

WHO CHOOSES TO BE A NURSE, AND WHY?

Nicky Genders and Brian Brown explore the reasons why people seek careers in learning disability nursing, and how their perceptions and experiences affect further recruitment

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Abstract

Over the past 30 years, as the type and number of healthcare services have changed, the role of the learning disability nurse has evolved. The numbers of learning disability nurses being trained and subsequently registered with the Nursing and Midwifery Council have declined during this period, and many learning disability nurses now work in the voluntary, private and social care sectors. Yet there is little evidence about why people choose learning disability nursing as a career. This article refers to the findings of a narrative study of the experiences of learning disability nurses working in and outside the NHS over the past 30 years. It illuminates how and why they chose their career, and provides an insight into how others could be encouraged to join the profession.

Keywords

Careers, professional identity, narrative study, nursing

THERE HAS been a steady decline in the number of learning disability nurses registering with the Nursing and Midwifery Council (NMC) over the past decade, and a year-on-year fall in these nurses working in the NHS. Glover and Emerson (2012) suggest a 23% decline in the number of whole time equivalent staff in the NHS between 2008 and 2011.

The Centre for Workforce Intelligence (CWI) (2012) identifies this as a problem in the 'supply' of learning disability nurses. In other words, fewer people in this specialism are being trained, even though demand is expected to increase as more

people with complex needs require specialist care (Royal College of Nursing (RCN) 2011).

NHS provision for people with learning disability has reduced, and the NHS itself is now estimated to employ 35% of the UK's learning disability nurses, with the remainder working in a range of specialist roles across the rest of the health and social care sector (CWI 2012). These numbers also appear to be in decline (Gates 2011, Glover and Emerson 2012).

Little is known about why people find their way into learning disability nursing. This article explores, from practitioners' points of view, the reasons they took up the specialism and how they succeeded in making their long-term professional home in learning disability nursing. Such knowledge is valuable if the processes behind career choice are to be understood and the perceived unpopularity of learning disability nursing is to be addressed.

The environments in which learning disability nurses work have shifted dramatically over the past three decades as community care policies have changed where people with learning disabilities live, work and receive support for their healthcare needs. The effect of these changes is considered in the present study, exploring the life narratives of 20 learning disability nurses in nine counties in England, and 'becoming a nurse' is a key element of these narratives.

There is limited existing literature on the choice to become a learning disability nurse. However, a broader literature exists on choosing nursing overall, comprising more than a decade of research studies in a variety of nations.



Studies of recruitment into nursing tend to focus on people at school, due to leave school or recently recruited to nurse education, with an emphasis on the gender of recruits and non-recruits (Zyberg and Berry 2005), personality influencing choices (Eley *et al* 2012), perceptions of nursing as an attractive career (Hemsley-Brown and Foskett 1999), and the influence of others (Price 2009).

In part, the decline in learning disability nursing reflects a reduction in the popularity of nursing as a whole. School-leavers have been a particular focus of interest, with Neilson and Jones (2012) suggesting there has been a decline in the numbers pursuing nursing as a career since the 1980s. Mooney *et al* (2008) suggest that nursing is not a first choice of career, with more than one third of students in their study saying they would have been interested in pursuing other careers had their qualifications allowed them to do so.

The influence of others also appears to be a factor in choosing careers, including nursing. Families, career advisers, teachers, friends and other nurses have all been identified as having an influence on those who chose nursing as a career, including those who had been patients (Williams *et al* 1997, Beck 2000, Larsen *et al* 2003, Mooney *et al* 2008, Price 2009, Neilson and Jones 2012). These studies suggest that positive attitudes towards nursing as a career at a time when young people are making career choices are highly influential. However, a number of studies identify negative views of nursing, with many seeing it as a low-paid job with few career prospects (Whitehead *et al* 2007), and of less importance than medicine (Neilson and Lauder 2008).

In a study by Hemsley-Brown and Foskett (1999), nurses were found to be widely admired, but there was not necessarily a matching desire among participants to become nurses.

There is often a lack of understanding of learning disability nursing among the general public (Owen and Standen 2007) and studies of school- and college-age students highlight traditional views about nursing as a career (Whitehead *et al* 2007, Neilson and Lauder 2008).

