



Zeta Upsilon : a historic overview 1982-1992
by Judith Anne Klaboe-Russell

A thesis submitted in partial fulfillment of the requirements for the degree of Master of Nursing
Montana State University

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Abstract:

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The purpose of this study was to provide an overview of the development, growth, and evolution of Zeta Upsilon, the Montana Statewide Chapter-at-Large of Sigma Theta Tau International Honor Society for Nursing. It documented the history of the chapter's first decade, 1982 through 1992. Historical research methods were utilized for this study.

A review and analysis of archival materials was completed. Oral history interviews were conducted with the chapter's first eight presidents.

Upon evaluation of the data collected in the oral history interviews and data found in the Executive Committee minutes and the chapter's newsletters, the researcher found many examples of the promotion of leadership and professionalism, the two major concepts of the study's conceptual framework. Examples include writing seminars, research grants, scholarly presentations, encouragement of participation in the chapter's activities, and attendance at statewide, regional, and national meetings.

The findings of this study indicate that the forerunner of Zeta Upsilon, the Montana Honor Society of Nursing, the Zeta Upsilon Chapter, and the presidents of Zeta Upsilon did foster leadership and professionalism in its members. The presidents of Zeta Upsilon did influence and promote excellence in the membership. The first 10 years of the chapter's history were remarkable in the progress it made from a beginning membership of 30 to over 500 members at the time of its 10th anniversary.

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1982 - 1992

by

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A thesis submitted in partial fulfillment
of the requirements for the degree

of

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MONTANA STATE UNIVERSITY
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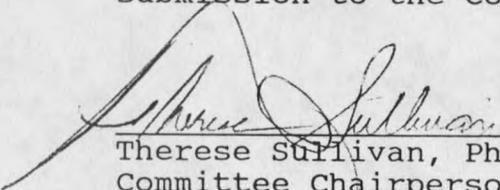
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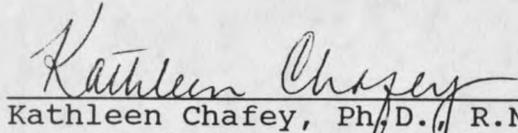
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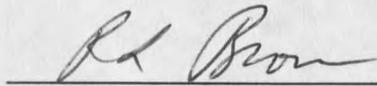
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ABSTRACT

An honor society is an association of primarily collegiate members and chapters. Its purposes are to encourage and recognize superior scholarship and/or leadership achievements among the membership. Nursing's honor society is Sigma Theta Tau. Its purposes are to foster high professional standards, encourage creative work, promote the maximum development of the individual, and promote a spirit of fellowship among members of the nursing profession.

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CHAPTER 1

INTRODUCTION

An honor society is an association of primarily collegiate members and chapters. Its purposes are to encourage and recognize superior scholarship and/or leadership achievements at either the undergraduate or graduate levels (Association of College Honor Societies, 1961).

There is a three-fold purpose to honor societies in American colleges and universities. The first is to recognize the attainment of scholarship of superior quality. The second is to recognize the development of leadership qualities, character, good campus citizenship, and strong secondary scholarship. Third, it is to encourage the production of superior scholarship and leadership. It is clear that an honor society must define and maintain a truly high standard of eligibility for membership and achieve sufficient status so that membership becomes something to be highly valued (Association of College Honor Societies, 1961).

Phi Beta Kappa was the first organized honor society. It was founded in 1775, and at that time, since colleges were primarily for the training of men for service to

church and state, it claimed no field. As education expanded into new fields, Phi Beta Kappa elected to operate in the field of Liberal Arts and Sciences. The 1880s saw the establishment of Tau Beta Pi in Engineering and Sigma Xi in Scientific Research (Association of College Honor Societies, 1961, p. 6).

Other honor societies came into existence in the early years of the 20th century. Phi Kappa Phi was started by the presidents of three state universities with the thought that each institution should have an honor society. Later, its field was widely extended to include an institution of university scope, accepting into membership superior students of all schools or colleges of which they were a part. Alpha Chi is another scholarly honor society which covers all academic fields. With the exceptions of Phi Kappa Phi and Alpha Chi and honor societies which have their origins in black or Catholic colleges and universities, all scholastic honor societies have followed the tradition of selecting a specific field of coverage: Delta Mu Delta in the field of Business Administration, Pi Kappa Lambda in Music, Rho Chi in Pharmacy, and Tau Beta Pi in Engineering (Association of College Honor Societies, 1961, p. 6).

Nursing's honor society, Sigma Theta Tau, came into existence in 1922. Its purposes are to foster high professional standards, encourage creative work, promote

the maximum development of the individual, and promote the spirit of fellowship among members of the nursing profession (Association of College Honor Societies, 1961, p. 42).

