SOCIAL RESEARCH REPORTS

ISSN: 2066-6861 (print), ISSN: 2067-5941 (electronic)

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Shifra MAOR, Stefan Cojocaru

Social Research Reports, 2017, Vol. 9, Issue 1, pp. 65-77

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Social Research Reports
Vol. 9, Issue 1, 65-77
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TO BE OR NOT TO BE A NURSE? MOTIVES FOR CHOOSING THE NURSING PROFESSION

Abstract

The nursing profession is considered one of the central support pillars in the health system. It is recognized that the profession has developed greatly in recent years. Despite this, the number of people working in this profession is reducing. Choosing a profession is an important component of people's self-identity. It determines their attitudes and molds their life style. Many studies have dealt with the question of how and at what stage of life people make a decision choosing their profession and what their motives are. In Israel, about two thousand students are registered to study nursing, nonetheless little is known about motives that led them to choose nursing studies. Research aim is to identify what motivates nursing students to choose to study the nursing profession. The research is conducted as qualitative research. Personal in-depth interviews were conducted with the help of a semi-structured questionnaire. The research population comprised 20 students from various study programs at a school of nursing in central Israel. 5 key factors emerged as influencing motive of choice: family influence, choosing nursing studies as a second preference; employment security and range of employment opportunities emerged as the third category; altruistic motives emerged only as the fourth category and lastly, health experiences affecting the decision choosing to study the nursing profession. It is important that the training system recognize learners and

Shifra MAOR

Edith Wolfson Academic Nursing School, ISRAEL; Alexandru Ioan Cuza University of Iasi, Department of Sociology and Social Work, Iasi, ROMANIA. E-mail: shifra@wns.gov.il (Corresponding author)

Stefan Cojocaru

Alexandru Ioan Cuza University of Iasi, Department of Sociology and Social Work, Iasi, ROMANIA. E-mail: contact@stefancojocaru.ro

their motives and use these to structure a good experience in the training environment, expose learners to the profession in a variety of circumstances and bring about a high level of student satisfaction during their training. This is likely to raise numbers of those employed in nursing at the end of their studies.

Keywords: nursing, nurse education, motives for choosing a profession, nursing students, perceptions of nurses' role.

Introduction

The nursing profession is considered one of the oldest in the human world, and is considered essential in every health system, in Israel and worldwide (Hasson, 2008). The area in which the profession operates is many and varied, nurses are required to possess great knowledge in the clinical area, have management abilities, interpersonal communication skills, to educate and instruct patients. Nurse education lasts between three and four years at the end of which there is a registration exam (Ministry of Health, 2013). The nursing profession in Israel is undergoing many changes, of which academization is the most significant. The academization process the profession has undergone in the last decades, illustrates the need to train educated and motivate nurses, who can fulfill their roles in an age of advancing technology, which makes nursing roles more complex and challenging (Shahaf, 2014). Despite the importance and necessity of the profession, and it being an interesting and challenging profession, nursing is seen by the public as less prestigious and in demand. The nursing profession's image affects the decision to choose nursing as a lifelong profession (Emeghebo, 2006). According to Steir and Herzberg (2013), employment segregation contributes to this. Hasson (2008) also argued that the public does not recognize the work of nurses fed by mistaken information and stigma, which produces a gap between nurses' work in practice, and their work as perceived by the public.

In recent years, there has been a gradual decrease in the number of nurses employed in Israel. In 2015, according to a Ministry of Health report, *Human Resources in Health Professions* (2015) , the number stands at 4.9 per thousand capita in contrast to OECD countries, standing at 9.5. This is a worrying trend and ways must be found to halt it. In light of this gap, it is important to examine, identify and understand what motivates students to choose to study nursing and to identify candidates choosing nursing as a profession at the stage where future professions are considered and to try and influence them during this period.

The question which profession to study occupies us a lot and is affected by sociological and political rewards, culture, technology, media and education

(Emeghebo, 2006). Many studies have discussed the question of motives for choosing a profession. Super's theory (1963, 1980) presents profession choice as a developmental process that takes place throughout life. According to Super, people examine all options available to them and decide what the best option for them is. According to Tversky and Kahanman (1981), professional choice is made not just on rational thought, but is affected by other motives such as self-image, social expectations and personal ambitions. The question what you want to be when you are older arises a number of times during our developmental years. However according to Super (1963, 1980) the stage at which this is investigate is between the ages of 15-24, when employment preferences and choosing a certain direction consolidate. Before this, heredity and environment mold general behavior.

