

#### **Walden University ScholarWorks**

Walden Dissertations and Doctoral Studies

Walden Dissertations and Doctoral Studies Collection

2017

# Barriers to Membership in a Professional Organization for Advanced Practice Nurses

Kesha Renee Walton Walden University

Follow this and additional works at: https://scholarworks.waldenu.edu/dissertations



Part of the Nursing Commons

This Dissertation is brought to you for free and open access by the Walden Dissertations and Doctoral Studies Collection at ScholarWorks. It has been accepted for inclusion in Walden Dissertations and Doctoral Studies by an authorized administrator of ScholarWorks. For more information, please contact ScholarWorks@waldenu.edu.

## Walden University

College of Health Sciences

This is to certify that the doctoral study by

Kesha Walton

has been found to be complete and satisfactory in all respects, and that any and all revisions required by the review committee have been made.

#### **Review Committee**

Dr. Janice Long, Committee Chairperson, Nursing Faculty
Dr. Geri Schmotzer, Committee Member, Nursing Faculty
Dr. Debra Wilson, University Reviewer, Nursing Faculty

Chief Academic Officer
Eric Riedel, Ph.D.

Walden University

2017

#### Abstract

## Barriers to Membership in a Professional Organization for Advanced Practice Nurses

by

Kesha Walton, MSN, RN, FNP-BC

MS, Rutgers University, 2013

BS, Rutgers University, 2008

Project Submitted in Partial Fulfillment
of the Requirements for the Degree of
Doctor of Nursing Practice

Walden University

August 2017

#### Abstract

Professional organizations offer nurses services and resources for professional growth throughout their careers; yet, membership has declined over the past 10 years. Accordingly, this study was to understand the barriers in membership and identify positive changes that will increase membership and retain members. A quantitative descriptive design was employed within a convenience sample of 150 advanced practice registered nurses (APRNs) who were past or nonmembers of a professional organization. Exchange theory was applied and the Professional Association Membership Questionnaire (PAMQ) was administered to assess the barriers to APRNs participating in a specific professional organization. Statistical analysis included mean scores for each of the PAMQ's 34 questions with groupings by benefits and barriers using a 7-point Likerttype scale. Study results indicated 71% (n = 106) of 150 participants ranked continuing education as the most important benefit when considering joining a professional organization. Although prior literature frequently reported cost as a barrier to membership in professional organizations, fewer than 50% (n = 56) of participants in this study ranked cost as a barrier to membership. Professional organizations can bring about positive social change by providing accessible continuing education to membership. To do so will improve the quality of nursing services through evidence-based practice, education, and leadership. Membership in a professional organization allows the nurse to maintain current awareness of health care changes and policies. Significant membership is necessary in order for the organization to have a major impact in the profession.

#### Barriers to Membership in a Professional Organization for Advanced Practice Nurses

by

Kesha Walton, MSN, RN, FNP-BC

MS, Rutgers University, 2013

BS, Rutgers University, 2008

Project Submitted in Partial Fulfillment
of the Requirements for the Degree of
Doctor of Nursing Practice

Walden University

August 2017

#### Dedication

I dedicate my doctoral project work to my family, church family, and many friends who have supported me throughout the process, especially to Dr. Donald W. Hinton, who pushed me to go for my doctoral degree. He was such an inspiration to me, and I appreciated the push. Without his support and constant encouragement, I would not have returned to school. Every time he saw me, he would check and see how I was doing with my studies, and he would tell me, "Hold on, you'll be done after a while." Thank you for all you have done for my family and me.

#### Acknowledgments

I am grateful to all of those with whom I have had the pleasure to work during this project. Each of the members of my dissertation committee provided me with extensive personal and professional guidance. I especially thank Dr. Janice Long, chair of my committee. As my teacher and mentor, she has taught me more than I could ever give her credit for here. Her guidance and dedication in helping me complete my project will never be forgotten.

Nobody has been more important to me in the pursuit of this project than the members of my family. I thank my mom, whose love and support is with me in whatever I pursue. Most importantly, I wish to thank my loving and supportive husband, Darryl, and my four wonderful children, Ziikeeya, Ariel, Demetrius, and Darius, who provide such inspiration. Their continued love, support, and encouragement were pivotal to the successful completion of this journey.

#### Table of Contents

List of Figures		iv
Section 1: Overview of	of the Evidence-Based Project	1
Introduction		1
Problem Statemer	nt	2
Purpose Statemen	t and Project Question	3
Nature of the Doc	toral Project	4
Significance		4
Evidence-Base	ed Significance of the Project	5
Implications for	or Social Change in Practice	6
Assumptions and	Limitations	7
Summary		7
Section 2: Backgroun	d and Context	9
Introduction		9
Concepts, Models	, and Theories	10
Definitions of Ter	rms	11
Relevance to Nurs	sing Practice	11
Local Background	d and Context	12
Time Constrai	ints	16
High Cost of I	Membership	16
Working Too	Much	16
Lack of Under	rstanding the Nature of the Professional Organization	17

	Strategies for Retaining Members	17	
	Role of the DNP Student	18	
	Summary	19	
Se	Section 3: Collection and Analysis of Evidence		
	Introduction	21	
	Practice-Focused Question.	21	
	Sources of Evidence	22	
	Instrument	22	
	Population and Sampling	23	
	Data Collection	23	
	Analysis and Synthesis	24	
	Summary	25	
Se	Section 4: Findings and Recommendations		
	Introduction	26	
	Findings and Implications	26	
	Demographics	27	
	Effect of Benefits on Decisions to Join APRN Professional Organization	29	
	Recommendations	33	
	Strengths and Limitations of the Project	34	
	Summary	34	
Section 5: Dissemination Plan			
	Plan for Dissemination	36	

Analysis of Self	38
Summary	39
References	41
Appendix A: Permission	47
Appendix B: Questionnaire	48

### List of Figures

Figure 1. APRN specialty.	28
Figure 2. Years of APRN experience.	29
Figure 3. Weighted average of ranked responses.	30
Figure 4. Data percentage of each survey item	31

#### Section 1: Overview of the Evidence-Based Project

#### Introduction

Leaders of many professional nursing organizations have expressed concern about a decrease in organizational membership (Esmaeili, Dehghan-Nayeri, & Negarandeh, 2013). As of mid-2017, membership in professional organizations such as the American Nurses Association (ANA), New Jersey State Nurses Association (NJSNA), Forum of Nurses in Advanced Practice, and Advanced Practice Nurses of New Jersey is at an all-time low. There has been a noticeable decrease in the number of professionals sufficiently willing, capable, and dedicated to join and remain in professional organizations over the years.

Professional organizations serve a major role in advocating for their members.

They help to shape the quality of health care and encourage leadership, as well as advocate for nurses in their roles as professionals. For APRNs,

these organizations can help advance professional development and encourage leadership, while putting APRNs in a position to influence policy decisions that work to improve quality in healthcare practice. This is done through a wide variety of supporting activities including healthcare topics, advocacy at the national and state level, and the resources needed for nurse practitioners professional growth. (American Association of Nurse Practitioners [AANP], 2015a).

Professional organizations offer nurses services and resources for professional growth throughout their careers (Esmaeili et al., 2013; Sullivan & Stevenson, 2009), yet

membership has declined over the past 10 years. To understand the decline in membership, Esmaeili et al. (2013) explored barriers that prevented professionals from taking part in their professional organizations. The barriers that Esmaeli et al. explored included inconvenient location, time constraints, high membership cost, family responsibilities, work too much, and lack of understanding of the nature of the professional organization. The focus of this paper was to identify the barriers to membership in an advanced practice professional organization and find solutions to overcome those barriers. Section 1 includes the problem statement, the purpose, and the nature of the doctoral project, as well as its significance and a summary.