Purpose

The purpose of this study was to provide an overview of the development, growth, and evolution of Zeta Upsilon (ZU), the Montana Statewide Chapter-at-Large of Sigma Theta Tau International Honor Society for Nursing (STTIHSN) from 1982 through 1992. This overview will document the history of the chapter's first decade.

Specific Study Aims

The specific aims of this study were:

(1) To identify factors that led to the formation of the Montana Honor Society of Nursing (MHSON), the forerunner of Zeta Upsilon, and

(2) To provide a historical perspective of the developmental growth and evolution of Zeta Upsilon as it promoted the objectives of STTIHSN from 1982-1992.

Background and Significance of Study

According to Tucker and Watts (1994), "All chapters are started as honor societies at qualified colleges and universities by nursing leaders" (p. 11). In 1978, the Research Committee of Montana State University College of

Nursing (formerly MSU School of Nursing), under the leadership of Dr. Ruth Ludemann, actively pursued the possibility of developing a chapter of STTIHSN. Dr. Ludemann was an Associate Professor of Nursing and Education Director at the Missoula Extended Campus at the time she was appointed to the Research Committee of STTIHSN. She was later the first president of the Montana Honor Society of Nursing (MHSN).

A committee of seven faculty members, including Ruth Ludemann (Chairperson), Harriet Anderson, Barbara Dziak, Milly Gutkoski, Ruth Saucier, Norma Tigerman, Marlene Tracy and one student nurse, Kim Broadhurst, met in December 1978 to develop a questionnaire to determine faculty interest in forming an Honor Society. Faculty support was positive and the inclusion of the Carroll College Department of Nursing in Helena was suggested.

The MHSN was formed in June 1979 when Dr. Ludemann gave a report to the Montana State University nursing faculty on the progress that the Research Committee had made toward the formation of a chapter of STTIHSN. The chartering ceremony for the Honor Society was held at that time. Sixty-six charter members were inducted. The next formal induction was held in May 1980 on the Carroll College Campus in Helena. Sixteen members were inducted at that time. The third induction was held at Montana State University in Bozeman in June 1980 with an additional 54

inductees for a total of 136 members. (See Appendix A for the list of ZU charter members and inductees.)

For the next two years, the Honor Society continued to move toward becoming a chapter of Sigma Theta Tau. Members of the Society recognized the importance of all levels of the nursing academic community being involved in the formation of the chapter. They included alumni, faculty, and students from both Carroll College and Montana State University in the planning and development of the Honor Society (Honor Societies Histories, 1979-1980).

The significance of the study is that the overview of the development and evolution of Zeta Upsilon, Montana Statewide Chapter of STTIHSN, documents how the chapter's goals reflect the international organization's goals for the development of nursing scholarship and excellence. It also documents outstanding contributions of individual members/officers and the chapter itself.

Research Questions

(1) What were the factors that led to the formation of the Montana Honor Society of Nursing and ultimately Zeta Upsilon, the Montana Statewide Chapter of Sigma Theta Tau International?

(2) How have the objectives of excellence and scholarship in nursing been fostered during the first ten years of the chapter's history, 1982-1992?

(3) Who were the nursing leaders, and how did they promote the formation, growth, and evolution of Zeta Upsilon from 1982-1992?

Conceptual Framework

Professionalism and leadership are the concepts that were used to provide the framework for this study. Two of the main purposes of STTIHSN are to recognize leadership in the members and to foster high professional standards (Bower, 1995; Dickerson-Hazard, 1994).

Definitions

Professionalism: a commitment to excellence in our work (Styles, 1982, p. 19).

Leadership: a process that is used to move a group toward goal setting and goal achievement (Bernhard & Walsh, 1995, p. 17).

Honor Society: a society for the recognition of scholarly achievement (Gove, 1981, p. 1087).

Chapter-at-Large: formed in an area in which at least two schools create a cooperative honor society and meet eligibility requirements (Sigma Theta Tau International [STTI], 1988-1989).

Excellence: indicates the highest degree of good qualities (Gove, 1981, p. 791).

Scholarship: reflects a quality of work. A quality of discriminatory thinking. A quality of thoughtful actions and, in general, wisdom about a subject matter under study (Leininger, 1974, p. 7).

Assumptions

The basic assumptions of this study were that all members of the Zeta Upsilon Chapter are professional nurses, minimally prepared at the baccalaureate level, who have leadership potential and interest in scholarly activities. This was based on the fact that:

(1) All prospective candidates and/or members of Sigma Theta Tau must be enrolled in or be graduates of a Baccalaureate or Graduate Nursing Program;

(2) Students shall have a grade point average of at least a 3.0 on a 4.0 scale; and

(3) A graduate nurse with a baccalaureate degree or higher, who has shown excellence in the field of nursing, shall be eligible for membership and will be nominated by a member of the chapter (Montana Honor Society of Nursing, 1980).

(4) All prospective candidates possess leadership qualities.

