

ASSERTIVENESS AND SELF-ESTEEM OF BLACK AND
WHITE PROFESSIONAL NURSES

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DEDICATION

This thesis is dedicated to my daughter, Shelley,
and all other minority adolescent girls who aspire to
become health professionals.

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CHAPTER I

INTRODUCTION

In the past several years, major changes in the role of women in the professional world have occurred. Women have overcome many barriers to achieve their new status in today's modern society. These changes have occurred for both black and white women. Although both groups of women have different heritages and often different obstacles to overcome, their problems have a basic thread of similarity--both have had to overcome a "double negative."

The double-negative for the black female lies in the fact that she is both black and a female. Inherent in her blackness is a two hundred-year history of oppression and racial discrimination. In addition, the secondary status afforded most females has been a particular barrier for black females.

The white female has also had to overcome a double negative. The traditional stereotyped role which placed the white female as subordinate to a strong male has thwarted an expression of creativity and growth. In addition, she has also been thought of as "emotional, passive, empty-headed, and weak" (Komisar 1971, p. 152).

In order to foster the development of professional or career-minded women, it is important to determine those factors which have had a key role in the emergence of professional women. Those specific variables inherent in the emergence of professional women to be evaluated in this study are economic-need, double-negative, mother-provider figure, self-esteem, and assertiveness.

Statement of the Problem

The problem of this study was to determine if assertiveness and self-esteem are related to the variables of double-negative, mother-provider figure, and economic need in the black and white professional nurse.

Purposes of the Study

The purposes of the study were:

1. To measure assertiveness of black and white professional nurses by using the Rathus Assertiveness Scale
2. To measure self-esteem of black and white professional nurses by using the Guttman Self-Esteem Scale
3. To measure the influence of double-negative, mother-provider figure, and economic need of black and white professional nurses by using the Arnold Questionnaire

4. To correlate the influence of the five variables of assertiveness, self-esteem, double-negative, mother-provider figure, and economic need to determine if relationships exist.

Background and Significance

The black women came to this country in chains to serve the needs of the ruling classes. According to Grier and Cobbs (1968):

She was used as a "breeder" of slaves and workmen. But most of all as a source of labor. She was valued for the amount of work she could perform, and viewed by Whites as a sexually convenient laboring animal (p. 41).

After being freed by the Emancipation Proclamation, the black women left the fields of cotton in the South and moved to the North, during the Great Migration. The black woman was at last free and able to go where she pleased. According to Drake and Cayton (1961), the North was the land of promise for the black people.

Even though the black woman was unskilled, uneducated, and totally unprepared for the competitiveness of the big industries in the North, she was more able to obtain work than her male counterpart. Since she had known a life of service to whites, she obtained work providing service to others. She made more income

performing domestic and personal service jobs and was thus able to support the family (Drake and Cayton 1961). Traditionally, she has worked outside her own home and in the homes of others. Some women took in laundry, some were appointed teachers of black children, and some obtained jobs in the big factories because they would work at a lower pay rate and under difficult conditions.

Participation in the labor force became an economic tradition and necessity. Even today, if a black woman marries a college educated man, she still works because she is aware that the black man's education doesn't guarantee financial success (Epstein 1973, p. 925).

The background of the white female was not as inhuman and degrading as that of the slave black women, but she was imprisoned by another kind of slavery. She also came to this country from another land, but as a free person. She was free to work the soil, fight Indians, please her husband, make repairs, do janitorial work, garden, and raise children. Most of the time, her social activities were related to those of which her husband approved. She played the supporting role in the family; her husband's endeavors and dreams became her endeavors and dreams. Steinmann (1975) stated:

Women saw man's ideal woman as significantly more accepting and permissive than their own self-perception of one playing a subordinate role in

both personal development and woman's place in the familial structure. She was also seen as being strongly family-oriented (p. 76).

Early American textbooks portray the white American woman as "pleasant and reliable, but basically uninteresting" (Landau 1974, p. 37). She is portrayed as not having any impact on the world outside her home, and is usually limited to cooking and housekeeping duties (Landau 1974). Teenage girls learned to be passive. The girl who knew how to please, help, and flatter a man was considered desirable and charming, even if she had to forsake some of her identity and dignity to do so (Landau 1974).

The virtuous wife and mother was one who devoted herself to the care of her husband, children, and home, continuously sacrificing her own interests for the welfare of her family (United States Economic and Social Council 1976, p. 525).

The traditional female image persisted-- the hard-working, self-sacrificing wife and mother who is a good cook and housekeeper was identified in the study on the Interrelationship of the Status of Women and Family Planning (United States Economic and Social Council 1976). The stigma of the traditional feminine role and stereotypes has placed the white female in a secondary status today. Therefore, she, too, is viewed as possessing a double negative, as is the black female.

The double negative exists for the black woman because she is black by race and a female; the white woman possesses the double negative because she is a female and has been stereotyped in the traditional female role as a non-assertive, dependent person.

Both black and white women are in the nursing profession. The characteristics of both groups must be considered when the women in nursing are viewed. The variables of assertiveness, self-esteem, double negative, mother-provider figure, and economic need are important factors to be studied when one considers nurses. In nursing, both black and white women in addition to playing the supporting role to their families, have extended this role to those in need of health care. Within this traditional feminine role, the secondary status with its non-assertive behavior, has grown and developed. With the numerous changes which have taken place in the nursing role and in the system of health care delivery, it appears that a study of factors that are relevant to professional women, both black and white, would prove beneficial to the profession of nursing.

Hypotheses

The following null hypotheses were formulated for the purposes of this study:

1. There will be no difference in the assertiveness levels of black professional nurses and white professional nurses as measured by the Rathus Assertiveness Scale
2. There will be no difference in the self-esteem of black professional nurses and white professional nurses as measured by the Guttman Self-Esteem Scale
3. There will be no relationship between double-negative, mother-provider figure, and economic need between black and white professional nurses as measured by the Arnold Questionnaire
4. There will be no relationship between double-negative, mother-provider figure, economic need, self-esteem, and assertiveness in the black professional nurse
5. There will be no relationship between double-negative, mother-provider figure, economic need, and self-esteem and assertiveness in the white professional nurse
6. There will be no difference in the black nurses and white nurses in regard to the five variables studied

Definition of Terms

The terms utilized in this study were defined as:

1. Assertiveness or Assertive Behavior--behavior characterized by boldness or self-confidence, to state positively, be self-assured

2. Self-esteem--a quality possesses by an individual who respects herself, considers herself worthy, recognizes her limitations, and expects to grow and improve (Rosenberg 1972)

3. Mother-provider figure--a working mother who contributes moneys to the family income and is caring and loving toward her family

4. Economic need--moneys needed to support or supplement family income

5. Double negative (black women)--belonging to the black race and being of female gender

6. Double negative (white women)--being of female gender and stereotyped as non-assertive and dependent

7. Professional nurse--one who has received a four-year college education and possesses a degree from a degree-granting institution. She also is registered by a state board of nurse examiners to practice as a professional nurse

Limitations

The following were limitations of this study:

1. The sample was comprised of subjects from one metropolitan area in the country
2. The variables of marital, parental, and economic status were not controlled

Delimitations

The delimitations of this study were the following:

1. The subjects were between the ages of 22 and 50 years old
2. The sample was composed of black and white professional nurses

Assumptions

For the purposes of this study, the following assumptions were made:

1. Assertive behaviors and responses may be one characteristic of professional women
2. Assertiveness is a valued concept which effects one's self-confidence and feeling of self-esteem
3. A positive alteration in the self-esteem and assertiveness of the nurse could alter the role of the nurse

Theoretical Framework

The theoretical framework of this study was based on the work of Epstein (1973). The major concepts of Epstein's theory of the successfulness of the black professional woman are self-esteem, assertiveness, mother-provider figure, economic need, and multiple negative. Epstein (1973) defined each of these as follows:

Mother-provider figure--a mother who works outside the home to provide the financial support or financial aid for the family by adding the income she has earned. She works, but at the same time is loving and affectionate to her family.

Economic need--the mother has to work for the family to have the necessary items needed for a healthy life. In some instances, she works not to provide the necessary items, but for the extras which mean much to the family; for example, money to go to college, which might not be there if the mother had not worked.

Multiple negative--viewed as fighting two prejudices rather than one; for example, being of female gender and belonging to the black race.

The focus of Epstein's (1973) theory is on the limits placed on the black woman by society and the fact that these limits serve to increase her determination to become a professional in her career endeavors.

The effects of being in a world beset with limits fed their [black women] determination and made them feel the only road to survival lay in occupational success (Epstein 1973, p. 933).

This need to be successful in one's occupational endeavors was emphasized by a group of female lawyers in Epstein's (1973) study. These lawyers stressed the importance of being better than others, so that complaints of incompetence or lack of devotion to work could not be used against them. This drive and determination to be the best is common to most black professional women. Being both black and female has served to avert the black professional woman from diversions of occupational success and to insulate her from those negative influences of the ghetto culture. The multiple negatives to which she has been subjected have worked in reverse; they have increased her determination to be successful.

Epstein (1973) has further stated that the black female has a high level of self-esteem and sense of confidence in her abilities. In some instances, these characteristics were found to be of a higher level than

those of her white counterparts. These findings are supported by Rosenberg's (1972) study in which the Ten-Item Guttman Scale was used to measure self-esteem among fourteen ethnic and racial groups. Results of this study revealed that "levels of self-esteem among blacks do not differ significantly from that of whites; it is actually higher than that of whites in some instances" (Rosenberg and Simmons 1971, p. 87).

Epstein (1973) found that black females have more confidence in their abilities to be successful in their occupational goals than their white contemporaries who felt only moderately confident. This high sense of self-confidence may be based on the fact that the black women have been motivated since early childhood to succeed and to be self-reliant. She has been encouraged by parents and other family members to obtain occupational success. This push to be successful is directly related to the fact that black women have frequently had to support or aid in the support of a family. She has not been hampered by feminine sex roles, stereotypes, or been pushed toward marriage as has the white female. Korman's (1970) theory of work behavior maintains that, "individuals will engage in and find satisfying those

behavioral roles which will maximize their sense of cognitive balance or consistency" (p. 32).