#### **Problem Statement**

Professional organizations lack the support and membership of APRNs, a group that includes nurse practitioners, nurse midwives, nurse anesthetists, and clinical nurse specialists (Kung & Rudner Lugo, 2015). In the United States, the American Association of Colleges of Nursing (2016) reported there are 3.6 million registered nurses, of which 163,000 (approximately 18%) are members of ANA. There are approximately 6,400 APRNs in the state of New Jersey, of which approximately 1,000 are members of the NJSNA. In 2015, approximately 190 APRNs were members of the Forum of Nurses in Advanced Practice (NJSNA, 2016). Leaders of the Forum of Nurses in Advanced Practice have expressed the desire to understand why so few of the practicing APRNs in New Jersey choose to become members of professional organizations. For leaders of a professional organization to make positive changes that will increase membership and retain members, they must first identify and understand the barriers to membership. I

used the Professional Association Membership Questionnaire (PAMQ) to assess the barriers to why some APRNs do not participate in professional organizations.

#### **Purpose Statement and Project Question**

The purpose of this project was to identify barriers that prevent APRN participation in professional organizations and to determine potential solutions available for overcoming the recognized barriers.

There is a gap in the knowledge base to explain why APRNs do not join professional organizations and maintain their membership. Membership in these organizations can potentially affect APRNs' professional growth. Being a part of a professional organization affords many benefits for members. Members of these organizations are offered the ability to enhance their personal and professional growth, meet professional benchmarks, and gain access to continuing education courses. The purpose of this DNP project was to identify the reasons that prevented APRNs from joining professional organizations and to identify strategies that might promote membership.

The project questions were:

PQ1: What are the barriers to professional organizational membership among advanced practice nurses?

PQ2: What positive changes can be made that will increase membership and retain members?

This project was an example of program or organization analysis. Administering the PAMQ instrument was intended to identify the barriers to why APRNs were not choosing

to become and continue to be a part of professional organizations. Assessing the results of the questionnaire and conducting a literature review might offer valid strategies for improving membership in a professional organization for APRNs.

#### **Nature of the Doctoral Project**

The purpose of this project was to identify barriers and potential solutions to overcome those barriers. Evidence was collected through a review of literature and administration of the PAMQ. For leaders of an organization to make positive changes that could increase membership and retain members, they must first identify and understand the barriers to membership.

An online questionnaire, the PAMQ, was administered to collect information from APRNs licensed to practice in the state of New Jersey. The purpose of administering the PAMQ was to collect data to understand the barriers to APRNs participating in professional organizations. The results of the survey and a review of literature offered valid strategies for improving membership in APRN professional organizations.

#### **Significance**

The findings from this project are significant because they might bring social change to advanced nursing practice. Professional organizations can bring about social change by improving the quality of nursing services through evidence-based practice and leadership. Nurses must be supported to step into leadership roles and improve access to care. APRNs need to look at themselves as potential agents of change. Being a part of a professional organization will help nurses develop those leadership qualities, which will

not only benefit them but also the nursing profession as a whole. Professional organizations provide their members a venue in which to develop and share their voice regarding the issues encountered in practice.

#### **Evidence-Based Significance of the Project**

As an officer of a professional advanced practice organization, I have found that participation in meetings is minimal as a result of low membership numbers. Researchers have reported many different reasons for low membership in professional organizations, but cost, inconvenience, and a lack of belief that the organizations offer members substantial benefits are commonly mentioned. Ohlson (2010), president of the ANA, stated that 80% of registered nurses in the United States did not belong to any professional organizations. Among registered nurses who were not members of any professional organization, 50% identified cost and inconvenient location or time of meetings as deterrents to maintaining membership (DeLeskey, 2003). Results of DeLeskey's (2003) study indicated that former members did not renew membership because they perceived the benefits of membership in the organization did not surpass the cost of membership. While these data are useful, the studies were conducted too long ago to be of real value to understanding the reasons why APRNs were not joining or maintaining membership in professional organizations in 2017. This project provides further understanding of why APRNs do not seek and maintain membership in professional nurses' organizations.

According to Ohlson (2010), membership in professional organizations and the experiences as members contributes greatly to professionalism. Professional

organizations are sources of information and standards based on evidence that keep nurses informed and educated. In the absence of membership to a professional organization, Ohlson found that a group of nurses in a large urban hospital did not read or subscribe to a nursing journal that is usually published by a professional organization. Bailey (1987) found that deans, faculty, supervisors, and peers had an influence on whether new graduates of nursing programs joined or did not join the ANA. Haley-Andrews and Winch (2001) reported that nurses who continued their education and belonged to a professional organization were more likely to have autonomy and participate in problem solving. Although these resources are out of date, the data they provide supported the purpose of the project and reinforced the need for conducting new, up-to-date research.

#### **Implications for Social Change in Practice**

Professional organizations can bring about social change by improving the quality of nursing services. They provide opportunities for increased knowledge and skills, continuing education, and increased professionalism (Esmaeili et al., 2013). Professional organizations help nurses become empowered and exercise their professional rights. Kung and Rudner Lugo (2015) found that participation in professional organizations and knowledge of legislation and policy processes were significant predictors of political involvement. Nursing professionals can influence health care policy changes through the impact of their collective power in a professional organization, as well as track issues at the state and federal level. Dollinger (2000) stated that professional organizations give health care providers a forum to discuss and develop standards, share experiences, and

develop a platform to strengthen the profession. Nurses in professional organizations have worked together to achieve whistleblower protection, patients' rights protection in managed care plans, changes in past and current regulations, and autonomy in practice (Dollinger, 2000).

#### **Assumptions and Limitations**

Not having a sample of adequate size limited the study results. Assuming that APRNs would be interested in supporting this study, a 100% participation response was expected. Another limitation was lack of trust by the participants. It is important to make the participants comfortable enough to share their personal experiences and reasons for nonparticipation, and it is also important the researcher does not generalize the findings (Grove, Burns, & Gray, 2013). Another limitation was the survey instrument. Because data analysis was based on limited variables collected from a small sample, the findings are not representative of the total population. In addition, some questions had limited answers, which can skew responses. Another limitation was electronic administration of the survey, rather than in person; it was not possible to prevent someone from completing the survey more than one time.

#### **Summary**

Professional organizations offer nurses services and resources for professional growth throughout their careers. Professional associations are an important part of a profession. The purpose of this project was to identify barriers that prevent advanced practice nurses' participation in professional organizations and determine potential

solutions available for overcoming the recognized barriers. The findings of this project will have an impact of advanced nursing practice in general.

#### Section 2: Background and Context

#### Introduction

The purpose of this project was to identify barriers that prevent advanced practice nurses' participation in professional organizations and determine potential solutions available for overcoming the recognized barriers. Section 2 includes a discussion of the concepts, models, and theories guiding this project, the relevance to nursing practice, local background and context, role of the DNP student, and a summary.

In 1911, the ANA was launched from the first convention in 1886 of the Nurses Associated Alumnae of the United States and Canada (ANA, 2009). The ANA (2009) is the only full-service professional organization that represents the interests of the 3.6 million registered nurses in the United States. Today, the New Jersey Nurses Association, developed from the ANA, is the voice for more than 110,000 registered nurses and advanced practice nurses in the state. The Forum of Nurses in Advanced Practice was established in 1999 as an organization for New Jersey APRNs. The Forum of Nurses in Advanced Practice operates within the formal structure of the NJSNA (2016).

There are many valuable advantages to professional membership, from educational resources to in-person events, collegial support, and advocacy (Schroeder, 2013). Among the goals of professional organizations are support for nurses and encouragement for them to grow and lead in their everyday and professional activities. Despite the benefits of membership in professional organizations, membership is at an all-time low. The purpose of this project was to identify the barriers to APRNs joining and maintaining membership in APRN professional organization by administering the

PAMQ. Section 2 includes discussions of the concepts, models, and theories associated with this study, as well as definitions of terms, relevance to nursing practice, local background and context, and the role of DNP student.