(5) Prospective candidates demonstrate an interest in knowledge development and scholarly activities with application to the clinical arena.

(6) Prospective candidates recognize the importance of professional organizations (e.g., Zeta Upsilon).

CHAPTER 2

REVIEW OF THE LITERATURE

Sigma Theta Tau International fosters the development of leadership and professionalism in its members. Following the ideals and guidelines of the parent organization, Zeta Upsilon also strives to develop leadership and professionalism in its membership. These concepts provided the conceptual framework for this study.

Sigma Theta Tau

Martel (1986) stated Sigma Theta Tau International (STTI) is the National Honor Society of Nursing, a professional and social organization with purposes and functions which can be compared to other honor societies such as Alpha Omega Alpha in Medicine and Pi Lambda Theta and Phi Delta Kappa in Education. Sigma Theta Tau is the only nursing society of this type nationally or internationally. By 1994, chapters had expanded to four nations outside of the United States making it a truly international organization (Tucker & Watts, 1994).

Membership in Sigma Theta Tau is conferred on students from baccalaureate and graduate programs in nursing who have achieved academic excellence as well as demonstrated

leadership qualities. Membership is also available to baccalaureate prepared nurse leaders in the community by invitation through active chapters. The society is dedicated to promoting high professional standards and emphasizes the importance of research/scholarly activities in nursing (STTI, 1988-1989).

Sigma Theta Tau was founded in 1922 by six futuristic young women at the Indiana University Training School for Nurses: Elizabeth McWilliams, Marie Hippenstell, Mary Tolle, Edith Moore, Elizabeth Russell, and Dorothy Garrigus. They believed the development of an honor society would advance nursing as a profession. "They sought to develop a society which would reward distinguished effort and would, through fellowships, increase professional spirit in the field of nursing" (Martel, 1986, p. 2).

In a 1976 taped interview with Sister Rosemary Donley, Mary Tolle stated the founders' reasons for the genesis of Sigma Theta Tau. The first was scholarship and clinical experience -- students should be taught "why" before being taught "how." She stressed the necessity of being able to get along with others and the importance of friendliness. She also stated the need to use English accurately. Nurses need, according to Tolle, to be vocal, speak out for nurses and nursing, and to be able to get out into the community and interpret nursing. She also stated what a nurse could

be if she had the advantage of being a graduate of a university school. "Sigma Theta Tau promotes scholarship in the intellectual pursuit of nursing and will continue to do more" (Tolle, 1976).

Conceptual Framework

Leadership

"Leadership appears to be a rather sophisticated concept" (Stogdill, 1974, p. 7). Although, by definition, the word leadership is only about 700 years old (it appeared in the dictionary about 1300 AD), since time began man has sought out individuals with those special qualities that enable them to take charge of change, activity, and process (Stogdill, 1974).

Stogdill (1974) provides several authors' definitions of leadership. Indeed, there seem to be as many definitions of the term as there are people who try to define or explain the concept. One of these definitions is "one who is influenced by the need and wishes of the group effort" (Bernard, 1927, p. 7). Blackmar (1911) saw leadership as the "centralization of effort in one person as an expression of the power of all" (p. 2). Chapin (1924) reviewed leadership as a "point of polarization for the group cooperation" (p. 5). Bernhard and Walsh (1995) defined leadership as a "process used to move a group toward goal setting and goal achievement" (p. 17). For

Redl (1942), the leader is a central or focal person who integrates the group. Others view leaders as a part of the group, a primary agent for determining the structure of the group, goals and activities within the group, and/or an ideology and atmosphere in which the group functions (Stogdill, 1974).

Leadership is neither cultural nor gender related. "It has been associated with aggressiveness, which traditionally has been considered a masculine characteristic, whereas passivity has been thought to be a feminine trait" (Marriner-Tomey, 1992, p. 260). Historically, leaders and leadership qualities cross all cultural and gender barriers. Joan of Arc, Clara Barton, Mother Theresa, Eleanor Roosevelt, Madam Curie, Florence Nightingale and Hillary Clinton represent women who have made a difference in their cultures. Although not all will be remembered kindly by historians, their actions have caused changes that affect society, culture, and the world.

Leadership has been explored as far back as Plato. Early in the 19th century, theorists assumed that great leaders had characteristics not found in others. This is the foundation of Sir Francis Galton's "Great Man Theory" (Hrezo & Witte, 1993). The Great Man Theory is one of the oldest in history and is based on Aristotle's philosophy that some people are born to lead, others to follow (Morrison, 1993). Two disadvantages to this theory were

that "(1) the ruler might not be capable of great leadership and (2) people who were not leaders were assumed to be untrainable" (p. 93). Leadership qualities were thought to be innate. No ordinary man could achieve them.

