

New and old professional groups in health care: formal re-definitions of the nursing profession and the internal qualities of professionals

Aurelija Blaževičienė¹, Aurelija Novelskaitė²

¹Department of Nursing and Care, Kaunas University of Medicine,

²Institute for Social Research, Vilnius, Lithuania

Key words: nurses' generations; instrumental values; terminal values; job importance.

Summary. The aim of this study to identify dominant personal and professional values of current nursing professionals.

The study was conducted among professional nurses who were working in 5 (out of 10) regional hospitals in Lithuania. According to rules of multi-stage (clustered and, following it, random) sampling, 1000 questionnaires were distributed, and 872 of them were returned filled out (response rate, 87.2%).

Results. The statistically significant differences were determined while comparing the ranking of values of comfortable life, a world beauty, pleasure, and true friendship. In ranking the value of comfortable life, statistically significant differences were revealed comparing the second and fourth cohorts. While analyzing the evaluation of the instrumental values and their changes, some statistically significant differences within cohorts were determined. It was revealed that good salary was most related to professional activity, followed by social security, a chance of self-realization, and others. Career opportunities and innovative initiatives were the least important factors related to nursing work. The approach to professional activity differs depending on the generation.

Conclusion. Our study demonstrates that a result of numerous formal re-definitions since the very beginning of 1990s, nursing has been developing as an independent profession in Lithuania very rapidly. However, notwithstanding expanded responsibilities of nurses and increased requirements for the professionals, there are no signs that the profession would be more empowered in the society and/or obtained higher status among medical professionals. In addition, in terms of internal qualities of the professionals, terminal, instrumental, and work-related values, which possess current Lithuanian nurses, are rather similar and very tenuously differ among generations.

Introduction

Roots of formation of nursing as a profession in Lithuania might be dated as early as 1895 when courses for sisters of mercy were established in Vilnius by the Lithuanian Red Cross Organization (1). During this period, all sisters of mercy who had certificates issued by Lithuanian, Russian, or other national Red Cross Organizations and who wished to work at Lithuanian health care organizations had to be registered at the Highest Lithuanian Red Cross Council and had to have corresponding licenses. Later on, at the beginning of 1920, three-month courses for sisters of mercy were established at the Military Hospital; then the requirements for entering the courses were tightened. For example, there were 17 requirements for women who wanted to enter the courses; prerequisites

such as Lithuanian language knowledge, at least 2-year gymnasium education, and honor certificate were among them (1).

Until 1932, the courses developed into the school of sisters of mercy, where training lasted for two years (from 1924), and where women applicants had to have 6-year gymnasium education before entering the school. Strict requirements for entrants and long period of training might be explained by words of the head of the School, Pranas Mažylis, who claimed that "sisters [of mercy] have to know all work at the hospital; in addition, they have to do rooms, to make patient's bed, and to provide patients with various services" (1).

It might be interesting to note that the profession was highly segregated by gender during the early

Correspondence to A. Blaževičienė, Department of Nursing and Care, Kaunas University of Medicine, Eivenių 2, 50009 Kaunas, Lithuania. E-mail: blazeviciene@yahoo.com

Adresas susirašinėti: A. Blaževičienė, KMU Slaugos ir rūpybos katedra, Eivenių 2, 50009 Kaunas
El. paštas: blazeviciene@yahoo.com

period of its institutionalization. That is, the establishment of the Nursing Department at the Ministry of National Defense of the Republic of Lithuania at the end of 1918 (04-12-1918) laid foundation for the development of Lithuanian military medicine, and school of physicians' assistants-medical sergeants was established at the Military hospital in 1919. In 1920, the higher courses of military nursing were established for training of sergeants. Indeed, participants of the courses were men exclusively (2).

The soviet era (1940–1990) might be defined as a stagnation period in the development of the profession. The only event – reformation of above-mentioned courses into Kaunas School of Medical Sisters – occurred during this period. It might be interesting to note that the title of the School clearly (grammatically) denoted that the school is for women; thus, the profession obtained exclusively feminine face (which remains almost unchanged still, by the way) (1). Despite, in general, nurses were just a scattered group of subordinate workers who were accomplishing simple tasks under strict control of highly educated physicians in Lithuania during the period.

