



## Factors Influencing the Development of Social Change Involvement

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### Abstract

How to cultivate and encourage the motivation to become an agent of positive social change has not been studied to a great degree. For example, what kind of factors influence the development and growth in nurses toward a desire to be involved in changing society for the better? Knowledge of these factors could help educators and nurse leaders provide and encourage those growth opportunities. The purpose of this research was to interview nurses known to be deeply involved in various types of positive social change and discover what factors influenced this development. Three overall themes emerged as influencing factors for involvement in positive social change including emerging perspectives; experiences and encounters; and consideration of the successful effects of social change attempts.

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### Introduction

Nursing is consistently recognized as a caring profession. Many who enter the profession do so out of a desire to simply help others. Many nursing students believe that the most important characteristic nurses possess is

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the ability to provide compassionate care (Rhodes et al., 2011). Caring behaviors, such as showing respect, attention, and valuing the person, have healing elements but also provide personal meaning to the caregiver (Karlsson & Pennbrant, 2020). These caring behaviors make nurses a logical group of people to initiate positive changes in society. Whether that be through political voices to change health-care processes and practices, advances in health through research, or in the many ways nurses volunteer their skills to change the lives of communities, nurses constitute a powerful force.

How to cultivate and encourage the motivation to become an agent of positive social change has not been studied to a great degree. It is important to understand the factors that may influence the development and growth of nurses toward a desire to be involved in changing society for the better. Knowledge of these factors may help educators and nurse leaders provide and encourage growth opportunities. The purpose of this research was to discover what factors influenced this development by interviewing nurses known to be deeply involved in various types of positive social change.

## Literature Review

There is little specific research on nurse knowledge and ability to effect positive social change. While little was found in the literature regarding the specific topic of developing attitudes oriented toward changing society, some studies were tangentially related to this concept. For example, Chi (2018) found that foundational faith-inspired concepts are instrumental in both social work and as a lifestyle framework. Shim and Park (2019) concluded that, among Korean government employees, the style of servant leadership was related to motivating individuals toward public service motivation. Public service motivation was also studied by Evans and Evans (2019), who concluded that, while adverse childhood experiences correlated negatively with motivation, extremely negative childhood experiences correlated positively with engagement in public service. These are some examples of the minimal exploration of nursing and its impact in the positive social change arena.

On a smaller scale, there has been more research conducted with respect to working in a specific organization and motivation within that organization. Lin et al. (2019) investigated the concept of helping behaviors among employees, which have been linked to higher performance in organizations. Lin et al. (2019) found that if motivations for helping others were voluntary (as opposed to mandated as a part of the job), the effect of the motivation was more positive, and they tended to help others more frequently in the future. In addition, Kim & McGill (2018) also studied helping behaviors in organizations and determined that helping other persons in need is enhanced by self-affirmation. What we do see documented in the literature here is a sense that there is a personal reward in helping others in the workplace when it is not forced.

Some research related to the role of nursing education in the development of nursing values and caring behaviors was found. Role models in nursing school, as well as learning correct methods for nursing skills, support this development (Culha & Acaroglu, 2019). Finally, a position paper by Mumby (2020) discusses the thesis: coaching that focuses on the positive qualities of groups disadvantaged by society could work better to effect social change than focusing on the negative. Thus, working social change into the job can also be effective and motivating.

## Methods

### Ethics

The university Institutional Review Board (IRB) granted approval for this study to proceed (prior to data collection) on September 20, 2021. As part of the IRB process, an informed consent form was created and

utilized. CITI Research, Ethics, and Compliance training was current for all of the co-researchers. The informed consent form reviewed the purpose of the study. This was also provided at the start of each interview, as well. Identities of the participants were known to the researchers; however, these identities were not divulged in the reporting of research findings. An interview script was used to interview participants so that answers were not coached or pressed.

## **Study Design**

A qualitative approach was used to pursue the research inquiry. The researchers perceived that this approach would generate deeper insights into the reasons participants became involved in social change initiatives.

## **Participants**

Participants were individual nurses who participated in activities to promote social change. A purposive sampling method was used to ensure a sample diverse in age, gender, and academic preparation. Twenty-six individual nurses who were known to the researchers as being involved in social change activities (either by reputation or previous professional encounters) were initially invited by email or phone to participate in the study. Seven who were contacted did not respond to the initial contact and request, and three declined to participate for various reasons. This left a sample of 16 individuals who agreed to be interviewed. Once data collection and analysis were complete, we determined that data saturation had been achieved with this group of 16, and no more participants were recruited for the sample.

