CASE STUDIES

Nursing as a career choice: Perceptions of school students speaking Arabic, Serbo-Croatian, Spanish, Turkish or Vietnamese at home

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Abstract

Australia is a multicultural society and nowhere is this more evident than in Sydney where 25% of the population speaks a language other than English. In one of the largest area health services in New South Wales, the five most frequently spoken languages at home are Arabic, Serbo-Croatian, Spanish, Turkish or Vietnamese, with

these language groups comprising 12% of Sydney's population. Yet nurses speaking one of these five languages comprise less than 1% of the nursing workforce. A cost-effective method of addressing the shortage of nurses speaking languages other than English is to recruit students who already speak another language into the profession. This study examined high school students' perceptions of nursing in order to determine appropriate methods of recruiting students speaking one of these languages. Implications for the design of recruitment campaigns are also discussed.

Introduction

Australia has rapidly become a very diverse multicultural society. Perhaps nowhere is this more evident than in Sydney where approximately 25% of the population comprises people speaking a language other than English at home (Australian Bureau of Statistics 1991). Such diversity poses great challenges for providers of health care services. It is increasingly more difficult to communicate effectively and appropriately with clients or patients, given the vast array of language and cultural representations. The provision of interpreters is costly and at times impossible to achieve and also introduces another individual to the doctor/nurse/patient equation. It is more appropriate that the mix of health care professionals reflects that of the population they serve.

However, statistics indicate that this is far from reality. For example, in one of the largest area health services in New South Wales, the five most frequently spoken languages at home are Arabic, Spanish, Turkish, Vietnamese or Serbo-Croatian (Australian Bureau of Statistics 1991). These five language groups comprise 12% of Sydney's population, but less than 1% of the nursing workforce (registered nurses and enrolled nurses) speaks one of them (New South Wales Nurses' Registration Board 1995). Furthermore, entrants into pre-registration nursing programs in Australian universities currently do not reflect Australia's culturally diverse population (Neill & Barclay 1989; Pittman & Rogers 1990). Consequently, it is becoming increasingly more difficult for members of the nursing profession to provide culturally sensitive care (Pittman & Rogers 1990; Menon 1992; Baj 1995).

The purpose of this study was to examine the perceptions held by students speaking a language other than English at home about the characteristics they seek in their ideal career and, more specifically, their perceptions about nursing as a career choice. It is clear from the literature that both these aspects are important when trying to recruit nursing students from a culturally diverse background (Bonawit & Whittaker 1983; Champion, Austin & Tzeng 1987; Pittman & Rogers 1990; Thole 1991; Reiskin & Haussler 1994; O'Brien & Rahmani 1995). Students were provided with statements about the

characteristics they wished to see reflected in their ideal career choice. These included ease of finding work, and the ability to make decisions, work hard, and make a lot of money. Using the same items, they were also asked whether they believed these characteristics were reflected in nursing as a career choice.

Students speaking Arabic, Spanish, Turkish, Vietnamese or Serbo-Croatian were chosen for several reasons. Firstly, there is a relatively large population in Sydney which speaks one of these five languages, particularly in the area health service in which the study was conducted. Secondly, only a small number of nurses in the workforce speak these languages and, thirdly, there is a high demand from hospital and community health services for people speaking one of these languages. Year 11 and 12 students were chosen because of the considerable instability in decision-making regarding career choices and intended courses of study prior to this time (Lokan & Fleming 1994).

The study

Sample

Thirty-six schools were invited to participate and 25 (69%) agreed to do so. Schools were asked to help recruit eligible students and to provide support in managing questionnaire distribution. Three school regions with the highest number and the second highest number of students speaking any one of the five languages chosen for this study were selected. Randomised stratified sampling was used to ensure that students were chosen from different types of schools (boys, girls, co-educational) in two different school groups (government and non-government).