In Israel, between 2012-2014, according to the National Bureau of Statistics, 39.2 thousand nurses were employed, a rage of 4.8 per thousand capita. In 2016, 2007 new nurses joined the system. From research carried out by the Brookdale Institute (2010), it emerged that in coming years the number of nurses per capita will reduce further. Therefore, it is important to expose and bring more young people to the profession. Influences should be directed at age groups where employment preferences are formulated and consolidated. At the same time, great efforts should be made to raise the number of nursing students by opening additional academic training institutions and encouraging young people to study nursing. Information about the motives for choosing to study nursing is likely to affect the training process and increase the number of learners.

This research reveals the motives of students who chose to study nursing and constitutes part of a greater study on the topic of students' perceptions of communication skills as part of their views of nurses' roles.

Literature Review

Nursing in Israel

Nursing in Israel is characterized by many values, starting in 1913 when Hadassah Women sent the first nurses from the U.S.A. to establish preventative medical services for mothers and children and establish the first nursing school in the Land of Israel (Bartel, 2015). Nurses' work was based on national health regulations of Britain, who ruled the area, under mandate, at that time. The Doctors' Orders of 1928 determined that nurses could nurse patients, which enabled doctors to employ unregistered nurses. In 1940, it became a condition for operating hospitals that nursing staff had to be qualified (Goldman & Tabak, 2013) and with the establishment of the state of Israel in 1948, there was massive immigration of people from all over the world and as such, demand for nurses grew. Hence, the health system and Ministry of Health were established. The department responsible for nurses is called the Nursing Directorate consisting of three departments: professional development, professional guidelines,

registration and administrative management. The Directorate is headed by the Chief Nurse, whose role is to outline policy, advice the Minister of Health on nurses and their areas of responsibility, to build training programs and register nurses (Riba, Greenberg & Reches, 2004).

It is important to note that nursing in Israel is not defined as a profession (Kohl & Kohl, 2001). It is defined as a service profession, guided by policy rules and an ethical code. Nurses' ethical commitment to improving quality of life and protecting patient rights (Goldman & Tabak, 2013). In Israel, there is legislation in this area, National Health Insurance Act, Patients Right Act, Nursing Act and the ethical code according to which nurses operate in Israel. The nursing profession in Israel is undergoing many changes of which academization are the most important. In 1968, the first academic school of nursing was opened in Jerusalem. Recognition of the quality and academic nurses' work and the effect of knowledge on quality and safety of care led to the termination of the status of practical nurses in Israel and striving towards academization for all nurses (ibid).

Today 86% of nurses are registered and the percentage of nurses who have graduated beyond basic training stands at 44%. According to Israeli Ministry Of Health Department and the National Bureau of Statistics' (2014) Review, the number of nurses employed in Israel stands about 40,000, approximately 4.9 nurses for every per thousand people, which is considered to be low relative to OECD countries. In order to narrow the gap and damage to Israeli citizens, training momentum continues. Efforts are being made to enlarge the academic nursing system; the extent of training has grown and is expressed in the growing number of academic institutions in Israel and the number of students registering increases annually (Nursing Directorate Work Plan, 2017).

Nurses Education in Israel

The nursing profession is viewed as one of the supporting pillars of health systems in Israel and around the world. According to Hasson (2008), the health system could not exist without it. Knowledge on which the profession is based is great and varied and requires broad training both theoretically and clinically. In Israel, the task of training nurses is placed in the hands of nursing schools around the country. Professional development has led to changes in learning methods from marginal education, emphasizing technical aspects, to high level professional, academic education. As part of their training, nurses are instilled with values that constitute the basis of the professional identity of those working in nursing: compassion, human empathy (Rubinstein & Tabak, 2013). The academization process through which the nursing profession has gone in recent decades, illustrates the need to train educated and motivated nurses, who can fulfill their roles in a developing technological era, which makes the role of nurses more complex and challenging Shahaf (2014). In 2014, there were five universities and 10 colleges educating approximately 2700 graduates. Training academic nurses lasts between 3-4 years, in nursing schools alongside hospitals. The core program is determined by the Nursing Administration through a document called

"Core Curriculum for Registered Nursing Degree" (Riba, updated January 2012), who also determines training policy.

Nursing education includes 2,648 teaching hours, 1400 hours of theoretical studies and 1250 hours of clinical studies. Training takes place in four key divisions: Basic Studies Division, Nursing Studies Division, Clinical Division and Advanced Clinical Experience Division (internship). The university program adds a further 900 hours of additional courses required to complete a degree as decreed by the Council for Higher Education in Israel. There are three accepted training routes in Israel: academic, academic conversion for nurses and studying for a diploma. In 2016, 2,007 students completed their studies (Nursing Administration Work Plan, 2017).