#### **Concepts, Models, and Theories**

The most frequently referenced theory pertaining to professional association membership is Olson's (1971) exchange theory (Yeager, 1981; Yeager & Kline, 1983). The theory is popular because it is logical and coherent, but it is limited because it can explain only some of the behavior associated with joining, not all of the behavior (Parsons, 2015). The theory is best applied to groups or organizations that offer material incentives for joining, although other incentives (e.g., social and psychological objectives) might also motivate joining behavior. Exchange theory is focused on exchanges between groups or social systems as a whole, and suggests that by participating in a social system based on loyalty and sharing, individuals might contribute to and derive benefits from their overall participation in the system (Yeager, 1981).

According to exchange theory, if the benefits of professional membership do not outweigh the cost, nurses are not likely to join or renew their membership. As explained in the theory, if the cost-benefit ratio is high, an individual is more likely to fail to join or fail to renew a membership (DeLeskey, 2003; Olson, 1971; Parsons, 2015). Even though there may be many membership benefits, some nurses will still choose not to participate. As Olson (1971) explained, the selective incentives must outweigh the contribution expense for membership to be cost-effective and rational. Benefits that are granted only to members have a stronger influence on the decision to join. Phillips and Leahy (2012)

stated that an individual's behavior is motivated by the need or desire to obtain valued benefits. Exchange theory helps explain the phenomenon of whether individuals join and remain in an organization (Olson, 1971).

#### **Definitions of Terms**

Terms used in this study are defined as follows:

Association: "A group of people organized for a joint purpose with common interests who come together on a platform" ("Difference Between Association and Organization," 2011).

*Barrier*: "Something that separates or impedes access, progress, and passage or hinders union" ("Barrier," 2016).

*Membership:* "The condition of belonging to, participating in, engaging in fellowship, or being a part of a group or an organization" ("Membership," 2016).

*Organization:* "A group of people who work together with well-defined roles and functions" ("Difference Between Association and Organization," 2011).

*Professional:* "A person engaged in a manner defined and expected by that learned profession" (Ritchie & Gilmore, 2013).

*Professional organization:* "An organization of and for professional people who seek to develop and implement sound public policy" (Mori, Mullen, & Hill, 2007).

#### **Relevance to Nursing Practice**

In 1886, nursing leaders saw the need for a strong association that would unite and strengthen the role of nurses in their profession (Bailey, 1987). This need resulted in establishment of the ANA. According to the AANP (2015a), meeting with other members

provides opportunities to promote career advancement and to gain knowledge that can help other nurses. Events held by professional organizations help APRNs establish collegial connections built on mutual trust and respect across professional boundaries. The purpose of professional associations is to focus on improvement of health standards and promote professional development (AANP, 2015a). To make changes, nurses must come together as one voice and strengthen their ties to professional organizations. Professional organizations communicate the profession's values and standards to the public and provide credibility and peer reinforcement (Dollinger, 2000). Because of the role and purpose of professional organizations in the career and personal advancement of professionals, all professionals should be encouraged to join their respective professional organization.

#### **Local Background and Context**

I conducted a review of literature as a foundation for preparing a summary of available literature on factors that might explain why nurses do not join or remain as members in professional organizations. Searches were conducted using the MEDLINE and CINAHL databases for literature published from 1971 to 2016. The older literature reinforced the needed for recent research. The data they provide supported the purpose of the project. Key words used were *professional*, *organizations*, *associations*, *nursing*, *membership*, and *questionnaire*, as well as combinations of these terms.

Yeager and Kline (1983) found that nurses who were members of a professional organization valued the programs offered for professional growth as well as the benefits

of social and member engagement. However, cost and distance to meetings were reported as factors that kept nurses from joining an organization.

Bailey (1987) showed that out of 162 baccalaureate nurse participants, 130 reported that they were not members of ANA. The graduates perceived the ANA as a professional representative for nurses, but failed to join. The three factors most frequently cited were membership fees being too high, lack of information about ANA, and the graduates not relating to themselves as professional nurses.

DeLeskey (2003) showed that nurses considered joining professional associations for the benefits of self-improvement, education, new ideas, programs, professionalism, and maintaining professional standards. Despite awareness of these perceived benefits, cost and lack of time were major obstacles for nonmembers to join professional associations (DeLeskey, 2003). Alotaibi (2007) explored the factors that influence nurses in Kuwait to join or not join the Kuwait Nurses Association. Alotaibi found that reasons differed between current and former members. Current members were encouraged to join mainly to support their managers, but this reason for joining was also reported as an obstacle to maintaining membership by former members, who noted philosophical differences, minimum benefits, being too busy, and inconvenient location and timing of meetings.

Ross (2009) surveyed 497 participants and reported current members' three most frequently cited benefits for joining the Michigan Occupational Therapy Association were continuing education, political lobbying, and improvement of the profession of occupational therapy. In contrast, nonmembers ranked continuing education, professional

self-improvement, and new ideas for practice as most important reasons for joining, although they did not join (Rapp & Collins, 1999; Ross, 2009). Ross also identified and compared themes that affected the decisions to join or not to join the Michigan Occupational Therapy Association, which were money, time, membership statuses, level and quality of interpersonal and group communication, and the significance of benefits and contributing to a cause. Ross concluded physical therapists who did not join the Michigan Occupational Therapy Association were prioritizing and spending their money, time, and energy on things other than membership in their state association.

Phillips and Leahy (2012) focused on the prediction of membership status between current, former, and nonmembers and tested two different hypotheses. Hypothesis 1 was that participants who reported greater rehabilitation counseling professional identity salience would be more likely to hold current membership; this hypothesis was partially accepted. Hypothesis 2 was that participants who reported greater value in rehabilitation counseling professional association membership would be more likely to hold current membership; this hypothesis was fully supported. The data suggested that professionals did not join their association because they believed membership lacked value and would only consider joining when value to self reached an adequate level (Phillips & Leahy, 2012).

Esmaeili et al. (2013) conducted a study with a sample of 14 nurses to determine why nurses join professional organizations. Three themes emerged from analysis of collected data: defending nurses' rights, professional obligations, and organizational power. Each of these themes contained several subthemes: reducing workload and

development of facilities, raising awareness of nurses' undeniable rights, mutual support, membership motivation, absence of difference between members and nonmembers, power resulting from organization of activities, and eliminating inequalities.

Moon (2013) studied 14 emergency room nurses to understand how the professional association for the specialty of emergency nursing, the Emergency Nurses Association, influenced the socialization of novice emergency nurses. The five main themes that emerged from the data were that the association (a) allows connections with other professionals, (b) advocates for the profession and patients, (c) provides professional development, (d) fosters a sense of identity, and (e) encourages community involvement (Moon, 2013). Four of the five themes had related subthemes. Moon found that the Emergency Nurses Association served a role in the socialization of emerging emergency nurses. Novice emergency nurses were able to make connections with experienced emergency nurses. Study participants reported that being members of the Emergency Nursing Association helped them to understand how current evidence translated to practice in emergency nursing and helped improve their confidence as novice nurses (Moon, 2013).

Results of many of the studies mirrored each other. For example, most of the researchers reported the primary reasons given for nurses not joining professional organizations were time constraints, high membership cost, working too much, and lack of understanding the nature of the professional organization (Esmaeili et al., 2013; Gruenberg, 2015; Rapp & Collins, 1999). These reasons are discussed in the subsections that follow.

#### **Time Constraints**

Lack of time for involvement in a professional organization was one of the major reasons cited for not belonging to the New Hampshire Nursing Association (Alotaibi, 2007; DeLeskey, 2003; Rapp & Collins, 1999). In a study conducted on behalf of the Association for Rubber Products Manufacturers, findings revealed that time and money were factors for individuals in the profession not joining the association (Gruenberg, 2015).

#### **High Cost of Membership**

High cost was a common reason cited for why nurses did not join an organization (Bailey, 1987; DeLeskey, 2003; Rapp & Collins, 1999; Yeager & Kline, 1983). Esmaeli et al. (2013) reported that a veteran (12 years of experience) nurse indicated she was not a member due to the high membership fees. The nurse said, "The organization wants way too much for membership fees for things that they haven't done and won't do" (Esmaeili et al., 2013, p. 268).