All Year 11 and 12 students speaking any one of the five languages were invited to participate in the study, irrespective of their gender or the school they attended, as the critical factor was the language group they represented. The participation rate ranged from 13% to 100%. The poor participation rate relates, in part, to the exclusion of students who were sitting for a test, could not miss an important class, were undertaking excursions or otherwise were absent or did not want to participate. Altogether, 42.9% of all eligible students from government schools and 29.1% from non-government schools participated in the study. Data were collected from 789 Year 11 and 12 students speaking either Arabic, Serbo-Croatian, Spanish, Turkish or Vietnamese at home from 19 government and 6 non-government schools within 3 school regions in Sydney.

Instrument

A structured questionnaire was developed. Questions included perceptions about the characteristics expected of their ideal career and then whether these characteristics were found in nursing careers. Eighteen items related to these two areas were drawn from the study by Reiskin and Haussler (1994). Additional items were drawn from the literature and focus groups (Tang et al. 1996). Respondents were asked to circle their agreement with each statement (see Tables 2 and 3) using a four-point Likert scale ranging from strongly agree (1) to strongly disagree (4). Respondents were also asked to provide demographic data such as gender and language spoken at home and to indicate whether they intended to study nursing. Data were collected consecutively as schools were recruited. Administration of the questionnaire was carried out by the chief investigator and two research assistants using a strict protocol.

Data analysis

The statistical analysis used was similar to that used by Reiskin and Haussler (1994). Factor analysis was used to examine the construct validity of the questions. Cronbach's alpha was used as a test of internal consistency. Chi square and t-tests were used to test associations between respondents' perceptions about their ideal career and nursing as a career and between their perceptions, their gender and language background. ANOVA was used to examine differences in the perceptions among students speaking different languages.

Results

A total of 867 questionnaires were collected and 789 were included in the data analysis. Seventy-four questionnaires were excluded because the language spoken at home by these respondents was none of the five chosen for this study. Another four questionnaires were also excluded because the veracity of the answers was doubtful. Table 1 indicates the demographic profile of respondents as regards gender, year of schooling and language spoken.

Table 1: Respondents' demographic profile

| | Number | Percentage |
|-------------------------|--------|------------|
| Gender | | |
| Male | 289 | 37.1 |
| Female | 489 | 62.9 |
| Year | | |
| Year 11 | 429 | 54.5 |
| Year 12 | 358 | 45.5 |
| Language spoken at home | | |
| Arabic | 259 | 32.8 |
| Spanish | 87 | 11.0 |
| Turkish | 74 | 9.4 |
| Vietnamese | 279 | 35.4 |
| Serbo-Croatian | 90 | 11.4 |

Factor analysis yielded six factors on both the ideal career dimension and nursing career dimension which accounted for 60.8% of the total variance. All items within each factor had a loading value of 0.39 or above (see Tables 2 and 3). In fact, most items had a loading value of 0.55 or above. Cronbach's alpha for the ideal career dimension and the nursing career dimensions were 0.86 and 0.89 respectively. Cronbach's alpha of all sub-scales of both ideal career and nursing as a career dimensions were 0.60 or higher. The validity and internal consistency of both dimensions and all sub-scales were good.

Table 2: Factor analysis – ideal career characteristics

| | lt | is | im | por | tant | that | I |
|--|----|----|----|-----|------|------|---|
|--|----|----|----|-----|------|------|---|

| Factor 1 – Influence (0.81)* (27.1%)** | Loadings | |
|---|----------|--|
| am powerful | 0.83 | |
| am a leader | 0.79 | |
| am a professional | 0.70 | |
| am appreciated | 0.59 | |
| make decisions | 0.42 | |
| Factor 2 – Job opportunity/Job context (0.76)* (8.9%)** | | |
| can easily find work in a variety of settings | 0.72 | |
| can always find work | 0.71 | |
| can easily change jobs | 0.69 | |
| work in a safe environment | 0.65 | |
| make a lot of money | 0.55 | |
| can easily work overseas | 0.46 | |
| work regular hours | 0.40 | |
| Factor 3 – Academic qualifications (0.66)* (7.3%)** | | |
| go to university | 0.88 | |
| obtain good HSC results | 0.81 | |
| Factor 4 – Knowledge (0.66)* (6.7%)** | | |
| work very hard | 0.73 | |
| use my brain a lot | 0.60 | |
| am respected | 0.50 | |
| know a lot | 0.39 | |
| Factor 5 – Job content (0.76)* (5.2%)** | | |
| work with my hands a lot | 0.81 | |
| work with high technology a lot | 0.73 | |
| Factor 6 – Job nature (0.65)* (4.9%)** | | |
| help people | 0.84 | |
| care for the sick, wounded or frail | 0.81 | |