The "trait" theory essentially asserts that certain attributes must be present for successful leadership (Bernhard & Walsh, 1990; Hart, 1990; Marriner-Tomey, 1992). Energy, drive, enthusiasm, self-confidence, decisiveness, friendliness, honesty, fairness, and loyalty are among the attributes identified as leadership traits.

"Situational" theories became popular in the 1950s (Marriner-Tomey, 1992). These theories suggest that the situation determines behaviors (Morrison, 1993). According to these theories, there are instances where the person may be the leader and in other instances the follower, depending on the needs of the group.

The "interaction" approach to leadership is based on personalities (leader and group) and the situation (Morrison, 1993). This theory focuses on the goals and needs of the group. The behavior of each member influences and can cause a behavior change in another member. The leader's behavior also affects the group. This theory supports the idea that the group will choose a leader who can help them attain their goals (Morrison, 1993).

According to the "charismatic" theory, individuals can be leaders if they possess this intangible characteristic.

This leader inspires, obtains an emotional commitment, and arouses strong feelings of loyalty and enthusiasm in followers. Charisma is elusive; therefore, it may not be sensed by all (Marriner-Tomey, 1992).

Fiedler (1967) introduced the "contingency" theory. He believed leadership would be effective or ineffective depending on the situation. He identified three factors that influenced the leader's role: "(1) leader/member relations, (2) task structure, and (3) position power" (p. 269). Leader/member relations depend on the confidence and loyalty members have in the leader. Task structure refers to the ease by which the task is defined and measured. Power position refers to the authority in position, the power to use rewards, and organizational support of the decisions that are made (Marriner-Tomey, 1992).

Stogdill (1974) points out that leaders are higher in intelligence, dependability, participation, sociability, initiative, and persistence. Self-confidence, insight, cooperativeness, verbal skills, and task knowledge were also more evident in people with leadership skills. Goldsmith (1993) states that leaders have the following characteristics: "trusting, visionary, reflective, goal setting, authentic, compassionate, self knowing, competent, analytical, open, and risk taking" (p. 26).

"Style theory is concerned with the manner in which leadership is carried out" (Hart, 1994, p. 277). There are several styles of leadership. The three best known are autocratic, laissez-faire, and democratic (Bernhard & Walsh, 1995).

"Autocratic leadership was once the forte of nursing" (Hart, 1994, p. 277). Nurses did what they were ordered to do. This type of leadership may not be appropriate today. Autocratic leadership can cause hostility and decrease initiative (Swanburg, 1990).

Laissez-faire leadership is permissive and unguided (Hart, 1994). It is an inappropriate leadership style in which little is accomplished. This style decreases productivity and promotes frustration (Swanburg, 1990; Tappen, 1989).

The third style of leadership, as defined by Bernhard and Walsh (1995), is democratic. A democratic leader must develop a sense of trust in those they lead. This leader must be open to communication and must encourage participation of the group (Hart, 1994).

"Transformational" leadership holds particular relevance for nursing leaders (Hart, 1994). It empowers and creates an atmosphere that supports individuals to develop their potential. It is based on the belief that individuals are willing to work at their highest potential if their environment communicates they are valuable.

Transformational leaders assist people to develop their potential. They create an atmosphere of open communication and trust. In a transformational relationship there is a sharing of power (Hart, 1994; Leddy & Pepper, 1993).

Leaders are not born; they are created through a lifetime of learning. Leadership skills can be developed. The capacity and qualities for leadership exist in all of us (Barker, 1990; Bennis, 1989; Gruber-May, 1994; Swanson, 1993). According to Kouzes and Posner (1990), "Leaders challenge the process" (p. 279). In search of ways to improve an organization, leaders must experiment and take risks. By setting examples, they encourage and support others to be risk takers. Risk taking involves failures and mistakes. Leaders must be willing to fail and accept disappointments as a learning experience. Leaders must also be assertive and accountable for their actions (Kouzes & Posner, 1990; Siler, 1993).

Leaders must have a vision, a dream, and a belief that they can make a difference. They know where they want to be in the future and develop strategies to get there. They inspire others to share this vision and empower others to achieve success (Klakovich, 1994; Kouzes & Posner, 1990; Levin, 1993; Siler, 1993).

Leaders believe people are the most valuable organizational resource. They energize members to face challenges and create an atmosphere of trust and dignity.

Through collaboration and team spirit, they strengthen and empower others (Goldsmith, 1993; Hrezo & Witte, 1993; Kouzes & Posner, 1990).

Leaders must be committed, and that commitment must be obvious. They expect commitment and dedication to excellence, but recognize excellence and perfection are not synonymous (Brandt, 1994; Foley, 1993).

The character of a leader is important. Personal integrity is an essential ingredient in leadership. A leader should be honest and fair. These qualities inspire trust (Brandt, 1994; Hrezo & Witte, 1993).

Sigma Theta Tau International confers membership on nurses who have demonstrated leadership characteristics. Each president of Zeta Upsilon brings with her a different leadership style. These unique qualities have contributed to the organizational growth of the chapter.