If a woman's self-image incorporates aspects of the stereotypical feminine role, she may be less inclined to acquire the job characteristics or engage in the job behaviors associated with the masculine managerial position since such characteristics and behavior are inconsistent with her self-image. Epstein (1973) has further stated that the black female is viewed as lacking the "womanly" occupation deficiencies of the white female; i.e., seeking a husband. According to Epstein (1973), the double-negative variable for the black female has played an important role in the development of high levels of self-esteem, confidence in one's ability, and determination which are essential to assertive behavior.

Family background has also played a role in the development of this behavior for the black woman. Black families tend to push the female child to attend college. This view and the statistics supporting it, have their origin in discrimination. Epstein (1973) stated, ". . . even with college degrees, black men could not penetrate the high ranking occupations, while black women graduates could always go into school teaching" (p. 914). Historically, black woman have had more access to white society

than black men and have had opportunities to learn the ways of the white world. Because they worked in the service of whites, they were able to learn white values and habits. These values and habits were passed on to the black female child. Opportunities were presented or made available more for the black females than for black males because females were considered powerless. Parents in the service of whites, knowing this, encouraged their female child to "get the best education" and the "best job" she could (Epstein 1973). Silberman's (1964) study indicated "the oldest girl is most protected and most often encouraged to go on with her education" (p. 279).

Economic need is a fact of life for the black woman. Historically, she has worked to support her family. Marriage for her often has not offered enough security to replace a career. The black male's marginality makes it doubtful that he will acquire a professional career (Epstein 1973). Whatever the level of occupation he attains, he will have difficulty in providing a middle class lifestyle on his income alone. If a black woman fails to work, she is considered by her society as failing as a mother in helping her family. That is, she is not considered to be helping her family to obtain a higher standard of living. While economic need may exist in

some white families, the extent of this need has not been as great as that of the black family. The severe economic needs of the black family are mainly due to the black male's marginality. Economic need for the black female serves as a strong stimulant to achieve.

Summary

A need to survive has made both the black and white professional woman more assertive and independent in her role. This need to survive involves her self-esteem, confidence in her ability, and assertiveness. In the past, women have played a supportive role and have been stereotyped as passive, dependent--the white woman more so than the black woman. She is overcoming the feminine stereotype role and becoming more assertive, especially if she has chosen a career for herself.

As the woman's role changes, she is becoming more self-reliant. This self-reliance and assertiveness have also affected today's nurse. She is a woman who is also becoming more assertive, thinking independently, and one who acts as a change agent in the delivery of health care today. Since there has not been much research done in this area, the information obtained will add to the literature and increase understanding among black and white professionals.

CHAPTER II

REVIEW OF LITERATURE

This study was concerned with assertiveness and self-esteem of the black and white professional nurse. Thus, the literature reviewed in preparation for this investigation focused upon three major areas: (1) the black woman and her heritage, (2) the women's movement in the United States, and (3) the role of nurses as women within this historical web.

Black Women and Their Heritage

The black professional woman is one who found her very being in the suffering and hardships of her past. Historically, the black female had been used as a sexually convenient laboring animal (Grier and Cobb 1968); one who had no voice or rights because of her blackness. It was not unusual for the slaveholders to take advantage of or make sexual advances upon black female slaves. To fight back or refuse might mean losing one's life or being sold off to someone even worse. If she was agreeable, she had food and her children were allowed to remain with her; they might be sold away if she did not

cooperate. She did what had to be done to survive and provide for her family. This survival need has remained with the black female to this day (Epstein 1973).

The black female has always been valuable not only because she was viewed as a breeder of more slaves, but also because she accomplished tremendous amounts of work. After slavery was abolished in this country, she was more able to enter the white domain than was the black male. She obtained work in the service of others, as she had always been a servant and had no other skills from which to draw. She was raised in poverty, lived in low income housing, and she was made acutely aware of the social prejudices against blacks as well as women most of her life. Yet, the black professional woman is one who has not allowed herself to be held back by the social prejudices and the poverty of the past. Despite the obstacles set upon her by discrimination, she has strived to have a career of her own, to become a professional in her chosen area, and to remove herself from the ghetto environment in which she was reared as a child. The black professional woman, equipped with only her determination to be successful, has accomplished her professional goals. She seems to have had a greater need to achieve her goals than her white counterpart.

This need to achieve, to drive ahead, Epstein (1973) stated, has its basis in discrimination. The more obstacles she has to overcome, the more determined she has become.

In a study by Epstein (1973), the respondents indicated they were able to advance and enter the careers they had chosen because being a black female was more accepted in their professional areas than being a black male. One-third of these respondents stated that black men were a "threat" to white men or alluded to that belief as if it were well known (Epstein 1973) to all, and that a black woman constituted less of a threat. No data are available to support this belief. Even though it is difficult to document the sense of threat felt by white male professionals to black men as colleagues, both men and women perceive this reaction as a barrier to them. The women in Epstein's (1973) study, however, did not perceive the threat which faces the black male as being as great for them. Goode (1968) stated:

. . . the black female might be more willing to challenge the professional setting to a greater extent in attempting to enter the white establishment than the black man because being a woman, she is not so sensitive to the fear of "losing face" because American women are not socialized to think they have much face to lose, anyway (p. 203).

Black professional females lacked the stigma attached to the white female; the so-called feminine mind, emotions, or physiology may not seem easily transferable to the black woman. There are even fewer stereotypes surrounding the professionally educated black female. However, she is rapidly becoming the "castrating bitch," "the superwoman" in modern women's magazines (Ms. January 1979).

Self-Esteem

The professional black woman of today has had to not only overcome her slave heritage and her ghetto upbringing, but she must now cope with the image afforded her by other not so fortunate black females. While the conditions of poverty and ignorance that exist in black cultures are in need of change, black professional women also have this image to overcome.

In a book by Grier and Cobb (1968), the following description of a black poverty stricken young mother was portrayed:

A harried young mother, having exhausted the resources of several social agencies, turned to the psychiatrist as a last resort.

She had a pretty face but she was obese and wore frazzled clothes. As a result, she looked like a shapeless, middle-aged woman. On the first visit she wore an ill-fitting red wig which fell forward over her eyes. She made motions to right it, only to have it lodge over her ears

. . . She lived with her five children in a rat-infested apartment. She had never been married and most of her twenty-six years had been spent in public housing projects, living on welfare grants. With five children, she ran out of money near the middle of the month. Then her mother, who could scarcely afford it, would help her buy food

The final blow involved problems with a "raunchy nigger." He had lived with her for several months and had disappeared when the last welfare check was late (p. 35).

This early writing of Grier and Cobbs (1968) reflects a trend of thought concerning black women. The prevalent attitude is that black females live off welfare and have children out of wedlock.

Rosenberg (1972) pointed out that the black professional woman need not accept the social evaluation of her worth as her personal definition of worth. A variety of coping methods may be used in order to save one's self-esteem in the face of social disprivilege. It is evident that black professional women have utilized such coping mechanisms. These mechanisms have been necessary for her to maintain her equilibrium and endure the suffering of stereotypes.

Silverstein and Krate (1972) in a study conducted in Harlem, found black female adolescents to be self-reliant and independent. This self-reliance and independence stemmed from deprived circumstances. The black children concerned themselves with eating, taking care

of younger children, and cleaning the house. A neighbor or grandparent occasionally visited, but for the most part, the female adolescent handled the responsibilities alone. Epstein (1973) believed that the early responsibilities of the impoverished female adolescent made her closer to her parents. The existence of a generation gap is more evident among non-blacks than among poor black adolescents and their parents (Epstein 1973).

The black female child is viewed as having great worth; black parents know that the female child has a better chance for advancement than a son. She will have more opportunities in the white society than will a black male adolescent. She is taught the values and habits of the white society by her parents and encouraged to go to college. The black female adolescent goes into the world with more armor than one could imagine for her age. The obstacles of prejudice do not hold her back, but tend to make her more determined and confident in her abilities. The female stereotype of looking for a husband is not attached to her, for she knows the higher she goes educationally, the less her chances are for a secure, happy marriage. Bell (1971) suggested that "marriage has limited importance to black women at all educational levels" (p. 254). If education is held

constant, black women would share a greater rejection of marriage than would white women. This is because the poor, black women view marriage as unreliable and upper class black professional women have a small pool of eligible men from which to choose.

The black woman lacks the expectations of an improvement in life style through marriage which the white female has been socialized to expect. There is evidence that a great proportion of black women feel they can do without it (Epstein 1971). As a result, the black young woman has had to be self-reliant and independent because there was no one, other than her parents, on whom she could depend. Her drive or need to survive has been made stronger by her experiences with prejudice and poverty. If she should marry, she would have to work so that her family could enjoy a middle class standard of living.

Black women are more concerned with the financial rewards of work than white women (Shea, Spitz, and Zeller 1970). They are more concerned because they have had to be. The black male's marginality makes it doubtful that he will acquire a professional career (Epstein 1973). Whatever the level of education he attains, he will have difficulty maintaining a middle class lifestyle on his

income alone. It was for these reasons that Epstein (1973) accounts for the emergence of the black professional woman.

The Women's Movement in the United States

This section of the review of literature is concerned with some of the early accomplishments of women and their participation in the women's movements. Women participated in and fulfilled an important role in the early settlement of this country. Many came with their husbands and within a few days or weeks grubbed land, felled trees, and operated whipsaws along with their husbands. In cases of the husband's death, women often remained in the new world, raising their children, and cultivating the land by themselves (Landau 1974). Several women came to this country alone at their own expense, buying up large tracts of land. Many of these women had their own female independent servants. These servants were given a portion of the land to develop at the end of their service period. As a result, females in early colonial America were landowners. Of the group of women whose husbands died or were killed, many became innkeepers or worked in general stores or milinery shops to support themselves and their children. At this time,

there was no law against women owning land or working at any type of job.