#### **Working Too Much**

In a study by Esmaeili et al. (2013), one nurse explained she was not a member because she believed the organization should be able to support nurses' rights. The nurse reported the personal belief that the organization needed to give nurses a sense of occupational and financial security. This same nurse stated that there are challenges at work and long overnight work shifts, and nurses' salaries are too low. Another nurse in the study declined to become a member because of her excessive workload (Esmaeili et al., 2013).

#### Lack of Understanding the Nature of the Professional Organization

Bailey (1987) and Haley-Andrews and Winch (2001) reported that many nurses were not oriented to ANA or to specialty organizations, which were reasons noted for why membership is low in the organizations. According to Ohlson (2010), 80% of nurses reported they did not belong to a professional organization because of lack of understanding of the benefits the organization offered and because involvement with the organization was an inconvenience. Rapp and Collins (1999) found that nurses reported lack of knowledge about the organization as a reason for not joining.

#### **Strategies for Retaining Members**

Membership retention and recruitment can be accomplished through various strategies. One way is through special incentives. The strategy of the Association for Rubber Products Manufacturers for increasing membership was to offer its members discounts on operational supplies that they reported worked because new members were continuously joining the association (Gruenberg, 2015). Another method was to engage potential members through the social community. Gruenberg (2015) mentioned that members' closeness through daily networking via the website of the association was an additional benefit for continued membership.

Annual meetings are an important venue for promoting continued membership in professional organizations. As Gruenberg (2015) explained,

[In] order to attract more members to the annual meeting, associations must organize programs, sessions, and speakers that are not only relevant to the current

business of the association, but also provide a view to coming trends and skills training. (Gruenberg, 2015, p. 53)

Presenting relevant programs for the membership, both at the annual meeting and local events, was a key element credited to helping bring in more money and retain and grow membership.

Although the literature discussed above suggests that time constraints, high membership cost, working too much, and lack of understanding the nature of the professional organization were the primary reasons why nurses did not support professional organizations, these data are old. There is a need to update the literature so that current beliefs about membership in professional organizations can be known, considered, and address. This project identified the barriers to APRNs not becoming or remaining members of professional organizations. To conduct this project, the PAMQ instrument was administered.

#### Role of the DNP Student

My clinical experience and educational qualifications have prepared me for this DNP project. As an officer of a professional organization, I have access to past members' contact information. Permission was obtained to use this information for project purposes only (see Appendix A). During one of the business meetings of the organization, another officer reported that our membership was relatively low and had dropped from the previous year. None of the other members of the board could give an account as to why the membership was low. This situation sparked an interest and desire for me to attempt to identify the reasons why APRNs are not members or why they are no longer members.

As doctoral-prepared nurses, DNPs create new knowledge and then disseminate that new knowledge into our practice and, through others' feedback, generate more knowledge.

For this project, I identified evidence about why APRNs would consider not joining or not continue membership in a professional organization and applied that information to organize a plan to improve membership. DNP-prepared nurses can advocate for patient health promotion and influence health policy in a number of ways, such as membership in a professional organization (Sawyer-McGee, 2016). Active participation in a professional organization provides a DNP-prepared nurse with insights into the issues involving healthcare.

My role in the project was the lead researcher. I collected and analyzed the data. A convenience sample was assembled, although this approach is considered a weak one because of biases. During the process of interpretation, demographic information such as age, specialty, length of experience, and level of education were analyzed to eliminate any possible uncontrolled biases. Every effort was made to minimize any potential bias and mitigate personal biases that could lead to unclear and inaccurate results.

#### **Summary**

Section 2 included a review of the literature surrounding the local background and context of professional organizational membership, concepts, models and theories, definition of terms, relevance to nursing practice, local background and context, and role of the DNP student. There is value to professional membership, from educational resources to in-person events, collegial support, and advocacy (Schroeder, 2013). If the cost-benefit ratio is perceived as too high, an individual is more likely to fail to join or

renew his or her membership (Olson, 1971). In Section 3, the practice-focused question is restated and the source of evidence and analysis and synthesis are discussed.

#### Section 3: Collection and Analysis of Evidence

#### Introduction

This project was developed through a review of literature to identify the barriers to APRNs joining and maintaining membership in professional organizations and the potential solution to overcome such barriers. The project involved administration of the PAMQ to assess these barriers. Section 3 includes the practice-focused questions, sources of evidence, analysis and synthesis, and a summary of the section.

#### **Practice-Focused Questions**

The purpose of this project was to identify barriers that prevent APRN participation in professional organizations and to determine potential solutions available for overcoming the recognized barriers. The project questions developed for the project were as follows:

- PQ1. What are the barriers to professional organizational membership among advanced practice nurses in an organization?
- PQ2. What positive changes can be made to increase membership and retain members?

There is a gap between APRNs and professional organization membership. This gap might have an effect on the APRNs' professional growth. Being a part of a professional organization offers many benefits to members. Members have the opportunity to enhance their personal and professional growth, meet other professionals, as well as have access to continuing education courses. The expected outcome of the study was to identify the reasons for the gap between APRNs and professional

organization membership and possibly provide strategies to mitigate the barriers and close the gap.

#### **Sources of Evidence**

The purpose of this quantitative descriptive study was to identify the barriers to APRN membership in professional organizations. A Likert-type scale instrument was administered for this project. A Likert-type scale is a measurement that is used to gauge a person's attitude, values, and opinions; these types of measurements are often used on questionnaires containing closed-ended questions. Quantitative data are numerical in nature; they contribute to precise measurement methods, structured treatments, and tightly controlled designs applied to representative samples (Grove et al., 2013). The questionnaire was administered electronically through a link provided to participants via social media and the website of the organization. Consent to participate was incorporated in the questionnaire; participants' completion of the questionnaire was evidence of their consent.

#### Instrument

The PAMQ was chosen as the instrument to assess APRNs' barriers to joining and maintaining membership in a professional organization (see Appendix B). This instrument has been used approximately 50 times since 1981; it was the only instrument found that could assess the barriers. Dr. Yeager was contacted and permission was granted to use and adapt his questionnaire to fit the design of my study (see Appendix C). The PAMQ is a reliable instrument with a Cronbach's alpha of 0.95, which was used to determine which association benefits were important to nurses when making the decision

to join their professional organization (Yeager, 1981). Ross (2009) piloted a preliminary version of the survey instrument with a sample of six occupational therapists registered to practice in Michigan. Results of the pilot study helped refine the survey instrument that was used in that study. Another pilot study was conducted to check for validity and reliability of the survey instrument. After correcting for a concern raised during the pilot study regarding the questions lacking an option to choose *other*, the survey instrument was found to be a valid method to measure contributing factors of low membership (Henderson, 2013).

#### **Population and Sampling**

The target population for this project was APRNs who were nonmembers or past members of a professional organization. A convenience sample of APRNs who were nonmembers was obtained from the organization website and social media page. The PAMQ was administered online. Each statement was linked to a Likert-type scale response option regarding the importance attributed to the item by the participant. The instrument consisted of 33 items, answers to which were provided using a 7-point Likert-type scale, and one question requiring personal responses to identify the barriers that affected the participant's decision to not join a professional organization. The survey also captured limited demographic data: age, specialty, length of experience, and level of education.

#### **Data Collection**

To help understand the barriers to membership, real data were collected from APRNs. Collecting real data is considered a best-practice method and yields real-time

results (Siegel, 2013). Data were collected via administration of an online questionnaire. Online questionnaires offer the researcher an inexpensive, quick, and convenient way to collect data (Hunter, 2012). Online questionnaires are simple and can be administered via links in e-mail or social media networks to the targeted population. According to Hunter (2012), to obtain the best results from e-questionnaires, the population should be targeted carefully and emphasis placed on the value of their participation.

Yeager and Kline (1983) developed the PAMQ to study why nurses join or do not join their professional organization. This questionnaire was used to collect the necessary data for this project. Permission was obtained to use this tool for my project. The questionnaire was uploaded to SurveyMonkey.com and invitations were sent to nonmembers of the organization via e-mail. A general announcement was also posted on the website of the organization to recruit participants. Collecting these data was necessary to help identify the barriers.

