

THE NURSE: A HELPING PERSONALITY?

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Today nursing as a profession offers a wide variety of specialties which require varying degrees of direct nurse-patient interaction. The purpose of this study was to determine what personality factors correlated to student nurses' preferences to be more patient oriented as opposed to technique oriented in their approach to their work. It was discovered that the patient-oriented group was composed of two subgroups. One subgroup contained student nurses who were rather self-actualized while the other subgroup was motivated toward a patient orientation to nursing by a need to submit to others. Similarly, the technique oriented student nurses were also found to be composed of two subgroups. One subgroup's technique orientation sprang from a need to remain detached and reserved in social situations while the other subgroup's technique orientation was based upon a need to dominate and to lead others. The results of this research tend to lend credence to the thesis that behavioral functions may be motivated by a variety of personality factors.

Historically speaking, nursing has been based upon a patient-oriented tradition that places the accent on the nurse's role as a comforter to the sick and disabled. As medical science and technology have grown more complex, however, there has been a concomitant shift toward a more impersonal nurse-patient relationship with the advent of areas of specialty that require less direct or intimate nurse-patient interrelation. The development of a vocation with multiple roles made it possible for someone to choose what role he might want to play in being a nurse. The purpose of this study was to determine what personality factors correlated to nurses' preferences for a more technical approach or a predominantly patient orientation to nursing.

Although there are several studies in the literature relating to personality correlates to nurses (Redden and Scales, 1961; Reece, 1961; Gynther and Gertz, 1962; Nauran and Stauffacher, 1956; Smith, 1968; Bernstein, et al., 1965), there are few that have directed personality factors to preference to facilitative relationships with patients as opposed to technically treating their diseases. In the only study found by the authors, Stauffacher and Nauran (1968) found that nurses who chose psychiatric populations were compared to nurses who chose other specialties. It was determined that the psychiatric nurses scored higher on the variable of intrapersonal acceptance, both as student nurses and again when tested five years later as practicing nurses.

Method

Data was gathered on students at the following professional schools of nursing: Northwest Texas Hospital School of Nursing, Amarillo, Texas, and Methodist Hospital School of Nursing, Lubbock,

Texas. Of the 178 subjects, 157 were female and 21 were male. The ages ranged from 18 to 44 and the mean age was 20 years. There were 117 single individuals in the sample and 61 who were married. The sample included 138 first-year students and 40 second-year students.

The instruments used in this research included the Nursing Picture Item Test (NPIT) and the Sixteen Personality Factor Questionnaire (16 PF). The NPIT (Meyer, 1960) was developed by Genevieve Meyer through the U. S. Public Health Service and consists of four parts. Part I consists of preference of pictures relating to the following situations: (1) nurse working alone with patient, (2) nurse working with patient with the help of a colleague, (3) nurse working with a colleague in some technical capacity. Parts II and III further investigate the respondent's attitudes toward such elements as hospital visitors, supervision, and colleagues. Part IV is a biographical data sheet; however, since the focus was on the patient-technique continuum, only Part I was utilized. Scores on this test depict the relative scale values from technique orientation to patient orientation.

The 16 PF (Cattell and Eber, 1962) is a factor analytically derived questionnaire consisting of 16 distinct personality traits. Form A of the test was used in this study. The 16 first-order bipolar factors yielded by the instrument are reserved - outgoing, less intelligent - more intelligent, affected by feeling - emotionally stable, humble - assertive, sober - happy-go-lucky, expedient - conscientious, shy - venturesome, tough minded - tender minded, trusting - suspicious, practical - imaginative, forthright - shrewd,

placid - apprehensive, conservative - experimenting, group dependent - self-sufficient, undisciplined self-conflict - controlled, and relaxed - tense. Cattell and Eber (1962) report test-retest reliability for the 16 factors from a low of .61 to .83 with a mean coefficient of .76 omitting the intelligence factor. Validity coefficients are reported to be a range of .58 to .87, the mean coefficient being .68.