As the colonies grew and prospered, more and more women began to enter the innkeeping business. In 1766, two women were among the first people to be granted permission to keep public houses in Savannah (Landau 1974). Some of these inns, which provided food, drink, and accommodations for travelers, became famous meeting places during the American Revolution. Some were very small with only a few rooms and others were graciously furnished establishments (Harris 1971).

Colonial women did not limit themselves to innkeeping, farming, and management of stores and millinery shops. Some took part in the American Revolution. Hundreds of early American women formed anti-tea leagues; others collected and shipped hospital supplies as well as nursed the wounded soldiers. Some of these women made bullets for the army after gathering lead scraps. There were women who disguised themselves as men in order to participate in the American Revolution. Women played a part in almost every capacity in early America, including public service jobs, such as jailkeepers and sextons who kept the churchyards, rang the church bells, and attended to the funerals of the community. In addition

to being some of the first landowners in this country, many opened their own private schools. The women of the early colonization period ran local newspapers and a few were even postmistresses until the Federal government was established. There were women who became nurses during the French and Indian War and the American Revolution (Landau 1974). There were no limits set upon the white female during the early days of colonization of this country.

After the American Revolution, many women went West with their husbands looking for more land. Some lost their husbands on the way and made the trip alone with their children in covered wagons, often fighting Indians. Women would scout the territory for distance and water. When camp was made, they cooked on an open fire. After the pioneer family had settled and built a home, the husband would go into town to sell the family goods and trade family items for food and supplies (Landau 1974).

Pioneer women defended the home against Indians, outlaws, and wolves; all of which were a threat to the family livestock. Early pioneer women became great marksmen. Single women who went West to the new land proved quite resourceful in obtaining their passage and

firearms (Landau 1974). However, by the nineteenth century, women had lost many of the political rights they had obtained during the days of colonization. An example is the first Constitution of New Jersey in 1776. This constitution gave women the right to vote, but it was taken away in 1807. New laws restricted the right to vote to only free white males, property owning citizens; this meant only one-eighth of the population qualified. It was not until women became involved in freeing slaves that they became aware of their own specific type of bondage. White concerned Americans, who called themselves "Abolitionists," dedicated themselves to the abolishment of slavery and helped many slaves to gain freedom. The women involved in the abolishment of slavery began to see the white female as also oppressed. Abby Kelly, feminist and abolitionist during this time, was reported as stating: "In striving to strike his chains off, we found, most surely, that we were manacled ourselves" (Harris 1971, p. 37). Women had long been a part of the underground railroad, helping slaves to get to freedom and the northern United States. The Quaker women of this country were especially paramount in the early anti-slavery movement. These women, with many

others, launched door-to-door campaigns to get anti-slavery politicians to Congress.

Years before the woman's issue was brought before the House of Representatives in the United States, a World Anti-Slavery Convention in London was brought together by two women and these same two women launched the American Woman's Rights Movement which had its first convention in 1848. At this convention, the Quaker women and women from neighboring towns discussed the civil relations and social rights of women in a Declaration of Principles (Harris 1971, p. 41). Among the issues listed at this convention were: (1) women's right to control her own earnings, (2) guardianship of their children in cases of divorce, and (3) the right to vote. More than 6,000 women signed this Declaration of Principles. This Bill was not passed in 1848 when presented to the New York legislature. Two years later, however, after much hard work and coverage, the Bill passed in 1850. Other states followed New York in liberating property laws. At this time, most of the country was torn over the issue of slavery and women's rights became a minor priority (Harris 1971, p. 43).

Women's Rights

As the turmoil in the United States increased over the issue of slavery, people were more concerned with whether the Union could endure or would be split after the Civil War than they were with women's rights. The Emancipation Proclamation, for which the abolitionists had worked so hard, seemed to be a half-measure in that it freed only slaves in the areas of rebellion. Because of the turmoil during the war, women worked even harder for the cause of slavery and put women's rights aside for that period of time. Many of them had hoped that after the war they would be granted their rights just as the slaves were. However, this did not happen and with the end of the Civil War, there was bitter disappointment among these women. While there were two million new black male voters, women still were denied their right to vote. Unfortunately, new black male voters did not support women in their fight; they were not about to jeopardize their gains by aiding the women's rights movements (Harris 1971).

The 14th Amendment was a turning point in the women's movement because this law made it unlawful to deny former slaves their citizenship rights. However, this amendment made no mention of women, black or white.

The women in America, who had fought so hard for the new freedom of blacks, began to fight against this amendment because it gave citizenship rights only to males (Landau 1974).

Black women who had been freed from slavery began to join the fight for women's rights because they still had no civil rights themselves. The black women were treated just as Quaker women and other women of this country were treated, with one exception--they also had to fight racial prejudice (Kraditor 1968).

At this time, a group of women presented a separate amendment to the constitution, one which would guarantee women the same rights as men and most importantly, would give women the right to vote.

The question of a separate amendment is indicated by Harris (1971) to have split the women's movement. There were now two groups of women fighting for essentially the same things. One, the National Woman's Suffrage Organization was headed by the same two women who founded the women's movement in America, Elizabeth Stanton and Susan B. Anthony. This organization was restricted to women only. The second women's organization to be founded was the American Woman's Suffrage Association which was made up of former abolitionists. Harris (1971)

stated that these two groups worked separately and often against each other for twenty years. It was not until 1869 that a bill passed the Wyoming legislature which granted women property rights, equal pay for teachers, and the right to vote. The literature mentioned one black freed slave, Ms. Sojourner Truth (Landau 1974), who traveled and spoke for women's rights during this time.

There were certainly many black females during those days of the movement, but none other than Ms. Truth had done so much for the passage of a women's rights bill (Landau 1974, p. 25).

Once female suffrage had passed in the state of Wyoming, Colorado and Utah followed (Harris 1971). However, there was much furor in each state, both before and after each bill was passed. Suffrage opponents felt that women would vote as their husbands did and that women were "too fine and pure to go to the polls, which were dirty and filled with drunken men" (Harris 1971, p. 48). Suffragists claimed women would purify politics and elevate the standards of morality. Many of the suffragists had rocks and eggs thrown at them as they campaigned for the right to vote (Landau 1974, p. 26). In time, the women's movement had achieved some degree of success. Yet, up to the time of Ms. Anthony's death in 1906, only

four states had given women the right to vote. Ms. Anthony presented an amendment to the United States Constitution which, if passed, would give women in all states the right to vote. Yet, year after year, the Anthony amendment was defeated in the United States Senate (Harris 1971). Harriot Blatch, Ms. Stanton's daughter, founded a new movement. Ms. Blatch felt that a new movement with a dynamic program would get more and faster results (Harris 1971).

The new organization developed by Ms. Blatch, was the Women's Political Union (Landau 1974). This organization proclaimed that women should be industrious and politically minded. One of its most profound contributions to the women's movement was its encouragement for women at all levels and education to become politically involved. It put the industrial women in contact with the professional women. Women were not only earning their own living during this era, but they were also becoming better educated. There were even two colleges, Vassar and Smith College, dedicated to the education of women. This new generation of women put together a vigorous, dynamic program which began to command public attention. In 1912, the Baltimore American Newspaper filed this story from New York:

Women who usually see Fifth Avenue through the polished windows of their limousines and touring cars strode steadily side by side with pale-faced, thin bodied girls from the sweltering sweatshops of the East Side, many were inclined to laugh and jeer, but none did. The sight of an impressive column of women striding five abreast up the middle of the street stifled all thoughts of ridicule (Harris 1971, p. 51).

The new Women's Political Union now had power. By 1912, nine more states had given women the right to vote.

In 1913, two women, Alice Paul and Lucy Burns, returned to the United States after serving jail terms in Britain for political activity and joined the movement here. These two women launched a campaign to obtain a constitutional amendment. The day before Woodrow Wilson's inauguration, a march on Washington was made. The parade was a great success. Pilgrimages to Washington were organized all over the country. Men and women by the hundreds and thousands signed petitions and sent delegations to visit the president. In 1917, the first Congresswomen sat in the 65th Congress from the state of Montana, Jeannette Rankin (Landau 1974). In 1918 the Anthony Amendment passed the Senate by exactly two-thirds of the vote. This came one day before President Wilson's declaration in favor of the amendment giving women the right to vote. On August 18, 1920, the House of Representatives ratified the Anthony Amendment to the Constitution (Landau 1974).

The 19th Amendment became law fifty years after Elizabeth Stanton had written it and the amendment was worded exactly as it had been written. The right to vote for women in this country would not have occurred had it not been for women such as Stanton, Anthony, Truth, Burns, and Paul who dedicated their lives to equal rights for women (Landau 1974).

Since the enactment of the 19th Amendment giving women the right to vote, there has been no significant feminist movement until quite recently. Kraditor (1967) stated that during the post 1920 period, there were many small and effective women's groups. The two major women's groups that co-existed prior to the 1920s appear to have merged as the National Women's Party. The activities of the small organizations were rarely reported in the women's section of the newspapers. Most work labeled "feminist" was of individuals expressing their own views rather than writing on behalf of a movement.

What is felt to have been a contributing factor to the interest in the movement other than the 19th Amendment was the increased social freedom for girls. Public opinion seemed to be that most women were not discriminated against. In fact, in the Woodrow Wilson

Report on Status of Women and other documents during this period, this was the typical statement:

It is not to say that elimination of discrimination is not desirable. Rather, such discrimination barely touches the lives of most women; few are even aware they exist (Kraditor 1968, p. 929).

Yet, there was substantial inequality in private hiring and promotion and even more in thought and custom.