Perceptions of Nurses' Role

'Role perception' is the direction towards which people channel their efforts (Sangi, 2011). That means that what individuals themselves think is required of them to perform (Agnihotri & Sharama, 2011). This is a cognitive perception founded on beliefs and expectations, together with role holders' rights and obligations, held both by the individuals and their work environment. Perceptions of nurses' role are affected by many factors. Professional development was influenced by worldwide sociological processes such as the social revolution that led to the emancipation of women allowing them to work in different professions, including nursing. Roach (1984) stated that for as long as nurses were considered doctors' assistants, expectations of their role were such. When Florence Nightingale strove for an independent profession, role conflict and role ambiguity commenced. Nurses view the essence of the conflict subjectively, which affects role perception subjectively and has implications on how it is performed. These conflicts accompany the nursing profession to this day. Henderson (1966) viewed the role of nurses and emphasized patient-centered nursing and underlined the nurse-patient relationship. She defined nursing as the unique role of nurses to help sick or healthy individuals to carry out actions that contribute to their health, that they can carry out alone to be as independent as possible. She viewed mind and body as one. Orlando (1972) viewed the roles of nursing as three important principles: (a) respecting people as individuals; (b) high level of knowledge to monitor, understand and interpret physiological functions and work to improve circumstances; (c) prevent illnesses, or their worsening by providing guidance and direction. Neuman (1982) emphasized that the role of nurses focuses on referring to people as whole "holistic". In her opinion, such a unique profession must refer to and respond to all aspects in patients' lives (Crossan & Robb, 1988).

At a conference held in 2014, the president of the International Council of Nursing (ICN), Judith Shamian (2014) defined the role of nurses as encompassing "autonomous and collaborative care of individuals of all ages, families, groups and communities, sick or well and in all settings. Nursing includes the promotion of health, prevention of illness, and the care of ill, disabled and dying people. Advocacy, promotion of a safe environment, research, participation in shaping

health policy and in patient and health systems management, and education are also key nursing roles" (Shamian, 2014).

One can see that the role of nurses has changed as a result of global changes that have occurred over the years from a feminine, maternal and protective role to a patient management role including knowledge of anatomy, physiology, pharmacological diagnostic processes, and evidence based practice. The role of nurses includes complex care techniques, high level cognitive skills and interpersonal communication skills. Despite all this, the profession's image remains low and few students choose it as a life career (Rubinstein & Tabak, 2013). The nursing profession's image is defined as a collection of ideas and impressions that the public has about nurses and nursing as a profession. The profession's prestige is also measured by the gap between the desired and the real, which leads to opinions affecting the public's perception of the profession and the willingness of young people to join (Shamian, 2014).

Motives for Choosing the Nursing Profession

Choosing a profession for life is a complex task facing every teenager. Profession or trade is an area of activity in which a person specializes and works in order to make a living. Professions require broad professional training, and jobs are activities people undertake to make a living, even those that do not require professional training. Professions are an important part of individuals' self-identity, determine their status and influence their life styles socially and economically. Many studies have dealt with factors influencing choice of profession in general and the nursing profession in particular (Round & Tracey, 1990; Spoken, 1994). It is argued that choice of profession that meets the personal needs and tendencies of individuals leads to personal wellbeing expressed by satisfaction, perseverance, and achievements. Various theories dealing with motives for choosing a profession focus on two key aspects in the choice process - personality related and developmental.

Roe (1957) developed a theory explaining choice of profession from the point of view of personality. In his words, choice reflects the needs of individuals' and develop as a result of interaction between family, environment and genetics. Holland (1985) also maintained the choice of profession serves as an expression of personality traits with reference to interaction with the environment. Ginzberg (1972) referred to the developmental aspect of profession choice and described three stages that people have to undergo in their developmental process in order to reach a decision regarding their profession. Super (1963,1980) also argued that individuals' choice of profession is a developmental process taking place throughout their lives, and that people have a number of options from which to choose, and they will choose the one in which they can function best in their self-evaluation. Super stated that people also choose a profession that will allow them to express all abilities, preferences and qualities constituting 'the self'. According to Super, choosing a profession demands referring to the social aspect,

in that profession is a social role that individuals fulfill at the same time as other social roles. People's identities continue to be formed throughout their lives; professional identity is part of their self-identity and defined as the sense of professionals belonging to their work and identification with it (Tickle, 1999).