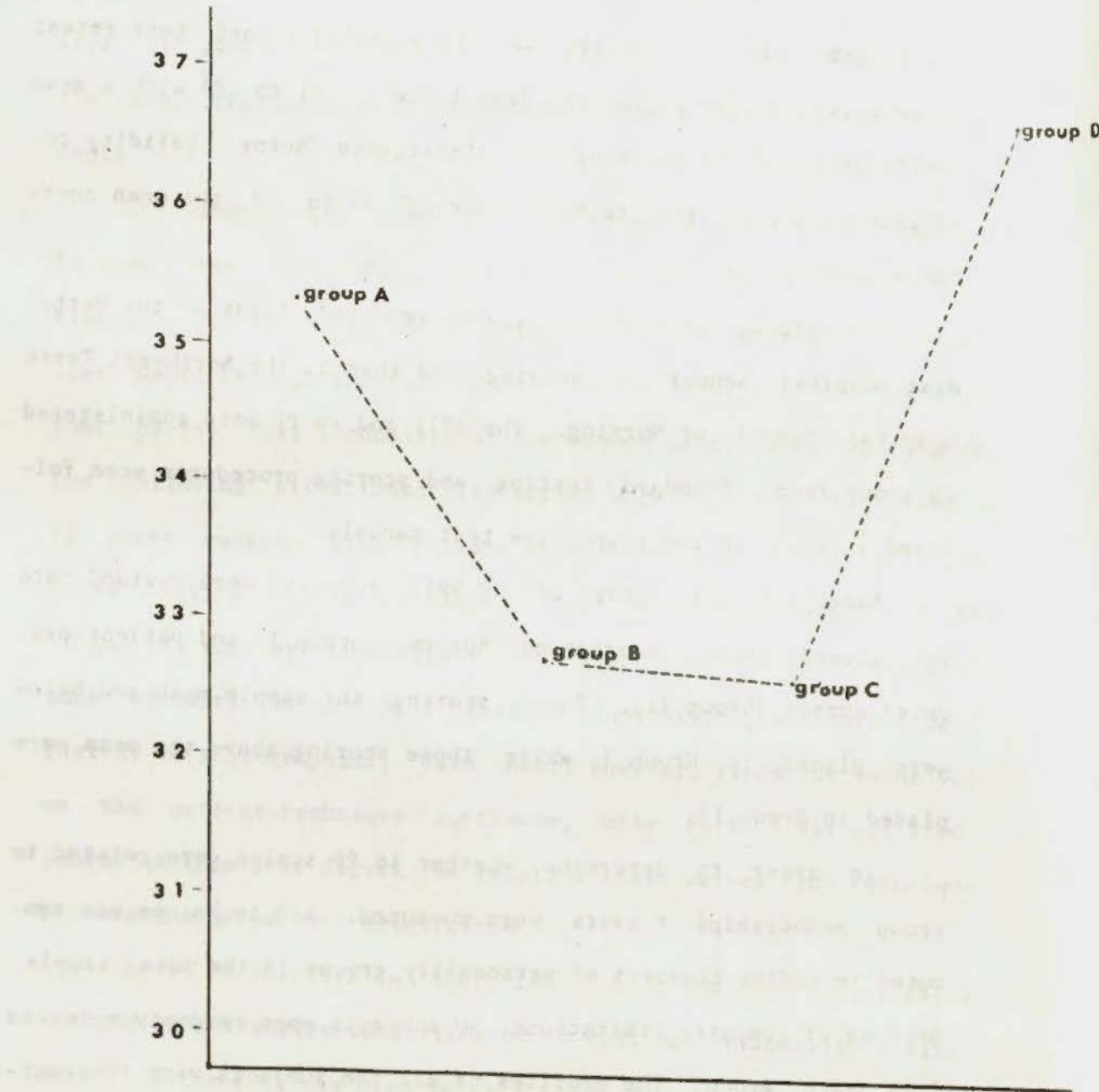
Two group administrations were required, first at the Methodist Hospital School of Nursing and then at the Northwest Texas Hospital School of Nursing. The NPIT and 16 PF were administered in group form. Standard testing and scoring procedures were followed as given in the respective test manuals.