Finally, restoration of Lithuanian Independence (since 1990) has brought a number of significant changes into the profession. For example, in 1990, the Faculty of Medical Sisters was established at Kaunas University of Medicine (KMU) (the Faculty was renamed to the Faculty of Nursing in 1992), and master and doctor level studies of clinical nursing were established at KMU in the late 1990s (1, 3). Thus, the profession was legalized as worth of higher education and even as a scientific one. In addition, the number of formal (re)definitions of the profession was introduced into national legal system during the last 18 years (e.g. the Law of the Republic of Lithuania on Health Care System in 1994, the Law on Nursing Practice in 2001, the order of the Minister of Health Care of the Republic of Lithuania concerning Validation of Rules of Nursing Service Certification in 2007). Moreover, at the beginning of the 21st century, the professional group consolidated, and voluntary organization of the professionals (i.e. Organization of Lithuanian Nursing Professionals, 2004) was established.

Obviously, numerous and rapid alterations of the formal (re)definition of nursing profession in the last 15 years is a direct outcome of Lithuanian accession to world community after the borders of Soviet Union were opened and, especially, membership in the European Union (since 2004). It is logical to expect that the profession will obtain very similar features as these, which the professionals possess in other

European countries in shorter or longer period. However, at this period, the profession is acquiring a new status not only in Lithuanian society in general, but also among health care personnel. In addition, process of segregation inside the profession is increasing also. That is the professionals become highly diversified group in terms of their specialization and professionalization, experience and education, and, especially, career possibilities. The last, indeed, directly associates with generational gaps among nurses, which have always been a part of our world, bringing with them the potential for flash points or areas of disagreement (4, 5).

Considering the context of altering demands for the nursing profession as well as increasing diversity among the professional nurses, in this paper we strive to identify dominant personal and professional values of current nursing professionals.

Data and methods

Study population and data collection

In November 2006, a representative questionnaire survey was conducted among professional nurses who were working in 5 (out of 10) regional hospitals in Lithuania. According to rules of multi-stage (clustered and, following it, random) sampling, 1000 questionnaires were distributed, and 872 of them were returned filled out (response rate, 87.2%). Three sets of values were presented for respondents' evaluation in the questionnaire. Twelve terminal values and 12 instrumental values according to Rokeach (6) were evaluated on a five-point Likert's scale, and work-related values (the European Values Survey) were ranked in order of their importance as of guiding principle in respondents' lives. For the analysis, all respondents were divided into four groups according to Rokeach's definition of age cohorts and based on a concrete year when a respondent was hired for the first time for nursing position. Thus, the first cohort (the Veterans generation) included the respondents who started to work as nurses in 1960–1975, the second (Baby Boomers) and the third (generation X) cohorts started in professional nursing in 1976–1985 and 1986–1995, respectively. The youngest – the fourth cohort (the Nexters' generation) – entered the profession as professional nurses in 1996 and later.

Data analysis

The survey data were processed using the SPSS statistical software package (version 13). Rank mean values and ranks were used for the determination of value priorities. The relationship between two independent variables was assessed by calculating Kendall's

rank correlation coefficients, taking into consideration the value of the correlation ratio and its statistical significance (reliability notation: $P < 0.05$ means statistically significant, and $P < 0.01$, highly significant).

Results

While conducting the study, we have adopted the Rokeach's list of terminal and instrumental values (6). Table 1 presents respondents' evaluation of terminal values. The statistically significant differences were determined while comparing the ranking of values of comfortable life, a world beauty, pleasure, and true friendship. In ranking the value of comfortable life, statistically significant differences were revealed comparing the second and fourth cohorts.

The Baby Boomers generation rated comfortable life as more important value comparing to the Nexters generation.

The value of world beauty was also evaluated differently: this value was more important for the Veterans generation as compared to the Nexters generation, showing a statistically significant difference. The evaluations between these cohorts were also

statistically different regarding the values of true friendship. It was also determined that the importance of true friendship was increasing with decreasing age of respondents. The value of pleasure was more important for the generation X and respectively less important for the Nexters generation. Overall of all generations, the values of family security, tranquility, and a sense of accomplishment were most valuable within all cohorts (Table 1).

While analyzing the evaluation of the instrumental values and their changes, some statistically important differences within cohorts were determined. Firstly, the values of being ambitious were recognized as more important within the fourth and less important in the third cohort, while cheerful was evaluated as less important within all cohorts except the second one (Baby Boomers generation). The honesty as most valuable, and then followed by capability and responsibility, was recognized within the three cohorts, except generation X cohort. Other ranks of values across the cohorts are represented in Table 2.