Professionalism

"To belong to a profession is to belong to an occupation that is delegated high status" (Schrivner & Harris, 1984, p. 252). Historically, the term "profession" has been delegated to occupations such as law and medicine. In nursing, there has long been a controversy as to whether or not nursing is a bona fide profession.

In 1915, Abraham Flexner addressed professionalism in a work entitled "Is Social Work a Profession?" Flexner listed six criteria he felt necessary for a profession:

1. Professions involve essentially intellectual operations with large individual responsibilities;
2. They derive their raw materials from science and learning;
3. With these materials, they work up to a practical and definite end;
4. They possess an educational communication technique;
5. They tend to self organize;
6. They are becoming increasingly altruistic in motivation. (p. 581)

Flexner (1915) felt that although nurses met several of the criteria he described, "only the public health nurse assumed the degree of original and final responsibility that should characterize a profession" (p. 583).

In 1936, Esther Brown reported that "nursing is widely spoken of as a profession by physicians, educators, law-makers and lay people" (p. 9). Nurses also considered themselves professionals. In 1928, the American Nurses' Association met and prepared a brief stating nursing had met all of Dr. Flexner's criteria (Brown, 1936).

In 1945 and again in 1959, educators Dr. Genevieve Knight Bixler and Dr. Roy Bixler reviewed the process for nurses attaining professional status. In their 1949 publication, they stated there were seven criteria necessary for nursing to be considered a profession:

1. Utilizes, in its practice, a well defined and well organized body of specialized knowledge

which is on the intellectual level of higher learning;

2. Constantly enlarges the body of knowledge it uses, and improves its techniques of education and service by the use of the scientific method;

3. Entrusts the education of its practitioners to institutions of higher learning;

4. Applies its body of knowledge in practical service which are vital to human and social welfare;

5. Functions autonomously in the formulation of professional policy and in the control of professional activity thereby;

6. Attracts individuals of intellectual and personal qualities who exalt service above personal gain and who recognize their chosen occupation as a life work; and

7. A profession strives to compensate its practitioners by providing freedom of action, opportunity for continuous professional growth and economic security. (p. 581)

Bixler and Bixler (1959) re-appraised nursing using the same seven criteria. They noted significant progress in some criteria, while others were lacking. Criterion number one addressing utilization of a well organized body of specialized knowledge and criterion number three, education in institutions of higher learning, seemed to have advanced at a slower pace than the other five criteria defined in 1949.

Millerson (1964), upon analyzing the work of 23 scholars, found a common thread. The constants in all 23 were:

1. Education and training;
2. Skill based upon theoretical knowledge;
3. Demonstration of competency in passing a test;
4. Adherence to a code of ethics;
5. A professional organization; and
6. Service to the public good. (p. 5)

Etzioni (1969) reported that nurses, like teachers and social workers, were semi-professionals. He stated that these occupations did not meet the criteria of an extended period of study. He also stated nurses were dependent on the medical profession and did not have autonomy.

Styles (1982) defined professionalism as a "commitment to excellence" in our work and created a new term, "professionhood." The attributes of this concept were:

1. A sense of social significance regarding nursing and ourselves;
2. Commitment to ultimacy in our work; and
3. Twin attitudes of collegiality and collectively. (p. 18)

Today, the most important and powerful concept in the belief system of nursing is professionalism (Gamer, 1979; Nazarey, 1987). Nursing leaders indicate that if nursing is to attain professional status in society, nurses must have the characteristics of professionalism in nursing (Miller, 1988).

In analyzing the literature related to professionalism, it is apparent that there is a commonality in the views of many authors. If nursing is to attain professional status, certain criteria must be met. These include:

1. An essential characteristic of professionalism is formal education in a university setting. Bixler and Bixler (1949) reported professional schools are commonly associated with universities. Nursing must continue to

prepare well educated professional nurse leaders (Gamer, 1979; Miller, 1985; Styles, 1982).

2. Scientific research is essential in a professional's education (Flexner, 1915). The professional nurse must seek to improve technical and interpersonal nursing skills through research/scholarly activities. Nursing leaders continue to emphasize university education and strong scientific background for professional nurses (Finnie, 1989; Miller, 1988).

3. A code of ethics is a primary requisite of professionalism and serves a variety of purposes. It is a means by which professional standards are established, maintained, and improved. It guides the conduct of its practitioners. The code of ethics is upheld and supported by peers who are in a position to judge the performance of their colleagues (Miller, 1985, 1988; Nazarey, 1985; Nolter & Spalding, 1976; Young, 1992).