The 1920s saw the impetus of feminist movement decrease although many women were aware of the fact that women had not achieved equality. The various methods of birth control had given women a new type of freedom and many felt that they could control their own lives at last. The 1920s saw a sexual revolution.

The confining hobble skirts and corsets that symbolized the protected woman were replaced by short skirts and bobbed hair--the jazz-age costume (Harris 1971, p. 92).

The emancipated woman was called a "flapper." For the first time, girls were free to go on dates with the man they chose, without a chaperone. Many women were now working in factories and working long hours for a lower rate of pay. By the time the depression came during the early 1930s, women's gains were consolidated. When hard times hit the big cities, women were often the first to be laid off because their salaries were

considered to be less important than that of men. In fact, there were usually two pay scales--one for men and a lower one for women (Harris 1971).

Ten years before the United States entered World War II, a new amendment, the Equal rights Amendment of 1931, had been presented to Congress. The presentation of the Equal Rights Amendment was the work of the Women's groups and supporters of the women's movement during the prior 1920 period. This amendment proposed that "men and women shall have equal rights throughout the United States and every place subject to its jurisdiction" (Kraditor 1968, p. 293). The strongest supporter of the ERA was the National Woman's Party and its strongest opponents were the spokesmen for the women workers (Kraditor 1968, p. 294).

Even though the 19th Amendment of 1920 gave women the right to vote, in the years to follow women were still discriminated against. There were even occupations in which women were not allowed to work at all. Night work was denied women in sixteen states in certain employment. In the states of Arkansas and West Virginia, if a person died intestate with no descendants other than a mother and father, the property went to the father and excluded the mother (Kraditor 1968).

During the Depression, to solve the unemployment situation in some states many women lost their jobs. As women went into new occupations, competition became more keen, and many companies made further special restrictions to keep women from competition for higher positions and promotions.

While women's movement groups continued to fight for the passage and ratification of the Equal Rights Amendment, the country saw the perpetuation of the American Woman as a housewife--taking care of babies and giving up her own career for her husband. This stereotype began during post-World War II era. During the war, the government built nurseries in or near factories so that women could work and aid the war effort and still care for their children. However, after the war, the men came home, the women went back to the home to have babies. Husbands then went through college on the new government sponsored education Bill of Rights. The result was a baby-boom; the rate of births increased in this country as college enrollment for women decreased. Harris (1971) stated that women comprised 47 percent of the college enrollment in 1920 and that by 1958, only 35 percent, or one in three, were women. In 1950, 11 percent of students graduating from medical school were women. By 1960, this

figure had dropped to 7 percent. The media of television, newspapers, and magazines often perpetuated the idea that a woman should be a contented housewife with a happy, healthy toddler at her knee. Society, by the early 1960s, had returned to the separation of male and female roles in the old, traditional way. If a woman were to take on any role other than that of wife and mother, she was automatically interpreted as "thumbing her nose" at society. Real women had many children, made a comfortable home for their husbands and families, and set their personal goals no higher than "catching" and "holding on to" a man to provide for them (Harris 1971, p. 95). Popular opinion polls in the 1950s stated women were happiest and most productive to society in the all-encompassing role of "homemaker." An article in The New York Times (1960) hinted that those women who were not happy in the role of housewife were the educated women. The article stated: "Many, but certainly not all, whose education plunged them into a world of ideas, feel stifled in their homes" (p. 32A). To solve this problem of the over-educated housewife, educators believed that colleges and universities should turn to courses which would prepare the woman for the housewife role. Courses in the family, cooking, textiles, and clothing as well as health and nursing were emphasized

(Harris 1971). In 1963, the results of the Friedan questionnaire were published in the controversial book, The Feminine Mystique. Friedan stated that in the past sixty years women had come full circle and the American housewife was once again trapped in a squirrel cage (Friedan 1963).

At the time this controversial book was published, the country was in the midst of a crisis over the civil rights of black Americans. The women's groups had been working for passage of the ratification of the ERA for some time, but had not been as successful as hoped. There was a decrease in the effects of the women's groups because of the unrest among black people and the country's concern over the public revealing of the humiliations and personal suffering of that group of people. Oregon's Edith Green (Harris 1971) was reported to have said at a meeting of the House of Representatives on the Equal Pay Act of 1963 that:

At the risk of being called an Aunt Jane, if not an Uncle Tom, let us not add any amendment that would get in the way of our primary objective . . . for every discrimination that I have suffered, the Negro women has suffered ten times this amount (p.100).

The Equal Employment Opportunity Commission was begun to enforce the new Civil Rights Act of 1964. Friedan started

a new women's organization which concerned itself with equal employment for all women, black and white. The National Organization for Women (NOW) was the name of this new militant woman's rights organization. NOW researchers found that women's magazines stressed the role of parenthood. Men's magazines contained articles on business, travel, entertainment, but nothing on being a father. It seemed as if the parent role was assigned to women only (Harris 1971, p. 105).

Still today, as in the 1960s, the fight continues for women's rights. The Equal Rights Amendment has not yet been ratified in all states and the white female finds herself still stereotyped in the post World War II typical female role. She is depicted as "passive, emotional, soft, generally weak . . ." (Unger and Denmark 1975, p. 11).

Black Women in the Women's Rights Movement

Black women were not completely unaware of the women's movement, but rather occupied with just surviving (Kraditor 1968). One black student stated:

It's not that black women don't sympathize with white women's lib. We know that both black and white women are denied their rights. But our experiences are so different we can't relate to a middle-class movement (Harris 1971, p. 129).

The black students identified the chief difference in black and white females was that black females had not been dominated by black males. Epstein (1970) also stated that the black female shares an equalitarian role with her mate rather than one of wife-mother dominance (p. 189).

However, as feminism spreads across the country, minority group women are becoming increasingly aware of the fact that they are discriminated against not only as minority group members, but also as women. Shirley Chisholm testified before the Subcommittee on Constitutional Amendments, saying: "I am a woman, then I am black" (Landau 1975, p. 155).

A new black feminist organization was founded-- The National Black Feminist Organization. This group of feminists do not deny the injustice or abuse that black man has endured in this country, however they do not believe in emphasizing male suffering at the expense of women. Black feminists wanted their own organization because they felt other groups did not experience the same types of discrimination as black women. Black men do not experience sexism, while white women do not experience racism. There are some skeptical individuals who view "women's lib" as a white, middle-class movement and feel it impossible for black women to feel any kinship with this group. The

Black National Feminist Organization indicated that some black women have been involved in the women's movement.

The Effects of Changing Women's
Roles Upon the Profession
of Nursing

Nursing has been a traditionally female dominated profession in the United States for well over a century (Goodnow 1958). During the 1960s era when an attempt was made by colleges and universities to promote professions that would prepare women for the housewife role, nursing was one of the professions emphasized. Nurses were "sub-ordinate to and assistants of physicians" (Butler 1978, p. 215). With changes brought by the women's liberation movements have come changes within the profession of nursing. In 1969, Minty and Patterson found that, in general, women who selected a feminine occupation have more favorable attitudes towards marriage and family than those who select a male-dominated occupation. Horner (1972) indicated that those women who enter a male-dominated occupation were actually "acting in a manner contrary to sex appropriate behavior" when he stated:

A girl who maintains the qualities of independence and active striving which are necessary for intellectual mastery defies the conventions of sex-appropriate behavior and must pay the price in anxiety (p. 158).

Changes in the attitudes of women toward themselves as passive and subservient were first seen in leadership in women's professions. In 1965, Oleson and Davis characterized leaders of women's professions as "typically older, unmarried, and childless--evidencing serious career commitment" (p. 341). On the other hand, during that same time, those members in non-leadership positions continued to "gear their major life decisions to the rewards of exigencies emanating from such extra occupational roles as wife, mother and homemaker" (Davis and Oleson 1965, p. 341).

Edwards (1968) characterized the nursing student as passively oriented. In 1971, Cleland reported that 99 percent of all nurses were female and possessed strong identification with the roles of wife and mother. The attention of the women's liberation movement began to focus upon nursing and its passive nature as a profession. Nursing was depicted as "subservient to medicine" and urged "girls with brains to become physicians rather than settling for being nurses" (Powell 1976, p. 352). However, just as women in general are overcoming the confines of the traditional feminine role to become assertive and autonomous, nursing is also making a major transition. Nurses are moving to a new authority and responsibility in patient care (Butler 1978).

Increased Political Activism in Nursing

In the past, nursing has acted as a system unto itself, carrying out its good works, ministering to the ill and the poor, patiently listening to the tribulations of others, consistently focusing on the client/patient, and habitually resisting consideration of its own needs in representing itself to society at large (Powell 1976). Nursing is proud of its heritage, perhaps it is the only remaining profession that truly strives to acknowledge the client/patient as a whole person, with needs and concerns beyond a diagnosis. Yet, to survive in today's "future shock" world and to reach its full potential as a societal force, nursing must extend itself beyond the safe but artificial limits of its woven cocoon. It must project itself into the current political, economic, and social mainstream. While nursing's internal struggles have sapped its strength and energy, the profession has, until recently, "let the rest of the world go by," largely ignoring the basic tenet stated by Martha Rogers (1970) that "Man and environment are continuously exchanging matter and energy with one another (p. 54).

To effect constructive changes in the health-care system and the federal, state, and local laws affecting nursing, nurses needed to increase their

political awareness and involvement (Powell 1976). In 1971, nursing began to do just that--to form a political arm to the American Nurses Association (ANA).

On July 22, 1971, disturbed by nursing's lack of impact on trends in health care, a group of nursing leaders from across the country met to develop strategies to increase nursing's influence on national laws governing health care. They recognized that many internal issues were dividing the profession, and that much of its energy was being squandered on in-fighting, leaving little to be directed outward to society's affairs. Hoping to overcome this situation, the group concentrated on issues which affect all nursing, and indeed all Americans, namely legislative concerns about national health care plans. Recognizing the political naivete of the majority of nurses, nursing leaders considered education regarding the legislative process and health issues as a prime goal.