Note: * Cron

^{*} Cronbach's alpha

^{**} Variances accounted for

Table 3: Factor analysis – nursing as a career

| Factor 1 – Influence (0.75)* (30.8%)** | Loadings | |
|--|----------|--|
| Nurses are leaders | 0.77 | |
| Nurses make decisions for themselves | 0.76 | |
| Nurses are professionals | 0.68 | |
| Nurses are powerful | 0.61 | |
| Nurses know a lot | 0.49 | |
| Factor 2 – Job nature (0.79)* (7.7%)** | | |
| Nurses help people | 0.74 | |
| Nurses work very hard | 0.70 | |
| Nurses care for the sick, wounded or frail | 0.65 | |
| Nurses work with their hands a lot | 0.58 | |
| Factor 3 – Job opportunities (0.72)* (6.7%)** | | |
| Nurses can work easily overseas | 0.75 | |
| Nurses can easily find work outside of nursing | 0.66 | |
| Nurses can always find work | 0.66 | |
| Nurses work in a variety of settings | 0.61 | |
| Factor 4 – Knowledge (0.74)* (5.8%)** | | |
| Nurses have a university degree | 0.78 | |
| Nurses need good HSC results | 0.74 | |
| Nurses work with high technology | 0.62 | |
| Nurses use their brains a lot | 0.46 | |
| Factor 5 – Social recognition (0.76)* (5.1%)** | | |
| Nurses are appreciated | 0.82 | |
| Nurses are respected by others | 0.74 | |
| Factor 6 – Job context (0.60)* (4.7%)** | | |
| Nurses work regular hours | 0.79 | |
| Nurses work in a safe environment | 0.54 | |
| Nurses make a lot of money | 0.50 | |

Note:

t-tests revealed that there were significant differences between students' perceptions of their ideal career characteristics and the characteristics associated with a nursing career. On every item students perceived that nursing did not meet their ideal career requirements. This was true for all male students and the group as a whole, with one exception. There was no significant difference between females' perceptions about their ideal career and nursing as a career with respect to 'working with high technology'.

^{*} Cronbach's alpha

^{**} Variances accounted for

Table 4: Perceptions of nursing as a career choice

| Perceptions | Percentage | |
|--|------------|--|
| Nurses help people | 97.6 | |
| Nurses care for the sick, wounded or frail | 95.8 | |
| Nurses work with their hands a lot | 90.1 | |
| Nurses work very hard | 90.0 | |
| Nurses are appreciated | 85.6 | |
| Nurses are respected by others | 78.6 | |
| Nurse work in a variety of settings | 75.6 | |
| Nurses have a university degree | 72.0 | |
| Nurses know a lot | 68.4 | |
| Nurses work with high technology a lot | 65.7 | |
| Nurses are professionals | 64.2 | |
| Nurses use their brains a lot | 64.0 | |
| Nurses work regular hours | 62.1 | |
| Nurses work in a safe environment | 58.7 | |
| Nurses need good HSC results | 51.8 | |
| Nurses can work overseas | 49.3 | |
| Nurses can always find work | 47.9 | |
| Nurses can easily find work outside of nursing | 43.4 | |
| Nurses make decisions for themselves | 41.7 | |
| Nurses make a lot of money | 38.5 | |
| Nurses are powerful | 36.5 | |
| Nurses are leaders | 35.7 | |

Students were most likely to perceive that nurses help people, care for the sick, injured or frail, work with their hands a lot and work very hard. They were least likely to see nurses as leaders, having power, making a lot of money and making decisions for themselves (Table 4). t-tests revealed that there was only one significant difference between male and female respondents. This was in the item which states that nurses work in a safe environment. Although both male and female respondents disagreed with such a proposition, there was greater disagreement from females than males (t = 2.01, P = 0.045).