Fewer studies focus specifically on people choosing careers in learning disability nursing. Owen and Standen (2007) found that the motivations for doing so, including qualification barriers to other careers, altruism and the influence of significant others, are similar to that for choosing a career in nursing generally. Several of their participants previous experience with people with learning disabilities as a motivator for choosing this area of nursing.

The study in this article is based on interviews with 20 learning disability nurses. Participants discussed the role that family, friends and significant others played in influencing their decisions to choose learning disability nursing as a career. For some, work experience was a major factor in career choice; for others, it was a change in life circumstances. Participants recalled their decisions to train as a learning disability nurse and the effect this had on the subsequent development of their professional identities.

Influencing factors

Participants discussed motivating factors for choosing nursing as a career, citing a variety of extrinsic factors, including the influence of family and friends, when in their lives it happened, major life events and educational background. A small number of respondents focussed initially on adult rather than learning disability nursing. Others did not choose nursing at all, but preferred to start careers in teaching, social work, animal care or even as members of air crews. Their decisions to become learning disability nurses came later and were prompted by multiple factors.

Ten of the participants discussed extrinsic factors that were influential in their choice of career, similar to those identified in Owen and Standen's (2007) study, and while not an ideal situation for encouraging young adults to consider learning disability nursing as a career, nevertheless extrinsic factors, at least for these participants, appeared to have been important.

Arguably, once these people had taken steps to find out more about learning disability nursing, the desired effect was achieved, in that they made the decision to 'become' learning disability nurses, albeit by a circuitous route. All names have been changed to preserve participants' anonymity.

One participant, Lorna, said her father had influenced her choice to become a nurse, which was later shaped and reinforced by work experience. The resultant effect cemented her motivation for learning disability nursing. Lorna recalls her father using nursing as an alternative suggestion to a career he did not feel suitable for her:

'As a child I wanted to be an air steward, or air hostess as it was then, but my dad said to me: "You can't be an air hostess, they are all glamorous and slim, and you are too big." One Christmas, when I was about ten, he bought me a book called *I Want to Be a Nurse*. I remember looking at it and thinking it looked really interesting. I then developed a fascination with hospitals, particularly general hospitals.'

Lorna's account is similar to those cited by Mooney *et al* (2008) in that her decision to pursue nursing was consequent on her father saying that more glamorous avenues were unavailable to her. Of importance here is the ability of significant others to suggest to a young person something specific about the nature of nursing, and who might or might not be a suitable person for that profession.

Another respondent, Debbie, also described early childhood memories of a parent suggesting nursing as a career option, reinforcing the power of family figures to influence career decisions at key life stages. She said: 'My mum woke up one morning and said, "I've just had a dream that you were a nurse", and I thought it wasn't a bad idea. I was probably about seven.'

The development of an identity as a nurse may occur at an early age, and is reinforced by society's views and by those of family and friends. Choices then of where to undertake work experience and which subjects to study may all be influenced by early suggestions about a particular career.

Lorna and Debbie have childhood memories of parents' suggestions that nursing may be a suitable career. However, these would probably have been about adult nursing, rather than learning disability nursing. It was further experience of working with people with learning disabilities for both Lorna and Debbie that shaped their decisions to train in the specialism.

For a number of participants, nursing was not their original career choice, and five of them had wanted to be teachers. Many of the characteristics related to teaching may also apply to learning disability nursing. Their initial career choice was not fulfilled and nursing became a more achievable goal.

Robert, who had begun a college course to be a teacher, was also guided by tutors who directed him towards work in learning disability. He said: 'I spent some time in a college but had not done well. I saw a tutor who knew I liked working with people and he said: "Why don't you go to the mentally handicapped hospital up the road?" I am not really sure what attracted me, other than the need to do something and get some form of qualification.'

Robert had identified with the qualities required to be a teacher, and used the opportunities given to him by the local long-stay hospital to re-route his careers into learning disability nursing.

Some had other jobs before deciding to train as a learning disability nurse. A number of participants describe transition points in their lives when nursing became a realistic option for them.

For Narisa, the death of her young son and her experience as a parent in a hospital setting had

'One Christmas my dad bought me a book called I Want to Be a Nurse. I remember thinking it looked interesting'

a big influence. She said: 'My son had a syndrome and died aged ten months. I was in hospital with him for six months, so I was living hospital life every day and I saw the differences in people's approach to nursing, which was broad. I realised nursing was not just about giving medication. A certain type of person had to be a nurse, and I think that is what drew me to become one. I felt I had some of the qualities I had seen in the good nurses.'

