing group 1 - 253.52, nursing group 2 - 267.12 and nursing group 3 - 277.61. The present study's means for the two groups were as follows:

Traditional group 259.30 and non-traditional group 270.35.

This may indicate that role strain is a characteristic of nursing education rather than the result of multiple roles. Perhaps, role strain as measured by the LRSI is blurred with the generalized stress of being a nursing student at the end of the semester. In the original study, Lengacher (1993) presented demographic data for the sample population but did not attempt to correlate the variables with the LRSI score. The groups were not divided by age. Each group had 19 year olds as well as participants older than 45 years. The majority of the participants were not married. Most were part-time students. The number of participants who had children or were working was not determined in the demographic data.

The questionnaire was designed with 38% of the question content on homemaker, wife/significant other and mother role. The other 62% of the question content was on time pressures, school, economic pressure, personal health and community activities, and recreational activities. Students who do not have multiple roles but are enrolled in a demanding major may indicate high levels of stress in trying to meet their needs in other non-role related areas. For example, these students may have indicated a high likert response to some of the following items on the tool. "I do not have enough time to relax or read a book". "I do not have enough personal time". "My role as a student causes

much strain for me". "I do not have a satisfactory place to study". "Worrying about the cost of my education adds to my strain". "I do not make special time for myself".

According to the statistics presented in the original study, elevated role strain scores correlated with specific items on the LRSI, but the question still remains as to whether stress was the common factor not multiple roles.

The stress in nursing education is well documented. Several studies (Russler, 1991; Stephens, 1992) were presented in the literature review in support of this premise. Beck and Srivastava (1991) reviewed the literature on stress in nursing students indicating a need to look at the source of the stress. They focused their study on the personal characteristics of the baccalaureate nursing student (age, gender, marital status, student status) and other mediating factors such as living at home and employment status. They found significant differences in stress between those who worked and those who did not work. In the present study approximately 75% of the participants worked fulltime or parttime, however as reported, there was no significant difference between the groups. The non-working students had a higher role strain score (278.06) than those working part-time (273.48). The full time workers had the highest mean score (311.77) for the study.

Beck and Srivastava (1991) also indicated that a relatively high mean level of stress in baccalaureate

nursing students was evident on the Stress Inventory administered in their study. Psychiatric symptoms were higher in this group than in the general population. Feelings of inadequacy, frustration, and discouragement were evident.

In conclusion, the LRSI scores were elevated for all of the nursing students in the original study and in the present study. These scores can not be attributed to role strain factors but possibly to the stress of being a nursing student.

Limitations

This study was limited in that it compared nursing students. It may have been helpful to survey other non-traditional female non-nursing students to see how the two groups compare.

The instrument used in the survey is 100 items which may affect the outcome. Some of the respondents may have lost concentration or answered similar questions differently. Lengacher (1993) recognized this as a limitation and suggested that the inventory length be decreased so that factor analysis could be used to increase the tool's usefulness and validity. Analysis of each item for the participants in this survey would have necessitated 8200 entries.

Using a self administered survey with a Likert response does not enable the participant to fully explain their

responses. In scoring the data, a response of "Uncertain" to "does not apply" as directed by the developer may have skewed the scoring since this was given a value of 3 rather than 0. A participant could mark the survey with all "uncertain" responses and receive a score of 300 which would indicate role strain.

Another limitation must be noted in the comparisons of demographic factors for each group. The demographic categories (Table 1) were unevenly distributed with more participants weighted to a particular factor. This uneven distribution may have affected the statistical results.

Perhaps the most serious limitation was the instrument. One of the assumptions of the study was that the LRSI measured role strain. In this study, it does not appear that high scores on the inventory are the result of role strain but occur because of stress. Testing with another population of non-traditional female students may clarify this problem.

Implications for Nursing

Although this research did not identify a difference between the traditional and non-traditional students as expected, it did indicate that both groups were experiencing role strain or stress. This stress factor in nursing education is repeatedly substantiated by research and anecdotal statements of students. This study gives another indication of its presence. Nursing faculty are obligated

to prepare graduates with the ability to function in the profession. They need to be sensitive to the needs of the students and help to develop interventions that can enhance coping mechanisms, reduce stress and improve well-being so that career goals can be met.

Developing these skills with the help of experienced faculty may be valuable when beginning nursing practice. The stress of the profession is well documented. Staff shortages, complex medication regimens and treatments, seriously ill or dying patients, and the inability to meet ideal practice standards, contribute to stress and burnout in the profession for experienced nurses as well as new graduates (Ellis & Hartley, 1992). The demands of working night shifts and on week-ends is a stress for nurses who have families. The responsibility for the lives and well-being of patients coupled with the fear of making a medication or judgment error causes guilt, anger, and depression. Many become discouraged and leave nursing. Others cope by abusing alcohol and drugs (Ellis & Hartley, 1992). It does not appear that some of the factors that cause stress in nursing education such as clinicals, exams, papers, and licensure can be changed but nursing faculty can add stress awareness and the development of positive coping mechanism to the curriculum. Most nursing curriculums, now, prepare the student for some of the difficulties of beginning practice but the need is there to also build life

long coping skills. As Goode (1960) states in his theory of role strain, it is up to the individual to make his/her whole role system manageable. It is necessary to learn how to allocate energies and to develop skills to reduce role strain to bearable proportions. It is the individual appraisal of the situation that causes distress. This distress is higher when the individual feels that they have no control over a high level of demands (Piechowski, 1992).

Early counseling with group support may enable nursing graduates to learn and to practice some personal skills, such as improving eating habits, participating in regular exercise, developing a sense of humor, or prioritizing relaxation activities. Perhaps, some of these graduates will be able to appreciate the need for counseling and stress reduction for nurses. When they become administrators or supervisors, they can initiate these strategies as part of staff wellness programs. The retention of good nurses in practice will enhance the professionalism and status of nursing which is a goal of nursing education.

Suggestions for Further Research

As indicated, further research on the instrument design needs to continue. Data from this study will be given to the developer of the instrument in order to further this goal. More studies need to be done utilizing non-traditional students in other areas of concentration.

Continued work on stress in nursing students with an effort to develop interventions that can build life long coping skills is important.

Summary

This chapter included a discussion of the findings and an analysis of the variables. Nursing implications were stated. Limitations of the study were presented as well as suggestions for further research.

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APPENDIX A