We also analyzed what factors (according to respondents) were mostly related to nursing job as

Table 1. Rokeach's terminal values in different cohorts

| Terminal value | Veterans generation (cohort 1) | | Baby Boomers generation (cohort 2) | | Generation X (cohort 3) | | Nexters generation (cohort 4) | | P |
|--|--------------------------------|------------|------------------------------------|------------|-------------------------|------------|-------------------------------|------------|-------|
| | The mean of rank | Rank order | The mean of rank | Rank order | The mean of rank | Rank order | The mean of rank | Rank order | |
| Comfortable life (a prosperous life) | 4.84 | 4 | 4.45* | 4 | 4.66 | 4 | 5.39 | 5 | <0.05 |
| A sense of accomplishment (a lasting contribution) | 4.03 | 3 | 4.43 | 3 | 4.59 | 3 | 4.50 | 3 | >0.05 |
| Tranquility | 3.97 | 2 | 4.33 | 2 | 1.39 | 1 | 4.49 | 2 | >0.05 |
| A world beauty (beauty of nature and the arts) | 6.81* | 8 | 7.47 | 8 | 7.39 | 9 | 7.70 | 9 | <0.05 |
| Equality (brotherhood, equal opportunity for all) | 7.54 | 9 | 7.77 | 10 | 8.03 | 10 | 7.96 | 10 | >0.05 |
| Family security (taking care of loved ones) | 2.50 | 1 | 2.58 | 1 | 2.86 | 2 | 2.63 | 1 | >0.05 |
| Freedom (independence, free choice) | 5.97 | 6 | 6.13 | 6 | 6.20 | 6 | 6.07 | 6 | >0.05 |
| Inner harmony (freedom from inner conflict) | 5.35 | 5 | 4.98 | 5 | 4.94 | 5 | 4.92 | 4 | >0.05 |
| Pleasure (an enjoyable leisurely life) | 8.82 | 11 | 8.55 | 11 | 8.36* | 11 | 8.89 | 11 | <0.05 |
| Social recognition (respect, admiration) | 6.50 | 7 | 6.74 | 7 | 6.76 | 7 | 6.71 | 8 | >0.05 |
| True friendship (close companionship) | 8.14* | 10 | 7.73* | 9 | 7.22* | 8 | 6.44 | 7 | <0.05 |

* $P < 0.05$ as compared to the Nexters generation (cohort 4).

Table 2. Rokeach's instrumental values in different cohorts

| Instrumental value | Veterans generation (cohort 1) | | Baby Boomers generation (cohort 2) | | Generation X (cohort 3) | | Nexters generation (cohort 4) | | P |
|---|--------------------------------|------------|------------------------------------|------------|-------------------------|------------|-------------------------------|------------|-------|
| | The mean of rank | Rank order | The mean of rank | Rank order | The mean of rank | Rank order | The mean of rank | Rank order | |
| Ambitious (hard-working, aspiring) | 5.88 | 4 | 5.82* | 4 | 5.55 | 4 | 4.84 | 4 | <0.05 |
| Capable (competent, effective) | 4.01 | 3 | 3.86 | 2 | 3.70 | 1 | 3.79 | 2 | >0.05 |
| Cheerful (light-hearted, joyful) | 8.78* | 11 | 7.57* | 9 | 7.82 | 10 | 8.56 | 11 | <0.05 |
| Courageous (standing up for your beliefs) | 5.97 | 5 | 5.99 | 5 | 5.57 | 5 | 5.90 | 6 | >0.05 |
| Helpful (working for the welfare of others) | 6.47 | 8 | 6.60 | 8 | 7.03 | 8 | 7.02 | 8 | >0.05 |
| Honest (sincere, truthful) | 3.18 | 1 | 3.28 | 1 | 3.75 | 2 | 3.70 | 1 | >0.05 |
| Imaginative (daring, creative) | 6.01 | 6 | 6.41 | 7 | 6.12 | 7 | 6.60 | 7 | >0.05 |
| Logical (consistent, rational) | 6.29 | 7 | 6.09 | 6 | 5.94 | 6 | 5.64 | 5 | >0.05 |
| Loving (affectionate, tender) | 7.12 | 9 | 7.78 | 10 | 7.81 | 9 | 7.88 | 9 | >0.05 |
| Obedient (dutiful, respectful) | 7.49 | 10 | 8.13 | 11 | 8.09 | 11 | 8.01 | 10 | >0.05 |
| Responsible (dependable, reliable) | 3.61 | 2 | 3.92 | 3 | 4.18 | 3 | 3.88 | 3 | >0.05 |

* $P < 0.05$ as compared to the Nexters generation.