The age composition of the sample ranged from age 23 to 80 with an average age of 56. The largest proportion of participants was educated at the doctoral level ( $n = 7$ ); however, there were also nurses in the sample whose highest degree was an MSN, BSN, ADN, or diploma. Most nurses in the sample were female ( $n = 13$ ), but three were male. Years in nursing ranged from 6 months to 52 years. Current roles in nursing included educators ( $n = 7$ ), and the remainder was distributed among nurse midwives, nurse practitioners, and nurses working in pediatrics, administration, ex-military, and retired nurses. The geographic distribution covered nine states.

## **Data Collection**

Sample participants were selected and initially contacted by phone or email with a broad introduction to the study and a request to be interviewed. Participation was voluntary. Potential participants could ignore the initial contact or could decline to participate. If interest was expressed in a response, details were shared, and the consent form was sent to individuals who officially agreed to participate. Finally, mutually convenient times were established for the interviews. Two broad statements guided the interview encounters:

- Talk about the activities in which you currently participate that promote social change.
- Discuss factors in your life that encouraged your interest and participation in social change activity.

The telephone interviews were audio recorded, and interviews lasted between 12 and 45 minutes, averaging 24.5 minutes. The audio recordings were then transcribed and analyzed for themes.

## **Data Analysis**

The data analysis from this research included the interpretation from expert researchers about the agreed-upon concepts from the verbatim transcripts. A general qualitative approach guided this inquiry.

The credibility or rigor of a qualitative inquiry is just as important as the credibility of a quantitative inquiry. Credibility is achieved by applying structured assessment and evaluation to the interpretation of the findings, which defines trustworthiness (Creswell & Poth, 2018). In this inquiry, a coding table was developed to provide a structured process for the analysis of the transcripts (see Denzin & Lincoln, 2018). The coding table

was offered by an expert qualitative researcher (part of the research team) and reviewed by the primary investigators, creating a comparative analysis. The coding table was divided into axial concepts, meanings, and themes by applying the interpretation of the concepts that were realized by the investigators.

Saturation of the data, with respect to interpretation of the findings, is also important and provides credibility to a qualitative inquiry (Denzin & Lincoln, 2018). In this research, saturation was obvious as each participant commented on common feelings and understandings in the interviews. We highlighted these common threads, and then each investigator verified the common themes in an additional review. As common themes were then agreed upon, the investigators provided supporting evidence by including verbatim participant comments from the interviews.

## Results

The first statement directed participants to discuss the types of social change activities in which they have engaged. These activities are sectioned into five broader categories, including volunteerism, research, politics, career, and faith-based projects.

### Volunteerism

Several of the participants described how they engaged in volunteer efforts, both community and abroad, to change society in positive ways. Several participants mentioned regular medical mission work to impoverished third-world countries to teach health practices and provide medical care. Others were active in communities helping in food distributions, a senior center, local non-profit organizations, a guardian ad litem program to advocate for abused children, and as a liaison to the Board of Health to promote local health issues, such as reduction of health care costs. Community action for older adults was another area of volunteerism, helping this group with health promotion, social security issues, and support for chronic health issues.

### Research Endeavors

In particular, two participants discussed their research endeavors and how they promoted social change. One participant, P1, had expertise in the area of end-of-life care and the resulting research has promoted change in hospice policies for the dying. Another, P6, had a research agenda in resilience-building, which has contributed to positive ways to embrace change. P6 stated, “you can’t have change unless you are willing to build a safe environment.”

### Politics

Several of the study participants were involved in political action and advocacy to promote better health. Some were involved in nurse’s associations, such as their state nurse foundation, Oncology Nurse’s Association, Holistic Nurse’s Association, and American Cannabis Nurse’s Association. Two were involved in community advisory committees working on advocacy for minority groups and vaccine access and distribution, respectively. One nurse was an elected city councilor and involved in advocacy of programs for poverty, noise reduction, and dust reduction.

### Career

Some of the nurses interviewed had careers in nursing education and perceived that their roles in academia contributed to positive social change. Examples mentioned included mentoring students to be involved in community activism, identifying gaps in education for minorities and eliminating barriers in education for these groups through activities. Also mentioned was specifically teaching the topics of social change,

economics, finance, and evidence-based practice as ways to equip students with tools for positive social change. Two participants were nurse practitioners who worked with clients enduring the challenges of poverty. These nurses discussed the efforts of their work to change conditions for the poor with respect to health teaching, promotion, and care.

## **Projects**

Finally, several in the cohort of participants discussed social change in view of the spiritual condition through faith-based endeavors. Two nurses were involved in evangelistic outreach programs. The nurses who participated in medical missions mentioned these programs also had a component involving spiritual support. One church hosted a food distribution program with prayer available for recipients, in which the nurse in the sample participated.

## **Major Themes**

The second part of this study was to uncover the perceptions of participants regarding what they thought had influenced their interest in becoming agents of positive social change. The analysis resulted in the emergence of three major themes that were categorized as emerging perspectives, experiences and encounters, and effects of endeavors. Each theme is highlighted under the respective heading.