Based on the scores of the NPIT, subjects were divided into two groups, technique-oriented nurses (Group I) and patient-oriented nurses (Group II). Those scoring the sample mean and below were placed in Group I, while those scoring above the mean were placed in Group II.

In order to determine whether 16 PF scales were related to group memberships, t tests were computed. A Q technique was computed to define clusters of personality groups in the total sample. Because of computer limitations, 50 subjects were randomly selected from each group. The profiles of all the subjects were intercorrelated. A principle factors extraction was discontinued when there was no significant correlation left in the residual matrix and rotated to simple structure according to the Varimax criterion. A discriminant function was run to determine if the groups could be discriminated significantly. A one-way analysis of variance was

Figure 1

NPIT scores



16 PF Group Profiles

used to test for significance in the differences between these groups on the technique-patient continuum. The Newman-Keuls Multiple Comparison Test was then employed to determine which comparison among means were significant.

Results

The results of the t tests revealed no significant differences between the two groups except for one factor which was significant at the .05 level. Since error rate would predict at least one significance with this many factors, this was discarded as occurring by chance.

Four groups were revealed by the Q technique and the discrimination was significant ($\chi^2 = 348.9, p .0001$). There were 40, 18, 13, and 25 in groups A, B, C, and D, respectively. The mean group profiles are presented in Figure 1.

The four groups were significantly different in their score on the technique-patient continuum as depicted by the analysis of variance results in Table 1.

Table 1
Analysis of Variance of Four Groups
Discriminated by 16 PF

16 PF	Sum of Squares	df	Mean Square	F Ratio
Between Groups	357.1946	3	119.0648	5.7978*
Within Groups	1827.7227	89	20.5362	
Total	2184.9172	82		

* $p < .01$

The results of the multiple comparison tests are presented in Table 2.

Table 2
Newman-Keuls Multiple Comparison Test
of Four Groups Discriminated by 16 PF