The nurses called their group Nurses for Political Action (NPA), and as a national organization, hoped to encourage the development of similar groups on statewide and grass roots levels. Included among the founders of Nurses for Political Action were such well-known persons as Irene Pagel, Ellen Fahy, Marjorie Stanton, Rachel Rotkovitch, and Sylvia Carlson.

In November 1973, the American Journal of Nursing announced,

ANA to form National Political Arm, [and predicted that] nurses will be exercising more political influence soon, with the establishment of a new non-partisan political arm of the American Nurses Association (ANA to Form National Political Arm 1973, p. 33).

NPA had succeeded in its work and moved itself into the framework of the new organization. To avoid confusion, the new political action arm of the ANA gave itself the name Nurses Coalition for Action in Politics (N-CAP).

N-CAP stated as its functions: (1) to further the political education of its members, (2) to encourage members to register to vote, (3) to stimulate members to become responsible citizens working to carry out their civic responsibilities, and (4) to raise funds and make contributions to candidates and office-holders who have demonstrated supportive positions on issues of importance to nurses and health care (N-CAP promotional material 1973).

There is evidence that N-CAP has been a major factor in the nursing movement toward greater political involvement, although no direct cause and effect can be claimed. A survey to determine how many nurses actually serve in state legislatures revealed that as of May 1975, twenty-two nurses were serving in the legislatures of the

fourteen responding states (Fifteen Nurse Legislators Reported in Thirteen States 1975; Letters 1975). And, as of July 1976, there were sixteen states with official nursing political action committees, many of which had been organized with N-CAP guidance and encouragement.

N-CAP and the state Political Action Committees (PACs) are working to support the passage of the Equal Rights Amendment. It has been said that the problems in nursing represent the women's liberation movement in micro-cosm (Schuman 1974). Therefore, a victory for the ERA could represent improvement and changes in the work environment of nurses, a largely female profession.

The National Organization of Women (NOW) currently has its own nursing chapter, called Nurses NOW. One of its goals is to combat the "prevailing stereotype that nurses are passive and unable to act decisively."

Statewide, with the added political clout of PACs, nurses will be working to influence legislators to approve bills of concern to nurses and society. Examples of such bills are mandatory licensure, mandatory continuing education for relicensure, third-party reimbursement for direct nursing services, requirement of the baccalaureate degree at the entry level of professional practice in nursing, repeal of an outdated and dangerous exemption

clause to the state aides in certain state mental hygiene institutions to perform such RN duties as administration of medications and group therapy.

For the first time in 1976, the national nursing political action group, N-CAP, endorsed candidates to the United States Senate and House of Representatives. As has been noted, nursing has been at a disadvantage on many fronts in its absolute impotency in shaping the laws governing its practice. State practice acts, federal regulations, national health planning bills, local and state advisory boards mandated through law, all point to the fact that nurses are not yet recognized as a force that must be listened to in the political arena (Powell 1976). Nurses, however, through such as organizations as N-CAP, ERA, and NOW are making positive strides towards rectifying this situation.

By examining the health care voting records of incumbents, by meeting with candidates and sharing their views, by providing legislators with nursing input so that wiser health care decisions might be made, nurses are elevating their level of political sophistication, performing their civic duty, and increasing their visibility and importance in society. "Nursing has been called by some the sleeping giant--after years of somnolence, the

giant is awakening" (Powell 1976, p.360). Nurses are becoming more assertive, making independent decisions, and functioning in expanded roles, which reflect their abilities and intelligence as women of today.

Summary

A review of the literature has been presented that is concerned with the development of assertiveness and self-esteem in the black and white professional nurse. Factors inherent in the development of these traits, such as family background, the development of women's movement in the United States, and its resultant effects upon the profession of nursing have been explored.

CHAPTER III

COLLECTION AND TREATMENT OF DATA

This was a descriptive, correlational research study. The primary purpose of this type of research is to make inferences about relationships among variables, without direct intervention (Kerlinger 1973). These variables, studied in this research study, were: economic need, mother-provider figure, self-esteem, assertiveness, and double-negative.

Setting

The setting of this research study was a large city in north central Texas. The city is metropolitan and has a population of over two million persons. The hospital in which the study was conducted is an acute-care facility of five hundred beds. It also offers home care to clients requiring long-term care.

Sample

The sample was composed of sixty-three black and white professional nurses; all of whom volunteered to participate in the study. Thirty-two of the participants were black nurses and thirty-one of the participants were white nurses with two or more years of nursing

experience in a large city hospital. Participants in this sample were between the ages of 22 and 50 years of age. No consideration was given to marital, parental, or economic status.

Protection of Human Subjects

Written permission to perform this study was obtained from the Texas Woman's University Human Research Review Committee. Subjects were informed of the purpose and the methodology of the study by means of a written explanation (Appendix D). Each subject who agreed to participate in the study was asked to sign a consent form stating that an explanation of the study had been given and that they agreed to participate (Appendix C). Participants were requested not to write their names on the answer sheets to ensure that the participants would remain anonymous. The subjects' answer sheets were coded numerically with a number assigned to represent each subject. The subjects were protected from any possible embarrassment by maintaining the confidentiality of the results of the correlations found.

If a participant requested her specific scores, they were given upon presentation of the assigned number. Subjects could withdraw from the study at any time without penalty.

Instrumentation

Three tools were utilized in this study: the Rathus Assertiveness Schedule (RAS), the Guttman Self-Esteem Scale, and the Arnold Questionnaire. The Rathus Assertiveness Schedule is a thirty-item schedule used to measure assertiveness or assertive behavior and responses. The reliability of the RAS was established by administering the instrument to sixty-eight undergraduate college men and women ranging in age from 17 to 27 years, and then retesting them after eight weeks. A Pearson product moment correlation coefficient was run between respondents' pre- and post-test scores, yielding an r of .7782 ($p = .01$), indicating moderate to high stability of test scores over a two-month period (Rathus 1973).

Split-half reliability and internal consistency of the RAS was determined by having eighteen juniors and seniors administer the test to sixty-seven people off campus. A Pearson product moment correlation coefficient was run between total odd and even item scores, yielding an r of .7723 ($p = .01$) suggesting that the qualities measured by the RAS possess moderate to high homogeneity (Rathus 1973).

The second instrument used was the ten-item Guttman Scale which measures the self-acceptance aspect of

self-esteem. This scale yielded a Spearman rank correlation coefficient of .97 after use with 5,024 subjects. The scale has been shown to be internally reliable and unidimensional, and appears to have face validity, in that the questions are apparent (Rosenberg 1965).

The third instrument, the Arnold Questionnaire, was developed by the researcher specifically for this study to determine how influential the three variables being tested--mother-provider figure, economic need, and the double negative--had been on each participant's career.

Based on relevant literature, thirty-five questions were derived to form the questionnaire. Eleven questions were directed towards the mother-provider category, twelve questions addressed the economic need category, and twelve questions composed the double-negative category. Content of the Arnold Questionnaire was evaluated by a three-member panel of experts, all of whom were female. One of the experts held a Ph.D. and is a faculty member of the University of Texas, Department of Health Science. The second expert, a black professional female, was a doctoral candidate in nursing. The third expert was also a doctoral candidate in educational psychology and is a member of the faculty at a large university.

Each panel member was provided a list of the questions organized according to their category. A list of definitions of the categories was also provided (Appendix B). These experts were asked to evaluate each topic according to the following criteria:

1. Clarity--was the question well written and free from ambiguity
2. Conciseness--was the question brief and compact
3. Relevance--did the question speak to the variable under which it was listed

The experts considered the terminology of the Arnold Questionnaire to be clear, concise, and relevant. One panel member suggested the addition of another question to the mother-provider category, and one other panel member suggested that two of the sentences be rephrased.

The reliability of the questionnaire was tested us using the test-retest method of forty-seven professional women. A Pearson product correlation coefficient was run between respondents' pre- and post-test scores, yielding a Pearson r of 0.774, $p < .0010$ for mother-provider; economic need yielding a Pearson r of 0.895, $p < .0010$, and double negative variable yielding a Pearson r of 0.622, $p < .0010$.

The questionnaire was then revised for presentation to the subjects. Categories were removed and the items were scrambled in order to minimize possible bias (Appendix A).

Data Collection

Permission to collect data for the study was obtained from Texas Woman's University Human Research Review Committee. The nurse administrator of the hospital selected was contacted to obtain agency permission. When agency permission was granted, prospective participants were contacted, given a brief description of the study, and an informed consent form was signed. The researcher was available to answer any questions and explain possible risks to prospective participants. Those subjects who agreed to participate in the study were asked to sign the informed consent form (Appendix C). The sample was selected by the self-selection method.

Subjects can "assign themselves" to groups, can "select themselves" into groups on the basis of characteristics. . . . These characteristics may be extraneous to the research problem or are otherwise related to the variables of the research problem (Kerlinger 1973, p. 381).

The group was composed of professional nurses between 22 and 50 years of age and with at least two years of nursing experience.

A number was assigned to each tool and given to the subjects. A minimum of twenty-four hours was given each subject to complete the questionnaires. The questionnaires were collected by the researcher at a later date. The three tools took approximately twenty-five minutes to complete. If a participant wished to withdraw from the study at any time, she could do so without penalty.

Treatment of Data

The t-test for correlated samples was done to determine if a relationship existed among the variables; i.e., mother-provider figure, double negative, and economic need, to the variables of self-esteem and assertiveness. The Pearson product moment correlation coefficients were run between the means of the t-scores obtained to determine the significant difference that was measured in the relationships among the variables.

Summary

This was a descriptive correlational study, designed to make inferences about the relationships among the five independent variables of professional women: mother-provider figure, economic need, double-negative, self-esteem, and assertiveness. The setting from which the population was selected and the data collected was

an acute care facility in the north central portion of the United States.