The different language groups were examined on each of the six factors revealed as contributing to perceptions of nursing as a career. ANOVA indicated that there were significant differences in five of the six factors: influence, job nature, knowledge, social recognition and job context. No two groups were significantly different in the remaining factor of job opportunities (Table 5).

Table 5: Differences in perceptions of nursing as a career between language groups, by factors

| | Arabic Mean (n) | Spanish Mean (n) | Turkish Mean (n) | Vietnamese Mean (n) | Serbo-Croatian Mean (n) |
|--------------------|--------------------|---------------------|---------------------|------------------------|----------------------------|
| Influence | 12.24 (254) | 11.73* (82) | 13.09++ (70) | 12.98** (269) | 11.59*+ (86) |
| Job nature | 6.18* (257) | 5.88* (84) | 6.54 (72) | 6.80** (275) | 6.06* (87) |
| Job opportunities | 9.40 (255) | 9.56 (81) | 9.69 (68) | 9.84 (260) | 9.65 (82) |
| Knowledge | 8.77* (254) | 8.73 (81) | 9.17 (69) | 9.58** (263) | 8.69* (85) |
| Social recognition | 3.74* (254) | 3.76 (83) | 3.86 (70) | 4.21** (270) | 4.05 (87) |
| Job context | 6.90*+ (253) | 7.63++ (82) | 7.11 (71) | 7.40** (267) | 7.38 (86) |

Note: The means of a group indicated by * or + are significantly different to that of a group indicated by ** or ++ respectively at the 0.05 level. The higher the score, the more negative was the perception.

Students speaking Serbo-Croatian ranked the influence factor the highest (mean = 11.59). On the other hand, students speaking Turkish (mean = 13.09) and students speaking Vietnamese (mean = 12.98) were least likely to perceive nursing as an influential profession. Of all five language groups, students speaking Vietnamese were least likely to perceive nursing as a profession with a positive job nature (mean = 6.80), knowledgeable (mean = 9.58) and socially recognised (mean = 4.21). Spanish-speaking students were least likely to perceive nursing as a profession with good working conditions (job context – salaries, working hours and environment) (mean = 7.63); Vietnamese-speaking students were fractionally more likely to hold such a perception (mean = 7.40).

ANOVA of students' perceptions about individual items (Table 6), revealed that there was no significant difference between the five language groups in their perception of nurses for eight items. These were helping people, working with their hands, making decisions for themselves, the safety of their working environment, their ability to make money, their academic qualifications, working with high technology, and job opportunities in Australia, overseas and outside of nursing.

As for the perceptions about nursing as a profession, significant differences were found between students speaking Spanish and those speaking Turkish, with Spanish-speaking students more likely to see nurses as professionals. Compared with their Arabic-speaking counterparts, Spanish-speaking students were also more likely to see nurses as professionals and working irregular hours. There were also significant differences between Spanish and Vietnamese-speaking students. Apart from seeing nurses as professionals, Spanish-speaking students were also more likely to agree or strongly agree that nurses are appreciated, 'use their brains a lot' and care for the sick, injured or frail.