Choosing nursing as a profession has been discussed in the literature from many angles. It is one of the oldest professions in the world, and viewed as essential in health systems (Hasson, 2008). Professional tasks are varied. A broad spectrum of knowledge is needed, clinical, management and interpersonal communications, as well as flexible working hours. Apparently, an ideal profession. So why is there a global shortage of nurses? In Israel the shortage is expressed in the figure of 4.9 nurses per thousand capita, approximately half the ration of OECD countries.

The public's image of nursing affects the decision to choose it as a life profession (Emeghebo, 2006). That means, the more positive its image, the greater the chances that more students will choose nursing as a profession (Ben Natan & Becker, 2010). Nurses' professional image is dynamic and influenced by sociological and political values, culture, technology, media and education (Emeghebo, 2006). Nursing is perceived as a female caring profession (Cosaire, 2016). The public does not recognize the role of nurses, it is perceived as helping doctors, as not having the ability to make independent decision, as people who mainly meet physical needs accompanied by feminine skills. According to Steir and Herzberg (2013), employment segregation also contributes and widens the gap. One can learn from the literature that the public does not recognize nurses' work. There is a gap between the work nurses actually do and the work of nurses as seen by the public (Hoeve, Jansen & Roodbol, 2014). In light of this gap, it is important to examine and identify what motivates students to choose nursing as a life profession despite its non-prestigious image.

Methodology

Aim of Research

To identify what motivates nursing students in Israel to choose the nursing profession.

Type of Research

This research is based on qualitative research. Information was collected using personal semi-structured interviews with students in various programs, from 1st to 4th year of their studies, whose purpose was to present diverse information about students' motives for choosing nursing as a profession. The information collected was recorded, transcribed and analyzed into categories as will be detailed later.

Description of Interviewees

The research population comprised 20 nursing students from a school of nursing in central Israel studying on 3 programs for a registered degree in nursing: academia 30%; academic reserve soldier-student 55%[1] and academic conversion 15%. Gender distribution: 12 male students - 60% and 8 female students - 40%. Interviewees agreed in writing to be interviewed. They were not chosen randomly but by class coordinators according to their abilities to express themselves well orally. It is possible this resulted in some bias, as may the fact that the researcher is a member of staff at the school.

20 personal face-to-face interviews were conducted (approved by the Hospital's Helsinki Committee) between July and December, 2016. Interviews were held in one of the school's classrooms at the end of a study day. The researcher (being a member of staff) carried out the interviews. Each interview lasted between 15 and 40 minutes. The semi-structured interview question maintained the interviews' structure but allowed flexibility (Creswell, 2014). All interviews were recorded, 16 were transcribed. Questionnaires were numbers so as to guard and guarantee the privacy of interviewees.

Content Analysis of Interviews

Interview analysis was based on the categorization and classification method, and sought to identify recurring patterns, trends and useable conceptual categories (Shkedi, 2015).

Findings

Key Findings

The question, what do you want to be when you're older? is presented to children and teenagers often during their development. This research answers the question why did you choose the nursing professions? What influenced your choice?

From the interviews, one can identify five key factors that affect the choice of nursing as a profession among students interviewed. There is a tendency to think that those who choose nursing have altruistic motives and act from a sense of mission and desire to help people. This research shows that it is only the fourth motive in order of importance. The research showed that family has a huge influence and central importance in choice of profession, 45% of respondents thought so and even said that it was "*My mother's working environment in which I grew up*".

[1] Academic reserve – some soldiers get basic training after which they study for academic degrees, and then do their full army service at the profession they have acquired.

The second most important influencing factor was choosing nursing as a second preference. 35% of interviewees preferred another profession in the health field, but academic demands allowed them to study nursing. "*I understood that nursing was the closest field to medicine dealing with health, and I can treat people. That's what really interests me*".

30% chose the profession because it offers economic security, as well as diverse employment opportunities. "*It's a field in which I will always find work, with children; adults will always be an option because nursing is an in-demand profession*".

25% chose to be nurses for altruistic reasons. They want to help people. "*I want to help, to be significant. At the end of the day, I want to know I did something useful*".

20% of interviewees said they had chosen to be nurses because of their own or family's personal experiences. "*I had a personal health episode that made me stop and think. I understood this is what I want to do*".

Hence, it can be seen that there are varied reasons for choosing the nursing profession, and provided the choice meets the personal tendencies of individuals. This is what will bring them personal wellbeing and lead to high job satisfaction. In nursing, this is extremely important because of its effect on patients.