4. "Self regulation and autonomy are also necessary for professionalism in nursing" (Miller, 1988, p. 20). Nursing must be independent from medicine and under the regulation of nurses. Measures for maintaining autonomy and independence include: (a) Schools of nursing should be independent of control by any other professional school and (b) methods for licensure and review boards, as well as recruitment and accreditation for education, must be

maintained by nursing (Bixler & Bixler, 1945; Gamer, 1979; Schrivner & Harris, 1984).

5. "The attribute or characteristic of a professional organization differentiates a profession from an occupation" (Miller, 1985, p. 26). Professional organizations involve formal and informal colleague groupings as a major source of ideas and judgments and may be the key to influence and autonomy (Miller, 1988; Schrivner & Harris, 1984).

6. Public needs have been intrinsic to all professions. Professionals maintain standards of care and keep client needs at the center of their focus. The consumer can expect quality, consistent care from a professional. Nursing has always known its skills would improve the client's quality of life (Bixler & Bixler, 1959; Gamer, 1984; Miller, 1988).

Sigma Theta Tau International is a nursing organization for professional nurses. Its founders believed that professional nurses should be prepared at the baccalaureate level. The generation of nursing knowledge through research, the scientifically based theoretical body of knowledge, and the role of nurse leaders in promoting these concepts have been valued since the conception of the organization in 1922.

CHAPTER 3

METHODOLOGY

Lo Biondo-Woods (1990) defines historical research as "the systematic compilation of data and the critical presentation, evaluation, and interpretation of facts, regarding people, events and occurrences of the past" (p. 212). "Historical research is the systematic collection and critical evaluation of data relating to past occurrences" (Polit & Hungler, 1994, p. 202). Historical designs involve looking into history and are fundamentally narrative (Lo Biondo-Woods & Haber, 1994; Woods-Catanzaro, 1988).

The purpose of historical research, like other types of research, is to discover new knowledge. It is also used to interpret the past, to explain the present, or to anticipate future events (Polit & Hungler, 1994).

Oral History

Oral history is a unique documentary form in which the "evidence originates in the act of oral face-to-face communication" (McMahan, 1989, p. 5). Oral history is a conversational narrative jointly created by the interviewer and the interviewee. This narrative contains an

interrelated set of structures that define it as an object of study (Grele, 1994).

Oral history is defined by Safier (1977) as a "technique of collecting information on recent events by interviewing knowledgeable people" (p. 3). It is a form of story telling or personal narratives that produces a certain way of looking at the world (McMahan, 1989).

"Oral traditions are centuries old" (Safier, 1976, p. 383). In 1948, historian Allan Nevins of Columbia University described interviews he conducted. From his work, the term oral history, as it is known today, evolved.

Oral histories are valuable because the interviewee has special knowledge about a subject. Throughout the interview, personal views and insight are provided.

Data Collection

Historical research methods were utilized for this study. The data utilized were all primary sources. A review and analysis of Executive Committee minutes, the newsletters, and induction programs Zeta Upsilon were completed. In addition, oral history interviews with past presidents, officers, and members who contributed to the chapter's growth were conducted. The specific subjects were past presidents of Zeta Upsilon from 1982-1992. Eight presidents were interviewed (two presidents served two-year terms).

The criterion used for selecting these subjects was to gain each president's insight into significant events that occurred during her term.

Historical sources of data are classified as being either primary or secondary. A primary source is first-hand information. Original documents, letters, diaries, films, eye witness accounts, records, and artifacts are examples of primary sources (Lo Biondo-Woods & Haber, 1994; Polit & Hungler, 1994). "Primary sources represent the most direct link with historical events or situations" (Polit & Hungler, 1994, p. 205). Whenever possible, primary sources should be used in historical research.

Secondary sources may be second- or third-hand accounts of a historical event. Lo Biondo-Woods and Haber (1994) state secondary sources "provide a view of the phenomenon from another's prospective" (p. 272). Text books or reference articles are examples of secondary sources. Secondary sources can also be events that are summarized or interpreted from primary source materials.

Instrumentation

An interview guide was developed to guide the oral history interviews of the presidents for this study. (See Appendix B for a copy of the interview questions). Each question was formulated to focus on a particular aspect of the president's educational background, motivation,

leadership style, goals, and objectives. Responses to these questions facilitated the interpretation of the findings of the study.

Organization of Data

The study was divided into one-year intervals, focusing on the president of Zeta Upsilon during time frames from 1982-1992. Biographical data, leadership styles, and goals of presidents, as well as chapter goals, were included. These data were then organized chronologically from 1982 to 1992 by year.

Analysis of Data

Historical evidence is usually subjected to two types of evaluation. External and internal criticism are utilized to determine validity and reliability. "External criticism is concerned with authenticity and genuineness of the data" (Polit & Hungler, 1994, p. 206). Such external criteria establish the validity of the data. Is the data what it seems to be? In evaluation of the handwriting of Florence Nightingale, for example, is the writing paper and ink representative of her particular era?