Table 3. Factors related to the job importance

| Factor | Rank order | The mean of rank | 95% CI |
|---------------------------------------|------------|------------------|-----------|
| Good salary | 1* | 4.60 | 4.56–4.64 |
| Social security | 2* | 4.52 | 4.48–4.55 |
| Respectability of profession | 7* | 3.97 | 3.91–4.02 |
| Sustainable working hours | 5* | 4.22 | 4.17–4.27 |
| Opportunity for innovative initiative | 9 | 3.70 | 3.64–3.76 |
| Long vacations | 6 | 4.00 | 3.94–4.05 |
| Career opportunities | 10 | 3.49 | 3.42–3.56 |
| The complexity of job | 8* | 3.76 | 3.69–3.82 |
| The interesting job | 4* | 4.36 | 4.32–4.39 |
| Job to relevant abilities | 3* | 4.37 | 4.31–4.42 |

* $P < 0.05$ as compared to lower level of rank.

important. It was showed that good salary was the most related to professional activity followed by social security, a chance of self-realization, and others (Table 3). Career opportunities and innovative initiatives were the least important factors related to nursing work.

The approach to professional activity differs depending on the generation. Statistically significant differences are presented in Fig.

Discussion

Until the 1950s, there were no male nurses based on the excluding formality that one of the formal entrance requirements was that the applicant should be a woman. This requirement disappeared in the post-war period (3, 7). Despite this formal acceptance of men, the occupation was still regarded as a decidedly female profession as the attitude was that the potential for care naturally belonged to women. Thus the entry