Subjects participating in the study were professional nurses between the ages of 22 and 50 years with at least a Bachelor of Science or Bachelor of Arts degree and two years of nursing experience. Data were obtained by administering three questionnaires to a total of sixty-three respondents.

CHAPTER IV

ANALYSIS OF DATA AND RESULTS

A descriptive, correlational study was conducted to determine if there were relationships between and among the five variables: mother-provider, economic need, double negative, self-esteem, and assertiveness in black and white nurses. This chapter reports the analysis of data gathered by use of the Arnold Questionnaire, The Guttman Self-Esteem Scale, and the Rathus Assertiveness Schedule. Sixty-three professional nurses participated as subjects in the study.

The Sample

The sample consisted of sixty-three professional nurses with two or more years of nursing experience in an acute care setting. These nurses were between 22 and 50 years of age. Thirty-two of the professional nurses were black and thirty-one were white. No consideration was given to marital or economic status or type of clinical nursing experiences.

Hypothesis Number One

The first hypothesis was: There is no difference in the assertiveness levels of black professional nurses

and white professional nurses as measured by the Rathus Assertiveness Scale. The hypothesis was treated by utilizing the t-test for correlated samples to determine the extent of the relationship and the Pearson product moment coefficient to analyze the variance of assertiveness for the two groups of nurses. The null hypothesis of no significant difference was accepted. The indication for these sample subjects is that there was no significant difference between black and white nurses on the assertiveness scores. Table 1 indicates the differences in assertiveness scores for the black professional nurses and the white professional nurses.

TABLE 1
DIFFERENCE BETWEEN ASSERTIVENESS SCORES
IN BLACK AND WHITE NURSES

Group	N	\bar{X}	S	SEM	t	p
Black Nurses	32	63.4	9.16	1.62		
					-0.34	.736
White Nurses	31	62.6	8.63	1.55		

The black nurses obtained a mean score higher than the white nurses for assertiveness. The dispersion of the scores was almost identical.

Hypothesis Number Two

The second hypothesis was: There is no difference in the self-esteem of black professional nurses and white professional nurses as measured by the Guttman Self-Esteem Scale. The hypothesis was treated by utilizing the t-test for correlated samples to determine the extent of the relationship and the Pearson product moment correlation coefficient to analyze the variance of self-esteem for the two groups of nurses. The null hypothesis of no significant difference was accepted. The indication is that for this sample, there are no significant differences between black and white nurses in regard to self-esteem. Table 2 displays the self-esteem scores of the two groups of nurses.

TABLE 2
DIFFERENCE BETWEEN SELF-ESTEEM SCORES
IN BLACK AND WHITE NURSES

Group	N	\bar{X}	S	SEM	t	p
Black Nurses	32	24.03	2.68	.45	-1.30	.19
White Nurses	31	25.16	2.65	.47		

Hypothesis Number Three

The third hypothesis stated: There is no relationship between double-negative, mother-provider, and economic need for the black and white professional nurses as measured by the Arnold Questionnaire. The hypothesis was treated by utilizing the t-test for correlated samples to determine the extent of the relationship and the Spearman rank-order correlation technique to analyze the variance of the relationship among the three variables. The null hypothesis of no relationship was rejected for both groups of nurses on the three variables, mother-provider, economic need, and double negative.

The inference for the subjects in the study is that for both black and white nurses, mother-provider and economic need are related, mother-provider and double negative are related, and that there is a relationship between economic need and double negative. These results are presented in table 3.

Hypothesis Number Four

The fourth hypothesis stated: There is no relationship between double-negative, mother-provider figure, economic need, and self-esteem in the black professional nurses. The hypothesis was treated by utilizing the

TABLE 3

RELATIONSHIPS AMONG MOTHER-PROVIDER, ECONOMIC
NEED, AND DOUBLE NEGATIVE FOR BLACK
AND WHITE NURSES

Correlation Coefficients for Black Nurses			
	MP	EN	DN
Mother-Provider (MP)	--	.31	.42**
Economic Need (EN)	--	--	.34*
Double Negative (DN)	--	--	--

* = Significant at .05

** = Significant at .01

Correlation Coefficients for White Nurses			
	MP	EN	DN
Mother-Provider (MP)	--	.6***	.35*
Economic Need (EN)	--	--	.11
Double Negative (DN)	--	--	--

* = Significant at .05

*** = Significant at .001

Spearman rank correlation for the Arnold data, the Pearson for the Guttman and Rathus data, and the t-test was run between the means of the scores. The null hypothesis was rejected for the black nurses for the following variables: self-esteem and economic need, mother-provider and economic need, and double-negative. The

implication for the sample of black nurses in this study is that there were significant relationships among self-esteem, economic need, mother-provider and double negative. These results are shown in table 4.

TABLE 4
CORRELATION COEFFICIENTS OF THE FIVE VARIABLES
FOR THE BLACK PROFESSIONAL NURSES

	SE	ASR	MP	EN	DN
Self-Esteem (SE)	--	.23	-.02	.36*	.09
Assertiveness (ASR)	--	--	.23	.003	.05
Mother-Provider (MP)	--	--	--	.32*	.42**
Economic Need (EN)	--	--	--	--	.34*
Double Negative (DN)	--	--	--	--	--

* = Significant at .05
** = Significant at .01

Hypothesis Number Five

The fifth hypothesis stated: There is no significant relationship between double negative, mother-provider figure, economic need, and self-esteem and assertiveness in the white professional nurses. The hypothesis was treated by applying the Spearman for the Arnold data, the Pearson for the Guttman and Rathus data, and the t-test were used to determine and analyze the

variance in the relationships. The null hypothesis was rejected for the white nurses on the following variables: assertiveness and mother-provider, assertiveness and economic need, mother-provider and economic need, mother-provider and double-negative. By rejecting the null hypothesis, the indication is that there is a relationship between assertiveness and mother-provider and assertiveness and economic need. There was also a relationship between mother-provider and economic need, mother-provider and double negative. Table 5 explains these results.

TABLE 5
CORRELATION COEFFICIENTS OF THE FIVE VARIABLES
FOR THE WHITE PROFESSIONAL NURSES

	SE	ASR	MP	EN	DN
Self-Esteem (SE)	--	-.02	.02	-.12	-.19
Assertiveness (ASR)	--	--	-.20*	-.35*	-.07
Mother-Provider (MP)	--	--	--	.6***	.35*
Economic Need (EN)	--	--	--	--	.11
Double Negative (DN)	--	--	--	--	--

* = Significant at .05
*** = Significant at .001

Hypothesis Number Six

The sixth hypothesis stated: There is no significant difference in the black nurses and white nurses in regard to the five variables studied. The hypothesis was treated by utilizing the Mann-Whitney U test to compare the group means for the variables. The null hypothesis was rejected for one variable--double negative. In rejecting the null hypothesis for this variable, the inference for the sample in this study was that there was a difference in both groups of nurses for the variable of double-negative. The null hypothesis of no difference was accepted for the following variables: assertiveness, self-esteem, mother-provider, and economic need. In accepting the null hypothesis for all the remaining variables listed in the instruments, the indication is that for these subjects, there are no significant differences in assertiveness, self-esteem, mother-provider, and economic need (see table 6).

Summary of Findings

The following summarizes the findings of this study:

1. There is no difference in black or white professional nurses in regard to the concept of assertiveness

TABLE 6

DIFFERENCE IN THE FIVE VARIABLES BETWEEN THE
BLACK AND WHITE PROFESSIONAL NURSES

DIFFERENCE BETWEEN ASSERTIVENESS SCORES						
Group	N	\bar{X}	S	SEM	t	p
Black Nurses	32	63.4	9.16	1.62	-0.34	.736
White Nurses	31	62.6	8.63	1.55		
DIFFERENCE BETWEEN SELF-ESTEEM SCORES						
Group	N	\bar{X}	S	SEM	t	p
Black Nurses	32	24.03	2.68	.45	1.30	.19
White Nurses	31	25.16	2.65	.47		
DIFFERENCE BETWEEN MOTHER-PROVIDER SCORES						
Group	N	\bar{X}	S	SEM	Mann-Whitney	p
Black Nurses	32	16.68	2.43	.44	4.80	< .82
White Nurses	31	17.29	3.79	.68		
DIFFERENCE BETWEEN ECONOMIC NEED SCORES						
Group	N	\bar{X}	S	SEM	Mann-Whitney	p
Black Nurses	32	19.19	2.26	.41	4.18	< .28
White Nurses	31	20.45	2.47	.44		

TABLE 6 (continued)

Group	N	\bar{X}	S	SEM	DIFFERENCE BETWEEN DOUBLE NEGATIVE SCORES	
					Mann-Whitney	p
Black Nurses	32	15.81	2.10	.38	3.40	<.03*
White Nurses	31	16.74	2.03	.37		

* = Significant at .05

2. No differences were found in the self-esteem scores between the black and white professional nurses

3. There was a relationship found among double negative, mother-provider, and economic need in the two groups of nurses

4. For the black nurses, there was a relationship between self-esteem and economic need. Mother-provider was related to economic need and double negative, and economic need was related to double negative. An inverse relationship was found between self-esteem and the variables assertiveness and mother-provider. Assertiveness was found not to be related to any of the other three variables

5. For the white nurses, there was an inverse relationship between assertiveness and the variables mother-provider and economic need. Mother-provider and

the variables economic need and double-negative were significantly related

6. For both black and white nurses, there was a difference in regard to the double negative. No differences were found on the other four variables

CHAPTER V

SUMMARY, CONCLUSIONS, AND
RECOMMENDATIONS

Summary

This was a descriptive, correlational research study. The primary purpose of this type of research was to make inferences about relationships among variables without direct intervention (Kerlinger 1973). The variables studied in this research study were: economic need, mother-provider figure, self-esteem, assertiveness, and double-negative. The problem of this study was to determine if assertiveness and self-esteem are related to the variables of double-negative, mother-provider figure, and economic need in the black and white professional nurse.