Internal criticism begins after external criticism of the data is complete and concerns the reliability of the information within the document. According to Polit and Hungler (1994), internal criticism is "the evaluation of

the worth of the evidence" (p. 206). The focus is on the content of the data, its accuracy and truth. Are the writer's views of the historical event unbiased?

Comparison of different individual accounts of the event must be completed to determine group agreement (Polit & Hungler, 1994).

Ethnography was utilized to facilitate the analysis of collected qualitative data. Using this approach, commonalities among the eight presidents was described. Content analysis was done on the minutes of the Executive Committee meetings and the Zeta Upsilon newsletters.

Descriptive statistics were also used to analyze quantitative data. This allows description and summarization of the data (Lo Biondo-Woods & Haber, 1994; Woods & Catanzaro, 1988). Ratios of undergraduate to graduate students, graduate students to community leaders, and male to female members in each presidential tenure, are examples of data that were included (Appendix C, Descriptive Statistics).

Synthesis of the Data

After evaluating the reliability and validity of the data, it must be pulled together and synthesized in order to answer the research questions. Care must be taken to consider the data without bias, not to over emphasize data that appears to answer the research questions nor to

disregard data that fails to answer the research questions (Polit & Hungler, 1994). Data in this study were synthesized by comparing each of the eight presidents, looking for commonalities as well as differences.

Interpretation of the Data

The research questions were answered through the analysis and interpretation of the data. Insight into the evolution of Zeta Upsilon, appreciation of who and what came before, and the importance of this chapter's contribution to nursing as a profession were attained by answering the research questions.

Oral history interviews and data obtained through review of archival material were analyzed to form a comprehensive perspective. This was accomplished by distinguishing facts from possibility or probability. According to Woods and Catanzaro (1988), when two corroborating primary sources agree as to what actually happened, this is a fact. Probability is established if only one primary source exists. The investigator concludes the event probably occurred. Possibility occurs when only secondary sources are available, but these sources suggest the data is accurate.

Finally, as in other types of research, a narrative description of the findings are presented. These findings are the result of combining the data from both the oral

history interviews and the review of archival materials to present a comprehensive description of the first ten years of Zeta Upsilon.

Rights of Human Subjects

Before data collection began, a proposal was submitted to the Montana State University College of Nursing Human Subjects Review Committee for approval (see Appendix D for a copy of approval form). A copy of the oral history questions to be asked, the informed consent form, and cover letter for the participants were all included with the proposal. (See Appendix E for copies of the cover letter and informed consent form.) Permission to use the chapter's archives was requested and approval obtained from the Zeta Upsilon Executive Committee. (Copies of correspondence are included in Appendix E.)

CHAPTER 4

RESULTS

The purpose of this study was to provide an overview of the development, growth, and evolution of Zeta Upsilon (ZU), the Montana Statewide Chapter-at-Large of Sigma Theta Tau International Honor Society for Nursing from 1982 through 1992. A variety of methods were used to collect data for the study. Oral history interviews were conducted with all of the eight presidents of Zeta Upsilon during this ten-year period. A review and analysis of minutes of Executive Committee meetings and newsletters from 1982 through 1992 were completed using ethnography and content analysis.

The Montana Honor Society, 1979-1982

In 1974 Milly Gutkoski, a Bozeman faculty member of the Montana State University School of Nursing (now College of Nursing), served on a committee interviewing candidates for a new director. One of the candidates asked if the School of Nursing had a chapter of Sigma Theta Tau. A member of the committee replied that the School of Nursing had a chapter of Alpha Tau Delta, a national nursing sorority. The candidate's response implied that any

quality school of nursing had a chapter of Sigma Theta Tau (M. Gutkoski, personal communication, June 7, 1996).

Professor Gutkoski stated, "At that time, I mentally made a comment, 'We will have a chapter of Sigma Theta Tau.' It became my personal goal, which took eight years, but it was accomplished in 1982" (M. Gutkoski, personal communication, June 7, 1996).

When Dr. Anna M. Shannon became the Director (the title was changed to Dean during her tenure) of the School of Nursing in 1977, she suggested a new faculty organizational structure. There were multiple committees within the structure, one of which was the Student Affairs Committee. Since the parent organization of Sigma Theta Tau (STT) was started by students, all STT information was turned over to the Student Affairs Committee to explore the possibility of organizing a chapter at MSU. For several years no progress was made toward this goal (M. Gutkoski, personal communication, June 7, 1996).

Early in 1979, the Research Committee of the Montana State University School of Nursing discussed the possibility of applying for membership in Sigma Theta Tau, the National Honor Society of Nursing. Dr. Ruth Ludemann, chairperson of the Research Committee, sent for information from the national office.