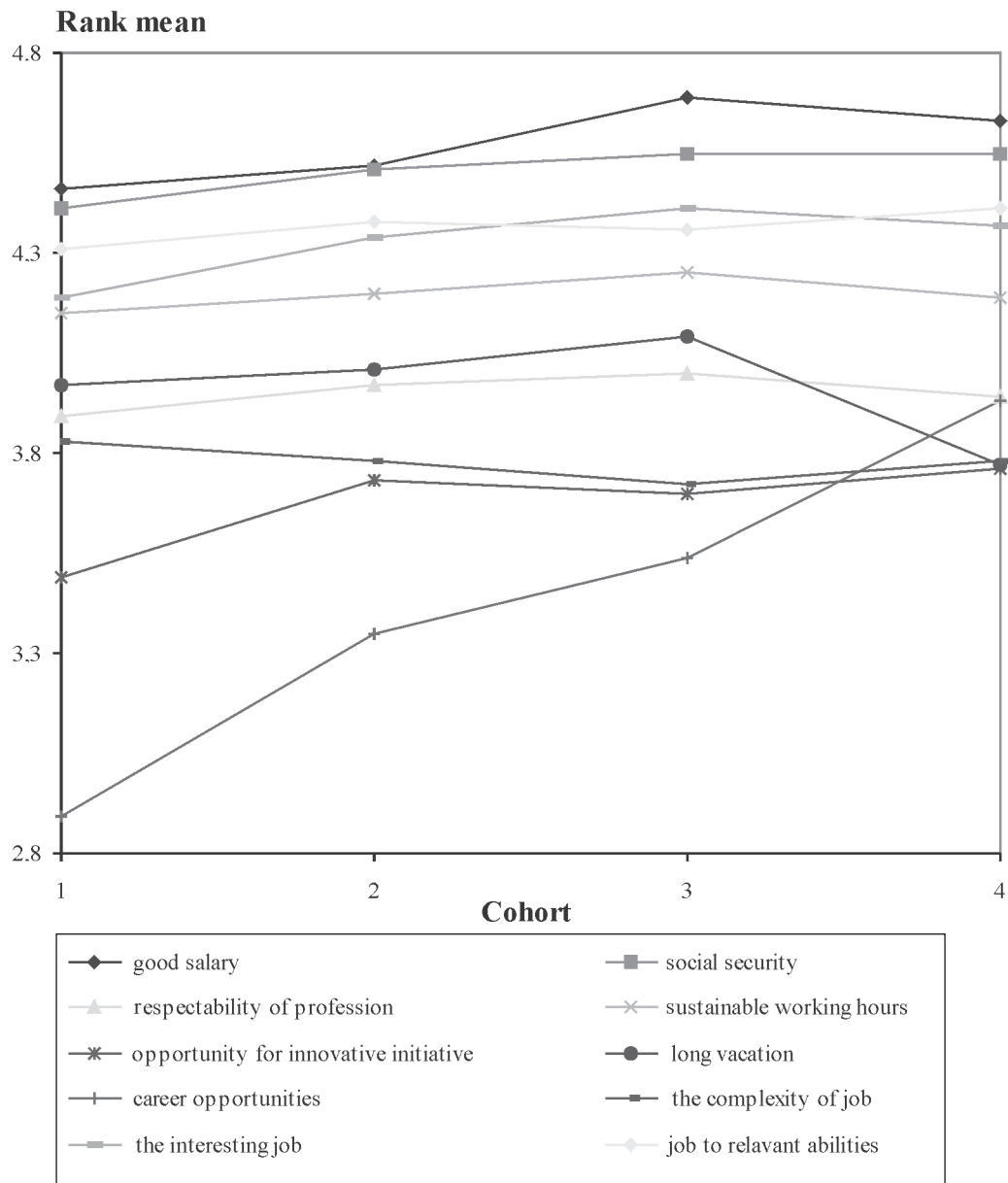


Fig. Variations of mean rank of work-related values by cohort

of men into the profession was modest, and between 1967 and 2004, the increase was a mere 2.8% points (from 0% to 3.2%), although the increase in absolute numbers from about 20 000 to 74 000 was observed (DSR membership statistics). This sluggishness is to a high degree due to an entrenched cultural view of the occupation as female (gender labeled) (7, 8). Despite the fact that the following quotation from consultant Holger Nielsen dates from the middle of the 20th century, it illustrates a gendered view of the nursing profession that can still be traced in the present day's stereotyped perception of the profession (7).

The first thing, despite establishment of the profession – nursing – dated as early as 1895 in Lithuania, actually, the development of the profession started only after 1990. Thus, it would be logical to relate the recent development of nursing with the entrance of Lithuania into the European Union and enlargement of Europe in general.

The human being is continuously searching for the ground of his/her own life, particularly in the current rapidly changing world. We all are to question (comprehensively or not) on our own identity, purposes of our existence and priorities – what to choose. Accordingly, the inherent values of each individual as well

as their changes start to be the subject of scientific inquiry. The new trend of transformation of values in Western societies is being recognized: people are getting less concerned with material well-being and physical security and more engaged on the inherent (or postmaterial) values such as liberty, self-realization, individuality, tolerance, or even participation in public decision-making. After the collapse of communism, the opportunity to verify the hypothesis – whether postmaterialism is purely related to free-market and democracy or it is more universal phenomena – was released within postcommunist countries and appeared to be of interest for scientific research (9–13).

The survey data demonstrate that the family security is the most important terminal value for Lithuanian nurses. Tranquility, sense of accomplishment, comfortable life, and inner harmony are almost two times less important. Thus, the values, which are associated with personal well-being, appear to be in the next places after nurse's (woman's) care about her family (i.e. in the second-fifth places). However, on the other hand, such distribution suggests that Lithuanian nurses are rather egocentric, as the personal life-oriented values come first before other values, which might be treated as relatively more social. Not surprisingly for post-Soviet society, where democracy has only very young roots, traditional democratic value – freedom – appears to be only in the sixth place; however, the other value – equality – is only in the 10th place. It is believed that this value might be associated with formal soviet ideology of “soviet people's equality,” and the result denotes resistance to it. Finally, it is quite interesting in recent context of consumer society that such hedonistic values as a world beauty and a pleasure appear to be in the last places (i.e. on the ninth and the eleventh, respectively). The possible interpretation for such ratings might be seen in specifics of the nurses' work per se (i.e. actually, she performs “dirty worker's” role most frequently). As our data demonstrate, three instrumental values appear to be more important than all other, which were presented for respondents for ranking. These are to be honest, capable, and responsible. In general, such finding suggests that Lithuanian nurses are oriented toward fairness. However, on the other hand, the values also define fabulous professional. Thus, we can presuppose that Lithuanian nurses are highly oriented toward professionalism. Furthermore, interestingly, career-related and traditionally masculine instrumental values (such as ambition, courage, and logics) appear right after these professional accomplishment-defining values, but traditional feminine values (such as