#### **Analysis and Synthesis**

Data analysis is an ongoing process that begins after data collection and continues throughout the study. My project was a quantitative descriptive research project.

Quantitative data are numerical in nature and qualitative data is information that is narrative form (nonnumerical). In quantitative research, the researcher gathers information describing a phenomenon across large group of participants and interprets those data by using statistical techniques. For this study, statistical analysis was facilitated through the use of SPSS for Mac, Version 24.0, statistical software. Analysis

included mean scores for each of the 34 questions and groupings by items that would encourage membership.

#### **Summary**

Yeager (1981) stated that low membership is not just a problem of adding new members, but also of keeping current members. Being a part of a professional organization has many benefits. Membership allows the nurse to be up to date with health care changes and policies, as well as provides access to continuing education courses. Support available through the organization can improve the nurse's competency, leadership skills, and accomplishments as the nurse continues to contribute to the profession (Schroeder, 2013). Being a part of an organization in the 21st century is convenient; access is available via the Internet to the website of the organization, blogging by members, and social media networks. Of arguably the greatest value to nurses, membership enhances nurses' accountability, credibility, and professional development (Schroeder, 2013). Membership provides an opportunity and a venue for nurses to get involved and be heard as one voice. The organization affords nurses the ability to become more astute clinicians as well as develop into autonomous practitioners (Haley-Andrews & Winch, 2001). The future of nursing depends on nurses belonging to a professional organization. Membership in a professional organization is a statement about nurses' professionalism to colleagues, employers, and peers.

## Section 4: Findings and Recommendations

#### Introduction

This chapter explores the relationship of the study results to the research questions. The purpose of this project was to identify the barriers to APRNs not joining or maintaining membership in professional organizations. To gain insight into this problem, APRNs in the state of New Jersey were invited to participate by completing a questionnaire. Quantitative data were collected using an online instrument. A link to an online questionnaire was sent to APRNs via e-mail from the website of a professional organization and publicized through social media to collect quantitative data. The results were entered into SPSS for Mac, Version 24.0, and statistically analyzed. To determine the reasons why APRNs are not members of a professional organization, the largely quantitative questionnaire included a qualitative question related to the three most important reasons for joining a professional organization. Responses to this qualitative question were categorized and themes were established through qualitative methods. This section includes a discussion of the expected results and unexpected results, as well as the limitations of the study and suggestions for further research. In this section I discuss findings and implications, demographics, effect of benefits on decisions to join a professional organization, and strengths and limitations of the project.

### **Findings and Implications**

To identify the factors why APRNs do not join or remain members of professional organizations, a 38-item survey was administered to collect relevant data (see Appendix B). Results were entered into SPSS for Mac, Version 24.0, and statistical

analyses were conducted to reveal quantitative findings. To determine the reasons why APRNs are not members of a professional organization, the survey included a qualitative question related to the three most important reasons for joining a professional organization.

## **Demographics**

The study consisted of 150 participants who completed an online questionnaire. Collection of demographic data facilitated categorization of the data by participants' age. In this study, 39% (n = 58) of the participants were aged 45-54 years, 29% (n = 44) were aged 35-44 years, 16% (n = 24) were aged 55-64 years, 13% (n = 19) were aged 25-34 years, 2% (n = 3) were aged 65+ years, and 1% (n = 2) were aged 18-24 years. Demographic data were also used to categorize participants by nursing specialty. Participants were family nurse practitioners (62%, n = 93), adult nurses (13%, n = 20), other specialty nurses (9%, n = 14), mental health nurses (6%, n = 9), critical care nurses (6%, n = 9), and pediatric nurses (3%, n = 5). This breakdown is depicted in Figure 1. The majority of the participants were master's-prepared nursing care providers (73%, n = 110), and some (27%, n = 40) were doctorate-prepared. Participants' years of experiences ranged from 1 year to 15+ years (see Figure 2).

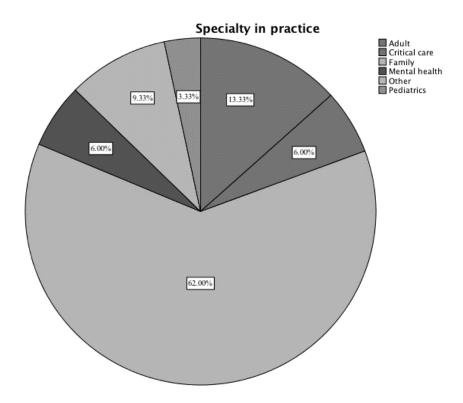


Figure 1. APRN specialty.

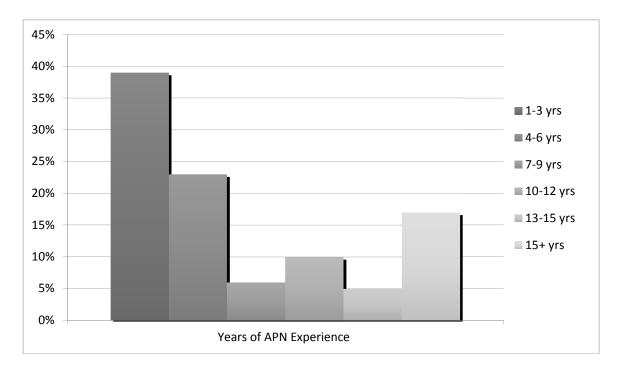


Figure 2. Years of APRN experience. Generated by www.surveymonkey.com

## Effect of Benefits on Decisions to Join APRN Professional Organization

Each participant in the study was asked to rate how much a given benefit would impact a decision to join an APRN professional organization. Participants provided their answer by marking their extent of agreement or disagreement with a statement using a 7-point Likert-type scale (7 = very much, 1 = not at all). As depicted in Figure 3, the weighted average rankings for these seven benefits, from highest to lowest, included continuing education (6.55), improvement of APRN profession (6.17), professional self-development (6.13), new practice ideas (6.11), access to free online resources (6.00), professionalism (5.92), and networking opportunities, professional advancement, discounts at conferences (5.77). As shown in Figure 4, participants gave higher rated

responses for seven of the 33 benefits, with continuing education being the highest (71%, n = 106), followed by improvement of APRN profession (52%, n = 78), professionals self-development (49%, n = 73), access to free online resources (46%, n = 69), new practice ideas (45%, n = 67), discounts at conferences (43%, n = 64), better pay scales for APRNs (42%, n = 63), and cost (37%, n = 56).

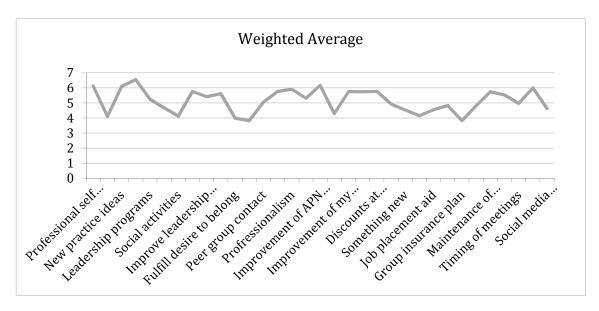


Figure 3. Weighted average of ranked responses. Generated by www.surveymonkey.com