### **Theme 1: Emerging Perspectives**

In the theme of emerging perspectives, participants discussed influences toward social change in their lives when growing up. Several discussed having been a member of a family with inclinations toward social justice or strong faith-based beliefs, for example. One, P5, stated, “I come from a large family, and my parents were very active in the church and with social justice, and so we started working with them before we even knew what we were doing.” Another, P1, had even been in a convent as a young adult for a number of years and stated, “so I know my Christian background (was influential), as I was in a convent for five years, and since I was in the eighth grade my main ambition was to be a missionary in Africa. That has always been my goal. It started that early on.” Some told stories of how their parents were very involved in social issues. One, P10, discussed, for example, how her mother was especially involved in the formation of nursing unionization, stating, “weekends... she’d drop my brother and I off at the movies or bowling alley, or whatever, and she would go out and work on trying to get people to accept the union, and it did happen!” In these individuals, there was a natural development in the interest in involvement in social change, as it was a vibrant and consistent part of their upbringing.

### **Theme 2: Experiences and Encounters**

This second theme surrounds particular experiences or encounters that study participants perceived to have influenced their interest in becoming agents of positive social change. Some of these experiences were regarded as positive; however, another group of experiences was the opposite. Both types of experiences seemed to have influenced the development of interest in impacting social issues.

#### **Subtheme A: Positive Experiences**

Many of the participants in the study recounted experiences where the need for social change was apparent. Participants indicated that they were affected by seeing poverty on a mission trip or studying abroad in school, children of parents involved in drug abuse who were abandoned, hearing the struggles of immigrant friends, or even in their roles as registered nurses encountering particular situations with patients who were struggling with the health-care system. Almost all participants could relate a particular story that was influential to them. Some of the commentaries included the following:

- P2, “I have a friend who is Guatemalan, and she has lived here for about 25 years, but she has shared a lot with me about her life growing up and how hard it has been to raise her kids here. I see things in their lives that need change, to make their lives better in a way.”
- P4, “The medical mission trip was a major factor in stimulating my interest in getting involved in social change. It was on my heart to make life better for people with low access to care and poverty.”
- P3, “I got involved because of a friend of mine, had actually been guardian ad litem with twin girls, they were probably only about 2 years old. They had been abandoned. Their parents had been involved in drugs.”

Also relevant to this category, several of the participants discussed environmental or social issues that influenced a desire to become involved in social change. One mentioned the impact that the civil rights movement had on her desire to advocate for racial equality. This person, P14, commented, “I think the things (that were influential) were things happening in the '60s in terms of the civil rights movement. We didn't know what we did not have until someone would call it to our attention in terms of, say, the right to vote, the right to sit in the front of the bus instead of the back of the bus.”

Another, P16, described a natural environmental disaster as being influential. The participant conveyed the notion of living through the destruction from a major hurricane that quickly and completely obliterated their community. This loss of a sense of security encouraged the participant to desire to build community relations as ways to support and help out neighbors through adversity.

Several of the participants had been active in military service and indicated that this particular experience had been instrumental in building the skills needed to make positive social change. One, P6, stated, “I never did the same job in the military in 27 years. Each time I took a new job, it was an opportunity to learn something new. For me, that energizes me. That discovery is just wonderful.” Another, P1, indicated the military ignited a passion for a particular change in society. She stated, “As an Army nurse I was thrust into the environment where many died. That became my passion in the Army to do something to get better care for those who were sick and dying.” This nurse went on to publish research on end-of-life care and advocate for the expanded role of nurse practitioners in hospice care.

Many participants in the study commented on the role of mentors, nurse leaders, faculty members, and friends throughout their experiences as students or as working registered nurses. In these experiences, others saw a quality or characteristic in the participant, brought it to their attention, and encouraged them to become involved in social change behavior. One relevant example was a retired nurse who never perceived herself as being politically active. A group of friends suggested that, with her background in conducting research and teaching nursing, she would be an amazing city councilor, and they encouraged her to run. She did so, won the election, and has since developed a network related to food sustainability and distribution, helped formulate a vaccination incentive program, and conducted participatory action working in communities with a focus on health and slumlords and noise decrease ordinances. She initiated action to deactivate 175 wells that were associated with arsenic.

### **Subtheme B: Negative Experiences**

Although positive experiences and encounters in one's life were perceived by all participants as something that stimulated interest in becoming agents for social change, some also shared events described as extremely difficult for the participants to endure. These negative situations tended to precipitate a similar motivation for desiring change. Participants with negative stories were challenged to change societal circumstances so that others could be spared the experience of devastation.