helpful, loving, cheerful, obedient), which logically should be associated with such feminine profession as nursing, appear to be in lower positions. Unfortunately, here we just can presuppose that the order of instrumental values is an outcome of recent formal re-definitions of the profession. However, because of limited data, we are not able to check this hypothesis.

Our data demonstrate that family security and some other egocentric values are the dominant terminal values among currently working Lithuanian nurses; social and democratic values are left in the lower places. Indeed, here it is only a guess, but we suggest that such ranking of the values is related to specifics of post-Soviet society. Dominant Lithuanian nurses' instrumental values, as means of achievement of the terminal ones, denote collections of “fabulous” professional's features (i.e. honest, capable, and responsible) and rather masculine characteristics of career-oriented person (i.e. ambition, courage, logic). We think that the result denotes recent situation of the profession – continuous formal re-definitions of the profession and increasing formalization of professional requirements. Finally, despite different characteristics, separate generations of nurses possess almost the same values. There are only some more evident differences. For example, inner harmony is more important for older nurses who belong to the Veterans generation and are at very end of their professional activity path; tranquility is more crucial value for the generation X who are somewhere in between development of professional career and maintenance of the family; comfortable life is more tempting value for the Nexters, who grew up in altering society and some part of their socialization was influenced by the formation of consumer society in Lithuania.

Today's nursing workforce is made up of staff and nursing leaders from four different generational cohorts. Generational diversity, including workforce differences in attitudes, beliefs, work habits, and expectations, has proven to be challenging for nursing leaders. Generational gaps have always been a part of our world, bringing with them the potential for flash points or areas of disagreement (14–16). Today's nursing workforce presents unique leadership challenges as staff and nursing leaders from four generations representing different attitudes, beliefs, work habits, and experiences work together in nursing teams (17). Job values influence work behavior with implications for job performance, commitment, and tenure. Early choices of a young worker can have importance consequences for their life trajectories (18, 19).

Analysis of the nurses' work-related values

demonstrates that good salary is the most important attraction in their work. This finding, indeed, denotes economically instable situation in the country on the one hand; on the other hand, the finding suggests plausible explanation about the motivation for dominant instrumental values. That is, insecure nurses' position in recent labor market forces them to demonstrate only the best professional qualities and to strive to obtain status in the field of professional activity. Furthermore, earlier described masculine feature-embodiment values are of less importance for the younger generations (i.e. Nexters and generation X). This feature might be related to altering gender roles in the society where woman's ambition and courage are obtaining status of rather typical feature. Finally, obviously, long vacations are not such important work-related issue for career-oriented Nexters as for any other older generations.

Conclusions

The paper was aimed to present internal features of newly (re)established nursing profession in Lithua-

nia in the context of both rapidly changing formal definitions and increasing inner diversification of the profession. Firstly, our study demonstrates that as a result of numerous formal re-definitions since the very beginning of the 1990s, nursing has been developing as an independent profession in Lithuania very rapidly. However, notwithstanding expanded responsibilities of nurses and increased requirements for the professionals, there are no signs that the profession would be more empowered in the society and/or obtained higher status among medical professionals.

Secondly, in terms of internal qualities of the professionals, terminal, instrumental, and work-related values that possess current Lithuanian nurses are rather similar and very tenuously differ among generations. Based on our data, we can conclude that the professionals emphasize rather traditional values (i.e. family, good salary). However, despite the professionals may be defined as rather homogeneous group (indeed, in terms of dominant values among different cohorts), there are some signs that its members become more ambitious and career-oriented in general.

Naujosios ir senosios sveikatos priežiūros profesionalai: slaugos profesijos įteisinimas ir kokybiniai pokyčiai

Aurelija Blaževičienė¹, Aurelija Novelskaitė²

¹Kauno medicinos universiteto Slaugos ir rūpybos katedra, ²Socialinių tyrimų institutas, Vilnius

Raktažodžiai: slaugytojų generacijos, instrumentinės vertybės, terminalinės vertybės, profesijos reikšmingumas.