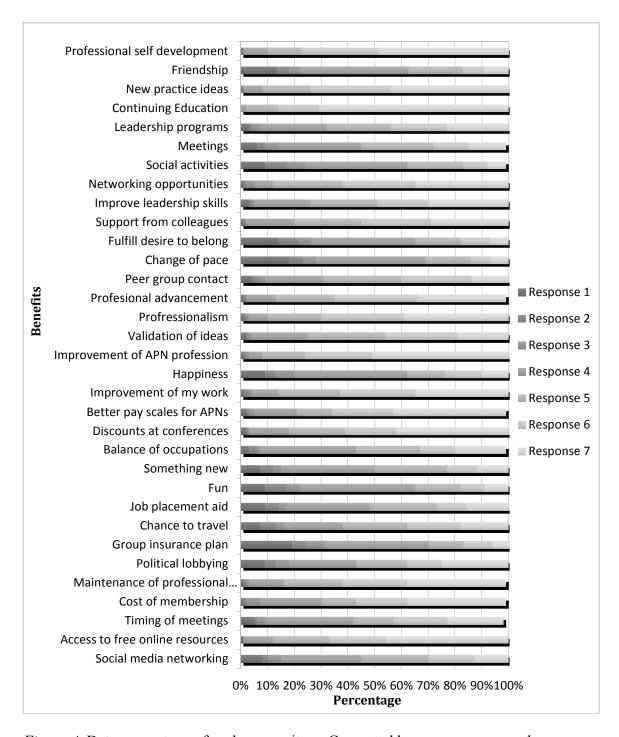


Figure 4. Data percentage of each survey item. Generated by www.surveymonkey.com

Participants were asked to list the three most important benefits they themselves attributed to membership (questions 1, 2, and 3). All 150 participants provided an answer for questions 1 and 2, but only 146 participants provided an answer to Question 3, and one participant answered none of the first three questions. The themes in the responses about the factors that affect decisions to join a professional organization were cost, education, resources, professionalism/professional development, discounts, networking, meetings/conferences, political influence, time, benefits, location, mission/organization, happiness, friendliness, and none. To determine themes among the responses to Question 34, I explored the data using content analysis. I identified and compared themes until a final grouping of themes was determined. The top four most important benefits were education (58%, n = 87), cost (53%, n = 79), professionalism/professional development (48%, n = 72), and networking (48%, n = 72).

In the literature, researchers reported the primary reasons for nurses not joining professional organizations were time constraints, high membership cost, working too much, and lack of understanding the nature of the professional organization (Esmaeili et al., 2013; Gruenberg, 2015; Rapp & Collins, 1999). Data from the present study suggest that education benefit is the primary reason why an APRN would consider joining a professional organization. Although cost ranked lowest among the seven highest ranked reasons (37%) on the Likert-type scale, cost ranked second when participants listed the three most important items they considered for joining a professional organization.

In this study, education was determined to be the primary benefit that would encourage APRNs to join a professional organization. Continuing education is a means to

improve professional competence with the outcome of improved health care and job opportunities. Continuing education involves lifelong learning that better prepares nurses to expand and enhance their professional practice. Regardless of the health care specialty, continuing education should be a quality educational experience to positively influence practice and patient outcomes (Novakovich, 2017).

In this study, participants ranked cost second. This finding is consistent with prior literature. High cost has long been reported to have a negative impact on nurses' decisions to join a professional organization (Bailey, 1987; DeLeskey, 2003; Rapp & Collins, 1999; Yeager & Kline, 1983). In Ross's (2009) study, the participants reported that their money was going to other things, and membership fees along with certification fees were too expensive; participants could not afford the overall cost of membership.

#### Recommendations

Increasing awareness of benefits could not only help to increase membership in professional associations, but also the benefits of engagement in the advanced practice nursing profession as a whole. Henderson (2013) suggested that a strategic plan of action could include an e-mail or mass mailing campaign detailing all the benefits of being a member, reaching out to make one-on-one connections from members to nonmembers and asking them to join or inviting them to a meeting, and also reaching out to students through a mentoring program to encourage them through school and into the profession. A study could be conducted to investigate why members of the association have chosen to be members. A future study could be conducted to determine if there is a connection between low membership and age, years of experience, and degree program. An

additional study could be conducted with a larger sample size and longer data collection period.

## **Strengths and Limitations of the Project**

Because data analysis was based on limited size sample, the findings do not represent the total population. Not all questions on all questionnaires were answered, which can skew results. The questionnaire was administered electronically; as such, it was not possible to prevent someone from completing the questionnaire several times. The trustworthiness of self-reported responses is a limitation. Additionally, there was no way for me to provide clarification or minimize confusion regarding questionnaire statements or questions. Finally, I had a specific time schedule within which to complete the research; as such, time was a limitation. A strength of the project was response time. By completing an online questionnaire the time span was shorter than traditional research methods. Because information was being gathered automatically, there was no wait for paper questionnaires to be returned. Another strength was increased productivity by saving time and money. Additionally, participants directly entered their responses, which minimized the margin of error. Finally, as the responses were coming in, the questionnaire was quickly analyzed and results were seen in real time.

## **Summary**

The goal of this project was to identify barriers to why advanced practice nurses did not join professional organizations. Although specific barriers were not directly mentioned, the data findings suggest the important benefits that would affect a decision to join an organization. APRNs gave higher rated responses on the Likert-type scale for

seven of the 33 benefits, with continuing education being the highest (71%, n = 106), followed by improvement of APRN profession (52%, n = 78), professional selfdevelopment (49%, n = 73), access to free online resources (46%, n = 69), new practice ideas (45%, n = 67), discounts at conferences (43%, n = 64), better pay scales for APRNs (42%, n = 63), and cost (37%, n = 56). The top four most important benefits were education (58%, n = 87), cost (53%, n = 79), professionalism/professional development (48%, n = 72), and networking (48%, n = 72). Based on the findings, advanced practice nurses found that education, cost, professional development, and networking were important when considering joining an organization. Continuing education is a means to improve professional competence with the outcome of improved health care and job opportunities. Continuing education involves lifelong learning that better prepares nurses to expand and enhance their professional practice. This supports the social exchange theory that states both the association and the professional must feel adequately rewarded for their participation (DeLeskey, 2003; Phillips & Leahy, 2012; Rapp & Collins, 1999). On the other hand if the benefits do not outweigh the cost, membership will continue to be affected. Significant membership is necessary in order for the organization to have a major impact in the profession. Although further research is necessary, the results of this study can be used in APRN programs as well as in professional organizations for retention and recruitment purposes.

#### Section 5: Dissemination Plan

#### Plan for Dissemination

My format for dissemination will be poster presentations during conferences. Conference presentations provide a potentially valuable means of encouraging more nurses to contribute to the development of nursing knowledge and are good venues for networking and learning from one another. Clinicians, educators, and researchers alike are constantly discovering and developing innovative ideas that will benefit their patients, the profession, and the health care system (Sawatzky, 2011). Conferences provide an ideal venue for sharing new insights with peers.

Examples of professional conferences where this study can be presented are the ANA and AANP annual conferences. These conferences bring together nurses and nurse practitioners from all over the states with a desire for advancing evidence-based practice and improving the quality of patient care (ANA, 2017). Another conference where this study results can be presented is the Forum of Nurses in Advance Practice annual Education Day. Attendees at these conferences will discover strategies that can be used to improve membership and learn of benefits that aid in professional advancement. Exhibiting at conferences will allow an opportunity to showcase my study results in front of many nurses and APRNs and bring awareness to professional organization membership. The poster will be designed to attract attention and convey information without overwhelming the viewers. Explaining the key components on the execution of the research will highlight information about professional organizations and the benefits

of being members. This will be presented by discussing the focus of the project, the objectives, significance, methods, interpretation of the findings, and direction.

Another way to disseminate my project is through publication. Publication in peer-reviewed journals will help to ensure that work is disseminated widely beyond the conference. Such dissemination is critical if DPN scholars are truly committed to sharing knowledge to help provide evidence for nursing practice and policy making in order to ultimately improve the health of people (Turale, 2015).

One professional journal in which my study results can be published is the Journal of the American Association of Nurse Practitioners (JAANP). The JAANP encourages submission of scholarly articles addressing a wide range of topics appropriate to advanced practice nursing in the United States and internationally (AANP, 2015b). A complete narrative must be prepared for blinded review by removing the title page, acknowledgments, running head, and author names. The editor-in-chief must review and approve the manuscript for relevance and appropriateness for the journal audience once the manuscript has been submitted through ScholarOne Manuscripts program. Once it is approved, the manuscript can be submitted into ScholarOne Manuscripts JAANP online submission. For submission, the body text of the manuscript, excluding abstract, references, tables, figures or graphics, should not exceed 4,000 words with no page numbers, and the abstract should not be more than 200 words. The tables and figures must be separated into individual files and uploaded and labeled appropriately. It is important to know that once the manuscript is submitted, it can only be submitted to one journal at a time and cannot be published, in press, or submitted anywhere else. Journal

publication is necessary, and nursing scholars must continue to work hard to get presentations published in order to spread the knowledge.