First category. Family influence on choice of profession: *"I have two older sisters who studied to be nurses." … "I come from a family of doctors. Even in my extended family. There was a discussion at home. They're all nurses and I have lived with it since age 0, it was clear to all that this is what I would do." … "At home I have two older sisters whose profession is nursing." … "The family decided that I would care for our grandfather who became ill as a result of CVA. We don't put our elderly in care homes. After a year and a half caring for him, it was clear to me that I would study to become a nurse."*

Second category. Nursing as a second choice: In this category, interviewees referred to their preference to choose a profession in the health field, and when they did not meet the academic requirements for other professions such as medicine or physiotherapy, they chose nursing as the closest profession. "*I always knew I would work in medicine or nursing, it is very difficult to be accepted to medicine and nursing also interests me, so I chose that*." "*I only achieved the psychometric grade required for nursing and not more*." … "*My parents wanted me to study physiotherapy because it is considered a good profession*." "*I actually planned to go to an elite unit to be a paramedic in the army. But following a conference about the health field and working with people, I continued on the student-soldier route and studied to be a nurse*."

Third category. From what interviewees said it emerged that working as a nurse provides economic and employment security. There are those who chose this profession because there is always a shortage of personnel, and there will

always be employment. There are those who chose to study as part of their military service so as to reduce the financial burden because they do not pay for their studies. And there were those who referred to the variety of area in which nurses can work. One pointed out, "*It's comfortable with work and motherhood*."… "*Financial considerations. I want to get a degree during my military service*". "*It's important to me that there will always be offers of work in the field and earnings are very good*." "*Salary is good and there are many employment opportunities. There is always a lack of nurses in the field*."

Fourth category. Altruism and fulfilling destiny, which according to Maslow (1952) is the top of the pyramid of needs and according to Herzberg (1959) these are intrinsic motive. "*My internal I led me to come and study to be a nurse*."… "*I want to study something in which I can help people recover*". "*I wanted to work in the health field so as to help reduce suffering and improve how patients feel*".

Fifth category. There were interviewees who described personal experiences in health that led them to choose the profession. "*Encounters with nurses led me to discover a whole world that I liked. When I gave birth, I met wonderful nurses whose hearts stood out. They included me, and suddenly I saw a profession that spoke to me exactly"…."I underwent a personal health episode that did its worst and closed a circle for me"… "I became interested in this issue, which led be to change path and turn to nursing. Caring for my grandfather only did me good"… "During my hospitalization, I saw the attitude of nurses. There is a huge difference between doctors' and nurses' attitudes, and I knew what I wanted to do."*

Conclusion and Discussion

We as a training system have a responsibility to identify, recognize and understand what motivates people to choose nursing and work in it as a profession.(Newton and Colleagues,2009) We have the responsibility for developing their professional identities, professional images and influence their nurse role perception. Exposing them to the most up to date knowledge and information in teaching processes, both theoretical and clinical. Training the next generation of nurses will be better and more effective if the curriculum will consider basic motives of students for working in nursing as important. If at teaching and training stages, we will be intelligent enough to meet their needs, they will reveal the greatest interest in study materials. And after they have completed their studies, they will continue to work in the profession for many more years, and will not be interested in undertaking professional conversions to other areas, which will appear to them as if they will better meet their personal needs. (Newton and Colleagues,2009)

This research point to the fact that student who chose to study the nursing profession did this because of the effects of five key factors: family influence, a second priority, economic security, as well as diverse employment opportunities, altruistic reasons, and personal experiences. Although, five categories were displayed for choosing nursing as a career. They can be divided into two main

categories of internal motives and for external (Pluom, 1966). Internal motives including altruism, self-realization, personal interest and self-realization. And external motives are: safe, diverse employment, and a high social status. Studies show that choice in the profession, which meets the individual's needs and inclinations, leads to personal well-being expressed in satisfaction with work, persistence, and achievement (Rounds & Tracey, 1990; Spokane, 1994) Identifying these factors enables the training system to better understand students' motives for choosing nursing as a profession. Their choice has an influence on the quality of their work and professional views. It is significant precisely because this profession is involved in the lives of many people (Dyck and Colleagues, 2009). The training system would do well if in its training process it considered motives and integrated into the training process content that will develop self-image, empower nurses in health systems and as such have an effect on promoting the profession's prestige.

From the findings, it emerges that despite the public's perception of nursing as a non-prestigious profession, there remains small sense of altruism in the younger generation. Their personalities and feelings for others and their suffering still influence their choices. It is important to nurture these values and build their professional 'I believe'. These are important advantages in people working in nursing and it is important that the training system nurture and strengthen them.

It can be seen that choosing a profession derives from a personal development process influenced by family, environment and economic needs. It is important that both learners and the training system recognize these motives and uses them to help build a training program that will continue to develop the skills demanded of nurses. High learners' satisfaction during training is likely to increase the number working in nursing and as such, everyone will benefit.

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