Several of the nurses described situations that occurred in nursing school when an instructor treated them unfairly or unkindly, and this motivated them to become involved in nursing education and make changes in academia. One participant, P8, described the following:

“It was an instructor who just belittled people. She was like a witch, terrible. She was not that much older than me. That is why I became an educator. Through that bad situation I wanted to create a change in nursing education for other people so that they don’t have that kind of situation.”

Another described a faculty member who lacked empathy:

In college, I had a really negative experience in nursing school. I had one faculty, and it was a horrible experience with her. It stands out in my mind so distinct. But I can remember sitting in her office and thinking that if I ever did this (teach) I would not be you. She was my oncology clinical instructor, and my dad’s best friend had been diagnosed. My dad had some rare form of cancer they were trying to do testing on. And I was just struggling. It was just hard for me. And I just needed someone to talk with me, and she told me I had just better suck it up. And I remember thinking, “That wasn’t what I needed. I needed something different than that. I was young and didn’t know what I really needed but that wasn’t it.” (P9)

This nurse went on to become an associate professor with tenure at a state university and has conducted research, presented papers, and published in the research agenda of improving nursing education. She taught graduate courses in nursing education and perceived herself as a positive role model for future nurse educators.

Some of the participants described personal, negative situations as being influential in encouraging the desire for change. One expressed a previous episode with severe depression, even to the degree where suicide was attempted, and hospitalization for a near-death experience. She had a faith conversion and is now involved in evangelical efforts to change the spiritual conditions of those who feel lost. Another described the role of her personal failures as being influential. She (P6) stated:

A lot of my drive to become a change agent emerged from learning from failure (in home life, elementary school, and in the military for example), learning how to turn that around. From incidences of negativity, learning to say, “it has to be different. I had to rewrite the narrative.”

### **Theme 3: Effects of Endeavors**

The final of the three themes that emerged from the study interviews related to the ways in which participants were encouraged by seeing the results of efforts toward social change. Some talked about legislation that had been developed that motivated them to continue trying to produce more. Some discussed the results of research that produced change, which motivated them to continue a research agenda in that arena. Others discussed activities of students they had taught skills for social change, as well as the resulting work of these students in impacting change, which motivated them to continue their educational endeavors. Some of the comments of participants follow:

- P15, “And there were nine different pieces of legislation that were out there that were all health care related, and we were able to get these groups united. We got all nine pieces of legislation passed, anything from making CPR a graduation requirement for high school, APRN consensus model for independent practice, oral chemotherapy agents covered by insurance. We helped the Oncology Nurses Association get that one through.
- P6, “If we are going to create people who are innovative and on the edge (of change in society), we need to take risks. Number one, we have to enjoy our differences. You have to have that psychological safety

where you are in an environment where you can take those risks. And you can pick yourself up again. Leadership makes a huge difference. Integrity makes a huge difference. And relationships make a huge difference. I think all of those are involved in facilitating that innovation.

- P5, “My research skills also came into play in encouraging involvement in social change. All the analysis of things, like why people are vaccine resistant. A couple of others on my committee were professors. We would pull research and then summarize it for the entire committee, so we didn’t put effort into something that wasn’t going to pay off. We involved Latino and Native American organizations from the university, and they began to work in their populations. It turned out successful.”

## Limitations

To secure the sample for this study, we contacted individuals who were known to be involved in efforts to positively change different aspects of society. Potential participants were known to the researchers either by reputation or professional encounters. The consent forms used assured participants that they were free to decline, and no coercion was used to acquire a sample. Efforts were made to engage individuals who had diverse interests, were of diverse ages and genders, were involved in different nursing careers, and lived in different parts of the country. That said, because the sample group was known to us, there could have been a bias related to the particular types of acquaintances the researchers have. Having two distinctly different researchers who know different people and who have known one another only 1.5 years was helpful to minimize this potential bias.

## Discussion/Implications for Theory and Practice

This study is important in providing insight into the types of situations that can motivate nurses to become agents of positive social change. Knowing this can help educators and nurse leaders to provide structured opportunities to that end. Although past experiences cannot be changed, nurses can be encouraged to consider the potential positive impact of past experiences, which had been regarded as negative, and view them with the purpose of making change. Activities, such as studying abroad, and the provision of positive mentors and role models can be structured. Exposure to skills that will help develop change initiatives, such as political advocacy, leadership, research, cultural sensitivity, and resilience training, can be components of nursing curricula or continuing education programming. Nurses are already recognized as care agents. This foundation is a natural launch for the development of advocacy for positive social change.

## Conclusion

This qualitative study involved analysis of the interviews of selected participants who are involved in social change efforts to discover which types of social change activities they engage in and what motivated their involvement. An array of social change endeavors was reported from volunteerism, research, political action, career endeavors, and faith-based projects. Three overall themes emerged as influencing factors for involvement in positive social change, including emerging perspectives; experiences and encounters; and consideration of the successful effects of social change attempts.



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