## **Analysis of Self**

My experience in the doctoral program showed me that DNP is a degree, not a role. The degree puts a nurse in a position to qualify for higher level roles. I have learned that DNP-prepared nurses serve as advocates, problems solvers, and role models. DNP-prepared nurses are suited for high-level health care system, academic, and policy-making roles. I plan to use my experience and knowledge to advance in my professional and personal career.

I have gained a wealth of knowledge on how a professional organization operates as well as how to advocate for policy change. DNP-prepared nurses can advocate for patient health promotion and influence health policy in a number of ways, such as membership in a professional organization (Sawyer-McGee, 2016). Active participation in a professional organization provides a DNP-prepared nurse with insights on the issues involving health care. One of my personal goals is to continue to be an advocate and to be president of a professional organization someday. When that opportunity comes, I will be prepared to successfully handle the position.

According to Sawyer-McGee (2016), DNP-prepared clinicians are involved in the development of research using evidence-based practices; they are advocates for health policies, leaders, mentors, and expert clinicians. In my current practice setting, there are many changes taking place. These changes will afford me the opportunity to put my expertise to work. As a scholar practitioner and leader, I am prepared to be a part of the

development of policies and procedures, conduct research, and educate patients and the public on current health care issues.

A fundamental purpose of the scholarly project is to create and disseminate knowledge. As doctoral-prepared nurses, we are tasked to create new knowledge and then disseminate that new knowledge to our peers. Poster presentations at professional conferences are an excellent venue for DNP students to share the results of their scholarly projects (Christenbery & Latham, 2013).

#### **Summary**

Disseminating research is necessary to effect change in the field of nursing, although many speakers are anxious about standing under the harsh spotlight of an audience and being evaluated by their peers. The best way to feel more confident and deliver engaging presentations is through smart and thorough preparation and practice. Kaushik (2014) offered seven recommendations for effectively delivering a presentation. First, do not be sloppy; the data presentation is the presenter's brand. Second, be focused. Third, simplify the presentation. Fourth, Kaushik recommended carefully assessing the optimal data and eliminating distracting data. The fifth recommendation was to choose the format of the presentation from among options that include lines, bar charts, pie charts, or tables. The sixth recommendation was to consolidate the data and be as direct as possible. The final recommendation was to eliminate the text and visualize the story. My dissemination format will be poster presentations during conferences. Conferences provide an ideal venue for sharing new insights with peers. Burkholder encouraged

students to publish and to present at any opportunity that becomes available (Walden University, n.d.).

There is great value to professional membership, from educational resources to inperson events, collegial support, and advocacy (Schroeder, 2013). A few of the goals of
professional organizations are to support nurses through various situations and to
empower them to grow and lead in their everyday activities. Membership in a
professional organization allows the nurse to maintain current awareness of health care
changes and policies, as well as provides access to continuing educational courses.

#### References

- Alotaibi, M. (2007). Factors affecting nurses' decisions to join their professional association. *International Nursing Review*, *54*, 160-165. doi:10.1111/j.1466-7657.2007.00555.x
- American Association of Nurse Practitioners. (2015a). *Membership*. Washington, DC. Retrieved from https://www.aanp.org/membership
- American Association of Nurse Practitioners. (2015b). *JAANP* guidelines for authors.

  Washington, DC: Author. Retrieved from https://www.aanp.org/images/documents/journal/jaanpguidelinesforauthorsdec15.pdf
- American Association of Colleges of Nursing. (2016). *Professional membership*. Washington, DC: Author. Retrieved from http://www.aacn.nche.edu
- American Nurses Association. (2009). *Historical review & the ANA*. Silver Spring, MD:

  Author. Retrieved from www.nursingworld.org/funtionmenucategorgies/

  aboutANA/history
- American Nurses Association. (2017). Exhibits and Advertising. Silver Spring, MD:

  Author. Retrieved from

  http://www.nursingworld.org/MainMenuCategories/Conference/ ANA-Annual-Conference/Past-Conference-Archive/2017-ANA-Annual-Conference/Exhibits-and-Advertising-2017-ANA-Conference
- Bailey, P. A. (1987). Factors in academia and service that influence baccalaureate graduates' membership in the American Nurses' Association. *Journal of Nursing Education*, *26*, 25-29. doi:10.3928/0148-4834-19870101-07

- Barrier. (2016). In *American Heritage*® *dictionary of the English language* (5th ed.).

  Boston, MA. Houghton Mifflin Harcourt. Retrieved from http://www.
  thefreedictionary.com/barrier
- Christenbery, T. L., & Latham, T. G. (2013). Creating effective scholarly posters: A guide for DNP students. *Journal of the American Association of Nurse Practitioners*, 25, 16-23. doi:10.1111/j.1745-7599.2012.00790.x
- Difference between association and organization. (2011). Retrieved from http://www.differencebetween.com/difference-between-association-and-vs-organization/
- DeLeskey, K. (2003). Factors affecting nurses' decisions to join and maintain membership in professional associations. *Journal of Perianesthesia Nursing, 18*, 8-17. doi:10.1053/jpan.2003.18030008
- Dollinger, M. L. (2000). Professional associations: Ethics, duty, and power. *Journal of the New York State Nurses Association*, *31*(2), 28-30. Retrieved from http://76.12. 69.209/images/pdfs/communications/journal/fl wntr00.pdf#page=28
- Esmaeili, M., Dehghan-Nayeri, N., & Negarandeh, R. (2013). Factors impacting membership and non-membership in nursing associations: A qualitative study. *Nursing and Health Sciences*, *15*, 265-272. doi:10.1111/nhs.12012
- Grove, S., Burns, N., & Gray, J. (2013). *The practice of nursing research: Appraisal, synthesis, and generation of evidence* (7th ed.). St. Louis, MO: Saunders Elsevier.
- Gruenberg, M. (2015). Finding VALUE in professional associations. *Online Searcher*, *39*(3), 49-53. Retrieved from http://www.infotoday.com/onlinesearcher/

- Haley-Andrews, S., & Winch, A. (2001). Mentoring, membership in professional organizations, and the pursuit of excellence of nursing. *Journal for Specialists in Pediatric Nursing*, 6, 147-151. doi:10.1111/j.1744-6155.2001.tb00137.x
- Henderson, B. (2013). *Barriers to membership in the American Dental Hygienists' Association in the State of Georgia* (Master's thesis). Available from ProQuest Dissertations and Theses database. (UMI No. 1524547)
- Hunter, L. (2012). Challenging the reported disadvantages of e-questionnaires and addressing methodological issues of online data collection. *Nurse Researcher*, 20(1), 11-20. doi:10.7748/nr2012.09.20.1.11.c9303
- Kaushik, A. (2014). 7 data presentation tips: Think, focus, simplify, calibrate, visualize.

  Retrieved from http://www.kaushik.net/avinash/data-presentation-tips-focus-think-simplify-visualize/
- Kung, Y. M., & Rudner Lugo, N. (2015). Political advocacy and practice barriers: A survey of Florida APRNs. *Journal of the American Association of Nurse Practitioners*, 27, 145-151. doi:10.1002/2327-6924.12142
- Membership. (2016). In *American Heritage® dictionary of the English language* (5th ed.). Boston, MA. Houghton Mifflin Harcourt. Retrieved from http://www.thefreedictionary.com/membership
- Moon, M. D. (2013). Influences of the emergency nursing professional association on the socialization of emerging emergency nurses. *Dissertation Abstracts International:*Section B. Sciences and Engineering, 75/09(E). (UMI No. 3629138)

- Mori, C., Mullen, N., & Hill, E. E. (2007). Describing the role of the clinical research nurse. *Research Practitioner*, 8(6). Retrieved from http://www.centerwatch.com/bookstore/pubs\_profs\_rschprac.html
- New Jersey State Nurses Association. (2016). *Professional membership*. Ewing Township, NJ. Retrieved from http://njsna.org
- Novakovich, E. M. (2017). Impact of accreditation standards on the quality of continuing nursing education activities as perceived by the learner. *Journal of Continuing Education in Nursing*, 48, 157-164. doi:10.3928/00220124-20170321-05
- Ohlson, S. (2010). Professionalism: Professional organizations. *Journal of Illinois*Nursing, 107(1), 12-13. Retrieved from http://www.illinoisnurses.org
- Olson, M. (1971). *The logic of collective action: Public goods and the theory of groups*.