Having identified nursing as a potential career option, Narisa considered the qualities she had to be a 'good nurse'. Her perception of 'good' and 'bad' nursing may well have been shaped by her expectations as a mother of an ill child.

Matthew had been drawn to nursing after studying theatre studies and working with people with learning disabilities, using his drama and theatre skills on a voluntary basis. His then girlfriend had encouraged him to do voluntary work and, although he considered training to be a social worker, a lack of funding made this impractical.

Matthew describes having little understanding of nursing at this time, particularly the broader role that nurses may take beyond caring for the sick. He also describes having held stereotypical views about the appropriateness of nursing as a career choice for men. He said: 'I thought it was a "sissy" job. I had not even envisaged or understood there were such things as male nurses. I don't think I appreciated that nursing had a role beyond working with sick people in acute settings, so discovering there were learning disability nurses was an education in itself.'

Matthew's perception of nursing – as 'women's work' – put him off. The influence of a friend and meeting people with learning disabilities enabled him to challenge his preconceived notions of the identity of the nurse, enabling him to consider the role of the learning disability nurse. Five of the seven male participants in this study stated that friends had influenced their consideration of learning disability nursing as a career; and all of these then undertook work experience, perhaps to see for themselves if their friends were right.

The experience of connecting with people with learning disabilities was described as an influencing factor by 13 of the participants. For example, Paula had grown up with a friend, and Dean with a cousin, who had learning disabilities.

A further nine participants had known people with learning disabilities at work. Memories of these experiences shaped their decision to work with people with learning disabilities as a career.

Debbie had undertaken part-time work with people with learning disabilities, and this was to shape her career choice.

'When I was 15, I started working with people with learning disabilities, just by fluke, really. I wanted to be a general nurse, so I got a job in a private residential care home that had three people with learning disabilities. Then I applied to train in general nursing but my boss at the care home said, "Why? You seem to fit in so well with learning disabilities." I had a re-think. I loved my part-time job and got on really well with the residents there. So then I started training as a learning disability nurse.'

Despite the influence of her manager, Debbie thought she already had the qualities of a good nurse and had bonded with the people with learning disabilities in the care home. Her perceived identity as a nurse was developed, therefore, by work experience and the influence of her manager.

The notion of making a difference is also one which, embedded in altruism, is highlighted in the literature on identities of nursing (Price 2009). Participants in this study identified 'making a difference' or other altruistic factors as part of their motivation for being a learning disability nurse. This focus on 'caring for' or 'helping others' has constructed an identity of nursing and forms many of its definitions. Perceiving oneself as someone who can make a difference or help others can enhance the self-esteem of those who already feel they have these characteristics.

Not all participants had altruistic motives for taking up nursing. One, Jane, cited the strain of living with an elderly relative. She said: 'It was an

awkward situation. As a teenager, I walked out to take up training as a nurse. I just left her to it, which is not what you would expect of me now. I think that is awful, but you do what you do at the time, don't you?'

Jane did not think that she would be able to cope with caring for people with learning disabilities and she felt guilty about moving away.

Discussion

These narratives provide an insight into the career pathways of participants and illustrate some of the complex choices involved in becoming a learning disability nurse, the points at which these choices are made, and the influence of others, including family members, careers teachers and people with learning disabilities. While in some cases an interest in nursing was formed in childhood, entry into the career pathway as a learning disability nurse was somewhat more haphazard. As this article describes, embarking on such a career can be due to:

- Personal contacts and relationships.
- Accidental exposure as a result of work experience or volunteering.
- Suggestions from tutors.

While small-scale, this study implies that a more assertive approach to presenting a public image of the profession might benefit learning disability nursing. Moreover, the value of personal contacts and relationships in persuading people to consider learning disability nursing underscores how those who work in the field are, in an important sense, ambassadors for the specialism and vital in attracting new blood to the profession.

The image of learning disability nursing, work experience and public perception all contribute to the views held by potential recruits about whether it is a worthy career; they all have an impact on recruitment.

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Conflict of interest
None declared

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