Group	2	3	1	4
2	X	1.108	4.100*	5.360**
3		X	2.990*	4.250*
1			X	1.260
4				X

* $p < .05$

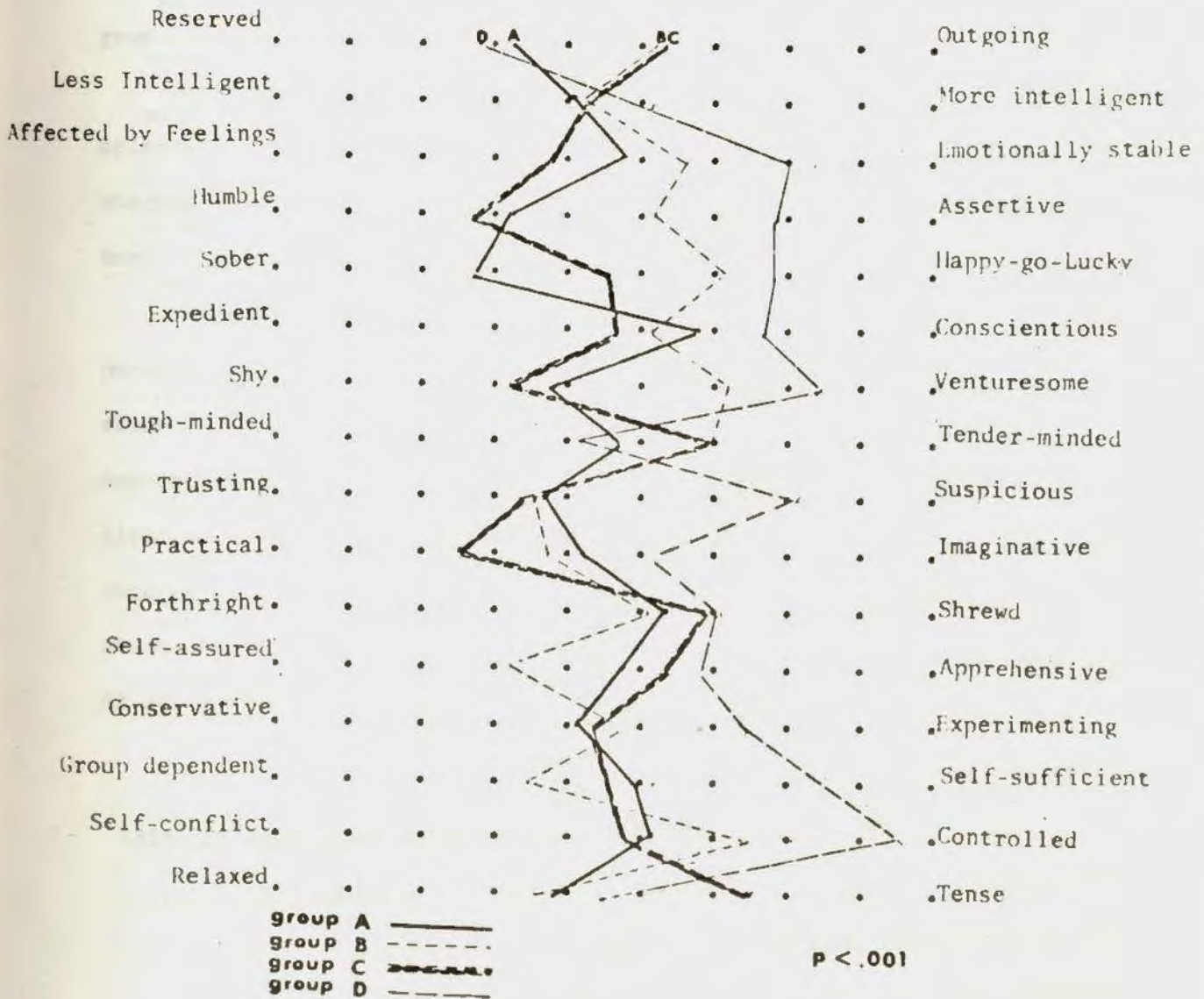
** $p < .01$

The significances between the groups appeared to show groups A and D significantly different than groups B and C. By referring to Figure 2, group A and D are more technique oriented than B and C.

Discussion

The four distinct groups revealed by the Q technique offer some interesting considerations. Of these four groups, Group B and

Figure 2



Relative Degree of Patient Orientation of Four Personality Types

Group C were significantly more patient oriented than Groups A and D. However, although both groups B and C were patient oriented, examination of their personality profiles revealed that their patient orientation was based upon differing personality variables. Likewise, the more technique-oriented groups A and D drew their preferences for a more technical approach to their profession from dissimilar personal needs.

Group B was characterized as a self-confident group. The mean profile indicated this group as outgoing, warmhearted, and tender-minded. They tended to be self-assured, sensitive, trusting, easy to get along with, and serene. They were gregarious, socially bold and spontaneous.

In contrast to Group B, Group C was characterized as a submissive group. They were humble, mild, accommodating, and conforming. They tended to be conventional, careful, proper, and were unable to uphold their concept of self. These individuals were emotionally less stable, easily upset, and tended to be tense, frustrated, and overwrought.

From the profiles of these two groups, it appeared that Group B's patient orientation was based upon a more self-actualized level of adjustment as seen in their tranquil self-assurance. Group C's patient orientation, on the other hand, springs more from a neurotic kind of need to submit to others, possibly in the hopes of winning acceptance or approval.

Group A was characterized as the reserved group. They were detached, sober, prudent, serious, and taciturn. In social situations, they tended to appear shy, restrained, cool, aloof, and

threat-sensitive.

Group D, the domineering group, was highly controlled, compulsive, suspicious, hard to fool, self-opinionated, assertive, aggressive, stubborn, and competitive.

On the basis of the respective profiles, Group A's technique orientation might reflect an avoidance of personal relationships, whereas Group D's technique orientation might reflect a personal need to lead and direct people.

The value of this study reflected that there are different personality dimensions to the technique vs. patient orientation of student nurses. Simple comparisons of preferred function simply demonstrated that persons on extremes of personality factors were directed toward similar orientation. Obviously, replication of the results will add credibility to the types revealed; however, the study does tend to confirm that behavioral functions have a variety of personality dynamics underlying their purposes.

¹ Reprints available from senior author.

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