Table 6: Differences in perceptions of nursing as a career – item analysis

| | Arabic Mean (n) | Spanish Mean (n) | Turkish Mean (n) | Vietnamese Mean (n) | Serbo-Croatian Mean (n) |
|---|--------------------|---------------------|---------------------|------------------------|----------------------------|
| Help people | 1.45 (258) | 1.35 (86) | 1.47 (74) | 1.55 (276) | 1.42 (90) |
| Work very hard | 1.58* (258) | 1.61 (85) | 1.81 (72) | 1.83** (277) | 1.60 (88) |
| Work regular hours | 2.12* (257) | 2.49** (85) | 2.31 (72) | 2.32 (273) | 2.39 (87) |
| Know a lot | 2.13*+ (257) | 2.12 (85) | 2.49++ (70) | 2.35** (275) | 2.06*+ (86) |
| Work with their hands a lot | 1.78 (257) | 1.68 (85) | 1.74 (74) | 1.87 (276) | 1.70 (87) |
| Are leaders | 2.64 (256) | 2.58 (84) | 2.83++ (71) | 2.78** (273) | 2.46*+ (87) |
| Make decisions for themselves | 2.63 (257) | 2.52 (83) | 2.63 (72) | 2.66 (273) | 2.48 (87) |
| Are professionals | 2.27## (258) | 1.93#+* (84) | 2.49++ (70) | 2.35** (274) | 2.09 (86) |
| Care for the sick/ wounded/frail | 1.39* (256) | 1.28* (86) | 1.51 (74) | 1.57** (277) | 1.34* (88) |
| Are powerful | 2.58* (255) | 2.61 (85) | 2.66 (71) | 2.84** (274) | 2.47* (87) |
| Work in a safe environment | 2.17 (254) | 2.38 (85) | 2.18 (71) | 2.39 (274) | 2.42 (86) |
| Make a lot of money | 2.62 (256) | 2.73 (82) | 2.62 (71) | 2.70 (270) | 2.58 (87) |
| Are respected by others | 1.93* (256) | 1.94 (83) | 1.96 (73) | 2.15** (272) | 2.08 (88) |
| Are appreciated | 1.82* (255) | 1.82* (85) | 1.89 (71) | 2.07** (272) | 1.97 (87) |
| Need good HSC results | 2.35* (257) | 2.35 (86) | 2.51 (71) | 2.61** (275) | 2.30 (87) |
| Have a university degree | 2.10 (255) | 2.19 (83) | 2.11 (70) | 2.19 (271) | 2.07 (85) |
| Work with high technology a lot | 2.15 (257) | 2.11 (83) | 2.20 (71) | 2.35 (272) | 2.17 (87) |
| Can always find work | 2.50 (258) | 2.49 (83) | 2.48 (71) | 2.49 (273) | 2.58 (85) |
| Use their brains a lot | 2.17* (257) | 2.11* (83) | 2.34 (71) | 2.47** (275) | 2.17 (88) |
| Can work overseas | 2.38 (256) | 2.36 (81) | 2.35 (72) | 2.56 (272) | 2.49 (87) |
| Work in a variety of settings | 2.00* (258) | 2.02 n(86) | 2.21 (72) | 2.27** (269) | 2.05 (86) |
| Can easily find work outside of nursing | 2.55 (256) | 2.65 (83) | 2.63 (70) | 2.57 (267) | 2.57 (86) |

Note: The means of a group indicated by *, + or # are significantly different to that of a group indicated by **, ++ or ## respectively at the 0.05 level. The higher the score, the more negative was the perception.

There were significant differences between Vietnamese and Arabic-speaking students in nine items. Vietnamese-speaking students were significantly less likely than Arabic-speaking students to perceive nurses as people who work very hard, know a lot, care for the sick, injured and frail, are powerful, are respected by others, are appreciated, need good HSC results, 'use their brains a lot' and work in a wide variety of settings. When compared with students speaking Serbo-Croatian, Vietnamese-speaking students were less likely to perceive nurses as people who know a lot and who care for the sick, injured or frail and as leaders and powerful. Students speaking Serbo-Croatian were also more positive about the caring role of nurses.

Turkish-speaking students also differed significantly from students speaking Arabic or Serbo-Croatian, being less likely to see nurses as people who know a lot. There was also a significant difference between students speaking Turkish and Serbo-Croatian in perceptions about leadership, with Turkish students less likely to see nurses as leaders.

Discussion

Nurses who understand the cultural background and language of those for whom they provide care are necessary to provide culturally sensitive and appropriate care. A cost-effective method of doing so lies in recruiting students into nursing from a culturally diverse background. This requires an understanding of how these students perceive nursing and how these perceptions relate to the characteristics they expect of their 'ideal' career.