  Cambridge, MA: Harvard University Press.
- Parsons, R. (2015). Selective incentive exchange theories as an explanation of joining behavior. *Felix Qui Potuit Rerum Cognoscere Causas*, 11, 73. Retrieved from https://www.researchgate.net/profile/Xi\_Wen\_Chan/publication/283225512\_Cross-sections\_The\_Bruce\_Hall\_Academic\_Journal\_-\_Volume\_XI/links/ 562ebf2108aef25a244450ef.pdf#page=93
- Phillips, B. N., & Leahy, M. J. (2012). Prediction of membership in rehabilitation counseling professional associations. *Rehabilitation Counseling Bulletin*, 55, 207-218. doi:10.1177/0034355212446533

- Rapp, L.A., & Collins, P. A. (1999). Reasons why nurses do or do not join their professional organizations: A research study done in New Hampshire. *Nursing News (New Hampshire)*, 49(5), 1-8. Retrieved from http://nhnurses.org/
- Ritchie, L., & Gilmore, C. (2013). What does it mean to be a professional nurse? *Nursing New Zealand*, *19*(8), 32. Retrieved from http://www.nzno.

  org.nz/resources/kai\_tiaki
- Ross, S. T. (2009). Factors affecting occupational therapists' decisions to join their state association (Master's thesis). Available from ProQuest Dissertations and Theses database. (UMI No. 1462976)
- Sawatzky, J. V. (2011). My abstract was accepted--now what? A guide to effective conference presentations. *Canadian Journal of Cardiovascular Nursing*, 21(2), 37-41. Retrieved from http://www.cccn.ca
- Sawyer-McGee, T. (2016). *Role of the DNP in healthcare. A closer look at the impact of the DNP on practice, policy and profession.* Retrieved from http://nurse-practitioners-and-physician-assistants.advanceweb.com/Features/Articles/Role-of-the-DNP-in-Healthcare.aspx
- Schroeder, R. T. (2013). The value of belonging to a professional nursing organization. *AORN Journal*, 98, 99-101. doi:10.1016/j.aorn.2013.06.002
- Siegel, B. (2013). REAL data collection essential for care of vulnerable populations. *Journal Of Healthcare Management / American College Of Healthcare Executives*,

  58(6), 392-394.

- Sullivan, D., & Stevenson, D. (2009). Promoting professional organization involvement. *AORN Journal*, *90*, 575-579. doi:10.1016/j.aorn.2009.09.007
- Turale, S. (2015). Turning conference presentations into publications. *International Nursing Review*, 62(1), 3-3. doi:10.1111/inr.12182
- Walden University. (n.d.). *Disseminating your research*. Retrieved from http://researchcenter.waldenu.edu/Research\_Tutorials/Disseminating\_Your\_Research/index.html
- Yeager, S. J. (1981). Fostering the development of professionalism: An exchange theory perspective of the decision to join a professional association. *Southern Review of Public Administration*, *5*, 314-338. Retrieved from http://www.jstor.org/stable/40860035
- Yeager, S. J., & Kline, M. (1983), Professional association membership of nurses:

  Factors affecting membership and the decision to join an association. *Research in Nursing & Health*, 6, 45-52. doi:10.1002/nur.4770060203\

# Appendix A: Permission



January 23, 2017

To Whom It May Concern:

As president of the Forum of Nurses in Advanced Practice (FNAP), Kesha Walton has permission to have her research survey published on the organization's website. Ms. Walton has permission to access emails and contact information for APN members. Please let me know if you have any further questions or need more information. I can be reached by telephone at 908-601-3519 or email <a href="mailto:joanznp@yahoo.com">joanznp@yahoo.com</a>

Yours truly, Joan E. Zaccardi, DrNP, APN, FAANP

Joan Zaccardi

# Appendix B: Questionnaire

Instructions: The following is a list of benefits offered by professional associations. Each of the following benefits has seven choices ranging from seven (very much) decreasing at intervals to one (not at all) regarding the importance of these benefits to you. Please circle the number that best describes your choice for each item related to the following question whether you are or are not a member of the professional organization for advanced practice nurses.

How would the following benefits affect your decision to join a professional advanced practice organization?

Very much						Not at all	
1. Professional self-improvement	-7	6	5	4	3	2	1
2. Friendship	-7	6	5	4	3	2	1
3. New ideas for practice	-7	6	5	4	3	2	1
4. Continuing education	-7	6	5	4	3	2	1
5. Leadership programs	-7	6	5	4	3	2	1
6. Meetings	-7	6	5	4	3	2	1
7. Social activities	-7	6	5	4	3	2	1
8. Networking opportunities	-7	6	5	4	3	2	1
9. Improve leadership skills	-7	6	5	4	3	2	1
10. Support from colleagues	-7	6	5	4	3	2	1
11. Fulfill desire to belong	-7	6	5	4	3	2	1

12. Change of pace7	6	5	4	3	2	1
13. Peer group contact7	6	5	4	3	2	1
14. Professional advancement7	6	5	4	3	2	1
15. Professionalism7	6	5	4	3	2	1
16. Validation of ideas7	6	5	4	3	2	1
17. Improvement of APRN profession-7	6	5	4	3	2	1
18. Happiness7	6	5	4	3	2	1
19. Improvement of my work7	6	5	4	3	2	1
20. Better pay scales for APRN7	6	5	4	3	2	1
21. Discounts of conferences7	6	5	4	3	2	1
22. Balance in occupations7	6	5	4	3	2	1
23. Something new7	6	5	4	3	2	1
24. Fun7	6	5	4	3	2	1
25. Job placement aid7	6	5	4	3	2	1
26. Chance to travel (meetings/conf)7	6	5	4	3	2	1
27. Group insurance plans7	6	5	4	3	2	1
28. Political lobbying7	6	5	4	3	2	1
29. Maintenance of prof standards7	6	5	4	3	2	1
30. Cost of membership7	6	5	4	3	2	1
31. Timing of meetings7	6	5	4	3	2	1
32. Access to free online resources7	6	5	4	3	2	1
33. Social media networking7	6	5	4	3	2	1

34. Please list the 3 items most imp	portant to you when c	considering joining a profession
organization 1.	2	3
35. What is your highest level of ed	lucation completed?	
Masters		
Doctorate		
36. What is your age?		
18-24		
25-34		
35-44		
45-54		
55-64		
65+		
37. What is your specialty in practic	ce?	
Family		
Adult		
Pediatrics		
Critical Care		
Mental Health		
Other		
38. Years of experience as an Adva	nced Practice Nurse?	
1-3		
4-6		

7-9

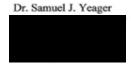
10-12

13-15

15+

Walden University's approval number for this study is **05-10-17-0528689** and it expires on **May 9, 2018.** 

# Appendix C: Permission Letter



Dear Dr. Yeager,

I am a DNP student with Walden University, a College in Minneapolis, Minnesota and I am currently working on my capstone project with anticipated completion in November.

My capstone is exploring the barriers and identifying potential solutions to overcome the barriers through literature review or expert recommendations.

I would like permission to use your Profession Association Membership questionnaire in my study as my data collection tool and permission to make revisions to fit my project if needed. If you agree, please sign the enclosed letter and return it to me in the self-addressed stamped envelope provided.

I appreciate your consideration. Any questions or concerns please don't hesitate to contact me via email

Valt

Sincerely

Kesha Walton, DNP student

Date: 8 25 11

AGREED.

Dr Samuel I Veager author