In order to determine support for their proposal, a questionnaire was sent by the Research Committee to the

School of Nursing faculty. The faculty strongly supported the organization of an honor society and suggested the inclusion of the Carroll College Department of Nursing. This was the first time an honor society had applied to become a chapter of Sigma Theta Tau as a statewide chapter. Upon approval by the MSU Nursing Council, the Research Committee continued to function as a steering committee for the honor society (Montana Honor Society of Nursing [MHSON], January 1981).

In June of 1979, officers were elected, and Maureen Niland, a consultant from STT, was invited to Bozeman. In September 1979, she met with MHSON officers, Ruth Ludemann, president; Therese Sullivan, 1st vice president; Milly Gutkoski, 2nd vice president; Harriet Anderson, secretary; and Norma Tigerman, treasurer, and made suggestions for applying for charter to STT. STT requires an honor society to have an active organization for one year before applying for national membership (MHSON, January 1981).

The officers worked diligently. The emphasis of their work was placed on writing bylaws, developing criteria for membership, and contacting alumni and students to become members. Several officers also attended a Sigma Theta Tau convention in the fall of 1979 to obtain information about STT and to attend research presentations (MHSON, January 1981).

Letters were sent to alumni of the MSU School of Nursing and the Carroll College Department of Nursing early in 1980. They were invited to join the MHSO if their grade point average was 3.0 or higher on a 4.0 scale. "The national bylaws allow membership as alumni only during this initial period" (MHSO, January 1981, p. 2). After the first year, applicants were recommended for membership as community leaders or as graduate or undergraduate students (MHSO, January 1981).

The first formal induction of the honor society was held at Carroll College in May of 1980. In June of 1980 the second induction was held at Montana State University. At this time membership was nearly 250 (MHSO, January 1981).

In June of 1980 Milly Gutkoski was elected to succeed Ruth Ludemann as president of MHSO. Barbara Gohsman was elected to succeed Norma Tigerman as treasurer. Other officers for 1980-1981 were Therese Sullivan, 1st vice president; Bernice Bjertness, 2nd vice president; and Harriett Anderson, secretary (MHSO, January 1981).

STT criteria required application for charter to be made during even years (1980) and to be submitted prior to October 1. The application consisted of a detailed report concerning the schools of nursing, faculty qualifications and accomplishments, letters of support from nursing and institution administrators, MHSO bylaws, and catalogs from

both institutions. The application was completed in a timely manner, and on December 26, 1980, a letter was received from Rebecca Markel, 2nd vice president of STT, informing the MHSO that written application had been accepted. It was also noted that Dr. Carol Lindeman would be contacting the MHSO to arrange a date for a site visit. This visit was to include both Carroll College and MSU campuses (MHSO, January 1981).

After the evaluator visited, a report was prepared for the STT National Council. The decision was made in July 1981; the Council had approved the application unanimously, and it was presented to the STT National Convention in November of 1981. The necessary three-fourths vote was obtained and the MHSO became the 162nd chapter of STT. All members of the honor society were eligible for membership. A formal induction ceremony was to be held in Bozeman in June 1982 (MHSO, January 1981).

Viewpoint, the newsletter of the Research Committee at MSU, kept members abreast of the development of the MHSO. It was published several times each year and informed members of MHSO functions, meeting dates, and activities (MHSO, January 1981).

In addition to the task of organizing the honor society, the Executive Committee encouraged nurses throughout the state to be involved in research and other scholarly activities. Abstracts from research projects

were published in each issue of Viewpoint. Several workshops and programs were presented, shown in Table 1.

Table 1. Workshops and programs presented by the Montana Honor Society of Nursing.

Date	Presenter	Subject
September, 1979 (MHSO Annual Report, 1979-1980)	Jacqueline Taylor, PhD, RN	Ethnographic Description and Design
September, 1979 (MHSO Annual Report, 1979-1980)	Anna Shannon, DNSc, RN	Experimental Design
September, 1979 (MHSO Annual Report, 1979-1980)	Ruth Ludemann, PhD, RN	Survey Design
February 4, 1980 (MHSO Annual Report, 1979-1980)	Barbara Gill, RN, MN	Animal Models in Nursing Research
April 28, 1980 (MHSO Annual Report, 1979-1980)	Carol Lindeman, PhD, RN	An Inductive Approach to Theory Development
September 17, 1980 (MHSO, August 1980)	Pat Larson, MN, RN	Nursing Care Behaviors Perceived Important by Nurses and Patients
February 19, 1981 (MHSO, January 1981)	Cathy Caniparoli, MN, RN	Comparison of the Effects of Using the Roy Adaption Nursing Theory to Teach Lamaze Classes with Traditional Teaching Methods
June 12, 1981 (MHSO, May 1981)	MSU Faculty	Equality in Nursing
November 23, 1981 (MHSO, September 1981)	Patricia McAtee, PhD, RN	Career Networking for Nurses
February 19, 1982 (MHSO Executive Committee Minutes, 12-17-81)	Barbara Gill, PhD, RN	Clinical Nursing Research