This study found that respondents' perceptions as to what constitutes their ideal career characteristics were not congruent with their views of nursing as a career. Of the six factors identified, influence was the principal one, accounting for 30.8% of the total variance, indicating that respondents did not see nurses as influential. This view may reflect a general perception about nursing held not only by these students. While nurses in Australia have become more politically astute and have begun to realise some of their potential power (Wood 1990; Short & Sharman 1995), this may not be the public's perception. For example, recent initiatives to introduce a position of nurse practitioner have highlighted the wide range of procedures which nurses are undertaking daily, particularly in remote areas where there are few doctors (New South Wales Department of Health 1996). The wider community may be unaware of this role of nurses.

Results for the factors of job opportunities and job context also indicate incorrect perceptions about nursing. More than half the respondents did not see nurses as being able to obtain employment locally, overseas or outside of nursing when,

in fact, the unemployment rate of nurses is relatively low. The high employability rates and the transportable nature of nursing qualifications could be highly successful marketing themes amongst those from non-English-speaking communities for whom unemployment rates have traditionally been high. The difficulties which migrant nurses with professional qualifications and experience obtained overseas have faced in obtaining registration to practise in Australia may also play an important part in shaping these attitudes.

As for working conditions, although the starting salary for a nursing graduate is higher than many university graduates (Ashenden & Milligan 1996), the majority of respondents (61.5%) did not perceive that nurses receive good salaries. Again, this is perhaps a failure on the part of the nursing profession to 'sell' itself adequately.

It is also important that a substantial percentage of respondents (42%) did not see nurses as working in a safe environment. Previous findings indicate that this might be related to the view that nurses were at a high risk of contracting infectious diseases or at risk of being assaulted because they had to work at night (Tang et al. 1996). Yet the chance of either of these occurring is low.

Among the five language groups chosen for this study, respondents speaking Vietnamese at home were least positive about nursing. They saw nurses as helpful, caring and hard working, but their perceptions about factors such as influence, job context and knowledge were quite negative. The drive to succeed through education among Vietnamese-speaking students appears to be a key contributing factor (Tang et al. 1996). Nguyen and Ho (1995) reported that Vietnamese-speaking students were expected to be successful at school as education will bring success in a career and life in a new country. These students are high achievers and are four times more likely to undertake higher education than are others (Dobson, Birrell & Rapson 1996).

There are two other notable misleading perceptions about nursing, irrespective of the language backgrounds. Many respondents thought that nurses did not 'use their brains a lot' (36%) and did not have a university degree (28%). This is surprising, given that pre-registration nurse education has been undertaken by the higher education sector in New South Wales for more than 10 years. In recent years the TER required for entry to nursing has risen and is higher now than for some other courses (Ashenden & Milligan 1996). This information needs to be communicated to students, parents and career advisers.

Nursing has endeavoured to recruit more males into the profession for many years. The larger proportion of male respondents in this study as compared to those who are nurses provides useful insight into men's perceptions of the characteristics which are important in their career choices. There are many

positive aspects of nursing, such as the high rates of employability and potential for travel, which do not appear to have been successfully marketed to school students.

Conclusion

Despite the at times inaccurate views of nursing as a career among high school leavers speaking one of the five languages chosen for this study, there appears to be no outright rejection of a nursing career. The limited number of students speaking a language other than English who entered the nursing profession could therefore be due to the failure to provide respondents with adequate information about nursing or the inability of the nursing profession to meet the requirements wanted by respondents in an ideal career. O'Brien and Rahmani (1995) reported that the 17 to 24-year-old students would attempt to take up a job if the perceived advantages of a particular job outweighed the perceived disadvantages. To attract more school leavers into the nursing profession, strategies must be devised to present the positive aspects of the profession. This is important for students speaking a language other than English so that culturally appropriate care can be provided. It is equally important for the nursing profession to make use of these findings as recruitment into nursing generally is declining in the face of a wide array of other university opportunities. Findings from this research have been incorporated into the new media campaign being developed for the New South Wales Department of Health.

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