The theoretical framework of this study was based on the work of Epstein (1973). The major concepts of Epstein's Theory of the successfulness of the black professional woman are self-esteem, assertiveness, mother-provider figure, economic need, and multiple or double negative. Mother provider figure--a mother who works outside the home to provide financial support. She works,

but at the same time is loving and affectionate to her family.

Economic need--the mother has to work for the family to have the necessary items needed for a healthy life. In some instances, she works not to provide the necessary items, but for the extras which mean much to the family; for example, money to go to college, which might not be there if the mother had not worked.

Multiple negative was altered to double negative for this study--viewed as fighting two prejudices rather than one; for example, being of female gender and belonging to the black race. For the white female for the purpose of this study, the double negative was defined as being stereotyped in the traditional feminine role and being of female gender. Epstein's theory of successfulness of the black professional woman was for the purposes of this study applied to both black and white professional nurses.

The following null hypotheses were formulated for the purposes of this study:

1. There will be no difference in the assertiveness levels of black professional nurses and white professional nurses as measured by the Rathus Assertiveness Scale

2. There will be no difference in the self-esteem of black professional nurses and white professional nurses as measured by the Guttman Self-Esteem Scale

3. There will be no relationship between double-negative, mother-provider figure, and economic need between black and white professional nurses as measured by the Arnold Questionnaire

4. There will be no relationship between double-negative, mother-provider figure, economic need, self-esteem, and assertiveness in the black professional nurse

5. There will be no relationship between double-negative, mother-provider figure, economic need, and self-esteem and assertiveness in the white professional nurse

6. There will be no difference in the black nurses and white nurses in regard to the five variables studied

The setting of this research study was a large city in north central Texas. The city is metropolitan and has a population of over two million persons. The hospital in which the study was conducted was an acute care facility of five hundred beds. It also offers home care to clients requiring long-term care.

The sample was composed of sixty-three black and white professional nurses; all of whom volunteered to

participate in the study. Thirty-two of the participants were black nurses and thirty-one of the participants were white nurses with two or more years of nursing experience in a large city hospital. Participants in this sample were between the ages of 22 and 50 years. No consideration was given to marital, parental, or economic status.

Three tools were utilized in this study: The Rathus Assertiveness Schedule (RAS), the Guttman Self-Esteem Scale, and the Arnold Questionnaire. The Rathus Assertiveness Schedule is a thirty-item schedule used to measure assertiveness or assertive behavior and responses. The second instrument used was the ten-item Guttman Scale which measures the self-acceptance aspect of self-esteem. The third instrument used in the study was the Arnold Questionnaire, a thirty-five item ordinal scale which was used to determine how influential the three variables being tested--mother-provider figure, economic need, and the double-negative--had been on each participant's career. The tool was developed specifically for this study by the researcher.

The findings of the study were:

1. There were no differences in black or white professional nurses in regard to the concept of assertiveness

2. No differences were found in the self-esteem scores between the black and white professional nurses

3. There was a relationship found among double negative, mother-provider, and economic need in the two groups of nurses

4. For the black nurses, there was a relationship between self-esteem and economic need. Mother-provider was related to economic need and double negative, and economic need was related to double negative. An inverse relationship was found between self-esteem and the variables assertiveness and mother-provider. Assertiveness was found not to be related to any of the other three variables

5. For the white nurses, there was an inverse relationship between assertiveness and the variables mother-provider and economic need. Mother-provider and the variables economic need and double-negative were significantly related

6. For both black and white nurses, there was a difference in regard to the double negative. No differences were found on the other four variables

Conclusions

The conclusions for the study are as follows:

1. In support of Epstein's theory, the black nurse subjects indicated a relationship between the three variables: mother-provider, economic need, and double-negative. Epstein described these as contributing to the success of black females. Epstein's theory appears to have application to the white females in this study. Both groups of professional nurses may have come from homes where there was a working mother, where there was an economic need factor or other variable present, and where there was awareness of the double-negative. Though the white nurses were aware of double-negative, the black females were more aware of prejudices.

2. The subjects indicated that for the black female the working mother was not as significant for them as for the white nurses. This may be because black females have worked since days of slavery to help the family and in black society it is more uncommon for the mother not to work (Epstein 1973). In white society, the reverse is true. After World War II, the white female went back to the home (Harris 1971). In this sample, the working mother was extremely significant to the white

nurses. In conversations with white nurses, several indicated strong loving relationships for their mothers because the mother worked to help the family. The black nurses may not have been as impressed as the white nurses by the working mother because this was an expected behavior for the black female.

3. Since there was no difference in assertiveness and self-esteem for the sample in this study, it appeared that the two groups of nurses may have come from the same type of home environment--a middle-class home with two working parents. The nurses also appeared to have come from similar nursing programs.

4. The black nurses appeared to be slightly more assertive than the white nurses. This may be due to their socialization into the white world, and also because they no longer have a real need to be as assertive as blacks have in the past. Epstein's (1973) theory was not supported by this finding.

5. The self-esteem scores were slightly higher for the white nurses, indicating that they felt better about themselves. For this sample, Epstein's theory again was not supported since Epstein stated that blacks have higher and equal self-esteem as whites in most instances

6. The gap between black and white professional nurses seemed to be closing in regard to the five variables studied

Recommendations

The recommendations of the study are the following:

1. The study should be replicated with a larger sample
2. The Arnold Questionnaire needs further reliability testing in regard to the concept double-negative
3. Further research should be conducted regarding mother-provider and economic need for which nurses and other white females
4. Systematic inquiry into the white mother-provider and the assertiveness factor in the daughter should be supported
5. Further study should be done on the concept of self-esteem for black and white nurses
6. The three variables of mother-provider, economic need, and double-negative should be studied with a larger sample of both black and white professional women

APPENDIX A

ARNOLD QUESTIONNAIRE

Please answer all questions as truthfully as possible. Information obtained in this questionnaire will be confidential and coded by the researcher.

Directions: Indicate (1) Yes; (2) No; or (3) Sometimes, to the following questions.

- _____ 1. Was there a father or father image present in your home?
- _____ 2. Did you participate in school activities which required uniforms, instruments, etc.?
- _____ 3. Being a female has made it easier for me to get my way.
- _____ 4. Did your mother work outside the home?
- _____ 5. As a child, did you have frequent dental checkups at a private dentist?
- _____ 6. Being a white female has made it easier for me to get my way.
- _____ 7. Was your mother an assertive type of personality?
- _____ 8. Did you grow up in a lower class home environment?
- _____ 9. Being a black female has made it easier for me to get my way.
- _____ 10. Was your mother a passive type of personality?
- _____ 11. Did you grow up in a middle class home environment?
- _____ 12. It would be better occupationally for me to have been a male.
- _____ 13. Do you feel your mother played an influential role in the selection of your career?
- _____ 14. Did you grow up in an upper class home environment?
- _____ 15. Males appear to advance faster in the career I have chosen.

- _____ 16. Do you feel your father played an influential role in the selection of your career?
- _____ 17. As a child, were you able to get most of the things you wanted (toys, T.V., telephone, etc.)?
- _____ 18. In the field I have chosen as a career, females are not considered as stable and independent as males.
- _____ 19. Were you encouraged to be self-reliant and independent by your mother?
- _____ 20. As a child, did you ever live in a housing project?
- _____ 21. If I were black, I could advance faster in my career.
- _____ 22. Were you encouraged to be self-reliant and independent by your father?
- _____ 23. Was your hair frequently done at home?
- _____ 24. If I were white, I could advance faster in my career.
- _____ 25. Were you encouraged to get married and have a family by your mother?
- _____ 26. Was your hair frequently done at a beauty shop?
- _____ 27. I am an independent, assertive, black female.
- _____ 28. Were you encouraged to have a career by your mother?
- _____ 29. Did you take music lessons outside the home as a child?
- _____ 30. I am a dependent, non-assertive, black female.
- _____ 31. Were you encouraged to get married and have a career by your mother?
- _____ 32. Was the community you lived in ever referred to as being across the tracks/on the wrong side of the tracks?
- _____ 33. I am an independent, assertive, white female.
- _____ 34. Did your mother's income contribute to the family welfare?

_____ 35. I am a dependent, non-assertive, white female.

_____ 36. Circle the number child you are in your family.

1 2 3 4 5 6 7 8 9 10 11 12 13

Source: Developed by researcher, Brenda J. Arnold, January 1979.

TEN ITEM GUTTMAN SCALE

Directions: Indicate your attitude regarding the following statements by placing the word which "best" suits your degree of agreement.

- (1) Strongly agree
- (2) Agree
- (3) Disagree
- (4) Strongly disagree

- _____ On the whole, I am satisfied with myself.
 - _____ At times I think I am no good at all.
 - _____ I feel that I have a number of good qualities.
 - _____ I am able to do things as well as most other people.
 - _____ I feel I do not have much to be proud of.
 - _____ I certainly feel useless at times.
 - _____ I feel that I am a person of worth, at least on an equal plane with others.
 - _____ I wish I could have more respect for myself.
 - _____ All in all, I am inclined to feel that I am a failure.
 - _____ I take a positive attitude toward myself.
-
-

SOURCE: Guttman Scale, copies from Rosenberg, Morris, 1972, Race, ethnicity, and self-esteem. In Black Psyche, pp. 87-99. Edited by S. Guttman. Berkeley: The Glendessary Press, Inc.

RATHUS ASSERTIVENESS SCHEDULE

Directions: Indicate how characteristic or descriptive each of the following statements is of you by using the code given below.