Santrauka. *Tyrimo tikslas* – slaugytojų vertybių pokyčių įvertinimas keturiose generacijose. Tyrimas buvo atliekamas penkiose Lietuvos apskričių ligoninėse, naudojamas M. Rokeach instrumentinių ir terminalinių vertybių klausimynas. Respondentės buvo suskirstytos į keturias generacijas, priklausomai nuo darbo pradžios: veteranių (darbo pradžia – 1960–1975 m.); kūdikių bumo (1976–1985 m.); X generacija (1986–1995 m.) ir būsimojų slaugytojų generacija, pradėjusių profesinę karjerą 1996 m. ir vėliau.

Rezultatai. Tyrimo metu nustatyta reikšmingų skirtumų tarp generacijų vertinant instrumentines ir terminalines vertybes. Taip pat rastas statistiškai reikšmingas ryšys vertinant veiksnius, susijusius su darbo reikšmingumu. Reikšmingiausia darbo vertybe respondentės nurodė gerą atlyginimą.

Išvados. Tyrimas parodė, kad vertybės, susijusios su gyvenimo tikslais ir tikslų pasiekimu, tarp generacijų skiriasi nežymiai ir kinta iš lėto.

References

1. The Lithuanian Red Cross: history (in Lithuanian). Available from: URL: <http://www.redcross.lt/340.html>
2. Dr. Jono Basanavičiaus karo medicinos tarnybos ištakos. Available from: URL: <http://www.kam.lt/index.php/lt/146156/>
3. Spitzer A, Perrenoud B. Reforms in nursing education across Western Europe: implementation processes and current status. *J Prof Nurs* 2006;22(3):162-71.
4. Greene J. What nurses want. Different generations. Different expectations. *Hosp Health Netw* 2005;79(3):34-8, 40-2, 2.
5. Zemke R, Raines C, Filipczak B. Generations at work: managing the clash of Veterans, Boomers, Xers, and Nexters in your office. New York: Amacon; 2000.
6. Rokeach M. The nature of human values. New York; 1973.
7. Warming K. Men working women's professions – a sociological interview study focusing on redefinitions of work functions and masculinisation strategies in four gender labelled professions. The Danish Research Centre on Gender Equality.

- Roskilde University; 2005.
8. BscEcon CM, Fleming C. The professional imagination: narrative and the symbolic boundaries between medicine and nursing. *J Adv Nurs* 2008;25(5):1094-100.
 9. Schwartz SH. Extending the cross-cultural validity of the theory of basic human values with a different method of measurement. *J Cross Cult Psych* 2001;32(5):542-91.
 10. Savicka A. Postmodernism and globalization: the specify of value changing the post-communist. Miliiau; 2004.
 11. Sarros CJ, Santora JC. Personal values and executive leadership: global comparisons and practical implications. Academy of Business and Administrative Sciences International Conference, Quebec City, Canada; 12-14 July 2001.
 12. Kovner CT, Brewer CS, Cheng Y, Djukic M. Work attitudes of older RNs. *Polic Polit Nurs Pract* 2007;8(2):107-19.
 13. Stoetzel J. *Les valeurs du temps présents*. Paris: PUF; 1983.
 14. Sherman RO. Leading a multigenerational nursing workforce: issues, challenges and strategies. *Online J Issues Nurs* 2006;11(2):3.
 15. Cordeniz JA. Recruitment, retention, and management of generation X: a focus on nursing professionals. *J Health Manag* 2002;47(4):237-49.
 16. Smola KW, Sutton DCh. Generational differences: revisiting generational work values for the new millennium. *J Organiz Behav* 2002;23:363-82.
 17. Blaževičienė A, Jakušovaitė I. Value priorities and their relations with quality of life in the Baby Boomer generation of Lithuanian nurses: a cross-sectional survey. *BMC Nursing* 2007;6:10.
 18. Johnson KM. Job values in the young adult transition: change and stability with age. *Social Psychology Quarterly* 2001; 64(4):297-317.
 19. Johnson MK. Change in job values during the transition to adulthood. *Work Occup* 2001;28(3):315-45.

Received 2 April 2010, accepted 3 May 2010

Straipsnis gautas 2010 04 02, priimtas 2010 05 03