- (1) Extremely Agreeable
- (2) Quite Agreeable
- (3) Slightly Agreeable
- (4) Not Agreeable

- _____ 1. Most people seem to be more aggressive and assertive than I am.
- _____ 2. I have hesitated to make or accept dates because of "shyness."
- _____ 3. When the food served at a restaurant is not done to my satisfaction, I complain about it to the waiter or waitress.
- _____ 4. I am careful to avoid hurting other people's feelings, even when I feel that I have been injured.
- _____ 5. If a salesman has gone to considerable trouble to show me merchandise which is not quite suitable, I have a difficult time in saying "No."
- _____ 6. When I am asked to do something, I insist upon knowing why.
- _____ 7. There are times when I look for a good, vigorous argument.
- _____ 8. I strive to get ahead as well as most people in my position.
- _____ 9. To be honest, people often take advantage of me.
- _____ 10. I enjoy starting conversations with new acquaintances and strangers.
- _____ 11. I often don't know what to say to attractive persons of the opposite sex.
- _____ 12. I will hesitate to make phone calls to business establishments and institutions.

- _____ 13. I would rather apply for a job or for admission to a college by writing letters than by going through with personal interviews.
- _____ 14. I find it embarrassing to return merchandise.
- _____ 15. If a close and respected relative were annoying me, I would smother my feelings rather than express my annoyance.
- _____ 16. I have avoided asking questions for fear of sounding stupid.
- _____ 17. During an argument I am sometimes afraid that I will get so upset that I will shake all over.
- _____ 18. If a famed and respected lecturer makes a statement which I think is incorrect, I will have the audience hear my point of view as well.
- _____ 19. I avoid arguing over prices with clerks and salesmen.
- _____ 20. When I have done something important or worthwhile, I manage to let others know about it.
- _____ 21. I am open and frank about my feelings.
- _____ 22. If someone has been spreading false and bad stories about me, I see him (her) as soon as possible to "have a talk" about it.
- _____ 23. I often have a hard time saying "No."
- _____ 24. I tend to bottle up my emotions rather than make a scene.
- _____ 25. I complain about poor service in a restaurant and elsewhere.
- _____ 26. When I am given a compliment, I sometimes just don't know what to say.
- _____ 27. If a couple near me in a theatre or at a lecture were conversing rather loudly, I would ask them to be quiet or to take their conversation elsewhere.
- _____ 28. Anyone attempting to push ahead of me in a line is in for a good battle.
- _____ 29. I am quick to express an opinion.

_____ 30. There are times when I just can't say anything.

SOURCE: Rathus Assertiveness Schedule. Copied from
A 30-Item Schedule for Assessing Assertive Behavior Therapy (1973)
4:398-406.

APPENDIX B

Dear Panel Member:

Thank you for agreeing to evaluate the Arnold Questionnaire developed to measure the variables inherent in the emergence of professional women. The questions were derived from the literature and are geared to the following topics: Mother-Provider, Economic Need, and Double Negative. The definitions of these terms are as follows:

1. Mother-provider figure--a working mother who contributed moneys to the family income and was caring and loving toward her family
2. Economic need--moneys needed to support or supplement family income
3. Double negative (black woman)--belonging to the black race and being of female gender

You are asked to evaluate the questions according to their clarity, conciseness, and relevance to the assigned topic by placing a check in the appropriate space. Additional space has also been provided for your comments.

Please place your response in the self-addressed envelope. Should you have any questions, I may be reached at 339-4328. Thank you again for taking the time to answer my questionnaire.

Panel Evaluation Tool

Topic: Mother-Provider	Clear		Concise		Relevant		Comments
	Yes	No	Yes	No	Yes	No	
1. Was there a father or father image in your home?							
2. Did your mother work outside the home?							
3. Was your mother an assertive type of personality?							
4. Was your mother a passive type of personality?							
5. Do you feel your mother played an influential role in the selection of your career?							
6. Do you feel your father played an influential role in the selection of your career?							
7. Were you encouraged to be self-reliant and independent by your mother?							
8. Were you encouraged to be self-reliant and independent by your father?							
9. Were you encouraged to get married and have a family?							
10. Were you encouraged to have a career?							
11. Were you encouraged to get married and have a career?							

Panel Evaluation Tool (Continued)

Topic: Economic Need	Clear		Concise		Relevant		Comments
	Yes	No	Yes	No	Yes	No	
1. Did you participate in school activities which required uniforms, instruments, etc.?							
2. As a child, did you have frequent dental checkups at a private dentist?							
3. Did you grow up in a lower class home environment?							
4. Did you grow up in a middle class home environment?							
5. Did you grow up in an upper class home environment?							
6. As a child, were you able to get most of the things you wanted (toys, T.V., telephone, etc.)?							
7. As a child, did you ever live in a housing project?							
8. Was your hair frequently done at home?							
9. Was your hair frequently done at a beauty shop?							
10. Did you take music lessons outside the home as a child?							
11. Was the community you lived in ever referred to as being across the tracks/on the wrong side of the tracks?							

Panel Evaluation Tool (Continued)

Topic: Economic Need	Clear		Concise		Relevant		Comments
	Yes	No	Yes	No	Yes	No	
12. Did your mother's income contribute to the family welfare?							
13. Circle the number child you are in your family. 1 2 3 4 5 6 7 8 9 10 11 12 13							

Panel Evaluation Tool (Continued)

Topic: Double Negative	Clear		Concise		Relevant		Comments
	Yes	No	Yes	No	Yes	No	
1. Being a female has made it easier for me to get my way.							
2. Being a white female has made it easier for me to get my way.							
3. Being a black female has made it easier for me to get my way.							
4. It would be better occupationally for me to have been a male.							
5. Males appear to advance faster in the career I have chosen.							
6. In the field I have chosen as a career, females are not considered as stable and independent as males.							
7. If I were black, I could advance faster in my career.							
8. If I were white, I could advance faster in my career.							
9. I am an independent, assertive, black female.							
10. I am a dependent, non-assertive, black female.							
11. I am an independent, assertive, white female.							
12. I am a dependent, non-assertive, white female.							

APPENDIX C

TEXAS WOMAN'S UNIVERSITY

Human Research Committee

Name of Investigator: Brenda Arnold Center: Dallas
Address: 4431 Wood Hollow Drive, #349 Date: 1/24/79
Dallas, Texas 75237

Dear Ms. Arnold:

Your study entitled Assertiveness and Self-Esteem of Black and White Professional Women has been reviewed by a committee of the Human Research Review Committee and it appears to meet our requirements in regard to protection of the individual's rights.

Please be reminded that both the University and the Department of Health, Education and Welfare regulations require that written consents must be obtained from all human subjects in your studies. These forms must be kept on file by you.

Furthermore, should your project change, another review by the Committee is required, according to DHEW regulations.

Sincerely,

Estelle Kurtz

Chairman, Human Research
Review Committee

at Dallas.

TEXAS WOMAN'S UNIVERSITY
COLLEGE OF NURSING
DENTON, TEXAS 76204

DALLAS CENTER
1810 INWOOD ROAD
DALLAS, TEXAS 75235

HOUSTON CENTER
1130 M. D. ANDERSON BLVD.
HOUSTON, TEXAS 77025

AGENCY PERMISSION FOR CONDUCTING STUDY*

THE _____

GRANTS TO Ms. Brenda J. Arnold
a student enrolled in a program of nursing leading to a Master's Degree at Texas Woman's University, the privilege of its facilities in order to study the following problem:

Assertiveness and Self-Esteem of Black and White
Professional Women

The conditions mutually agreed upon are as follows:

1. The agency (may) (may not) be identified in the final report.
2. The names of consultative or administrative personnel in the agency (may) (may not) be identified in the final report.
3. The agency (wants) (does not want) a conference with the student when the report is completed.
4. The agency is (willing) (unwilling) to allow the completed report to be circulated through interlibrary loan.
5. Other _____

Date: 5-21-78

Brenda J. Arnold
Signature of Student

Helen A. Bush Ph.D., R.N.
Signature of Agency Personnel
Signature of Faculty Advisor

* Fill out and sign three copies to be distributed as follows: Original-Student;
First copy - agency; Second copy - TWU College of Nursing.

TEXAS WOMAN'S UNIVERSITY

(Form A - Written presentation to subjects)

Consent to Act as a Subject for Research and Investigation:

(The following information is to be read to or read by the subjects)

1. I hereby authorize B. J. Arnold
(Name of person(s) who will perform procedure(s)
or investigation(s))

to perform the following procedure(s) or investigation(s):
(Describe in Detail)

- (1) Scoring of three questionnaires which I will answer
 - (2) Correlation of my scores on these questionnaires
2. The procedure of investigation listed in Paragraph 1 has been explained to me by B. J. Arnold.
(name)
3. I understand that the procedures of investigations described in Paragraph 1 involve the following possible risks or discomforts: (Describe in detail):
 - (1) Personal inconvenience
 - (2) Possible loss of time
 - (3) Possible conscious awareness of unpleasant past events
4. I understand that the procedures and investigations described in Paragraph 1 have the following potential benefits to myself and/or others:
 - (1) To increase understanding among black and white professionals
 - (2) Add to the body of knowledge
5. An offer to answer all of my questions regarding the study has been made. If alternative procedures are more advantageous to me, they have been explained. I understand that I may terminate my participation in the study at any time.

Subject's Signature

Date

(If the subject is a minor, or otherwise unable to sign, complete the following)

Subject is a minor (age _____), or is unable to sign because:

Signatures (one required):

Father

Date

Mother

Date

Guardian

Date

APPENDIX D

PRESENTATION TO SUBJECTS

Hello,

I am B. J. Arnold, a registered nurse and graduate student at Texas Woman's University. I am conducting a research study of professional women and some behavioral characteristics they may have.

I would like to have you participate in the study by completing the following questionnaires.

1. Arnold Questionnaire
2. Guttman Scale
3. Rathus Schedule

These questionnaires will take approximately twenty-five minutes of your time.

If you agree to participate in this study, you will be assigned a number. This number will be on each tool you receive. Names will not be used and you will not be identified in any manner. Your number will be assigned upon receipt of the Informed Consent Form which is enclosed with this letter.

Your cooperation is greatly appreciated. The results of the research study will be available after September 1979.

Thank you,

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