FACULTY BURNOUT AND DISEMPOWERMENT IN NURSE EDUCATORS

AND THEIR RELATIONSHIP TO CREATIVITY IN TEACHING

by

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Abstract

In an effort to ensure creativity and critical thinking are woven into the nursing curriculum and taught on a professional level, a healthy work environment, void of burnout and feelings of disempowerment, must be present to support faculty and inspire creative thinking and learning. Associate degree faculty who were members of the National Association of Associate Degree Nurses were studied during an exploration of a presumed association between creativity and the perceived feelings of burnout and disempowerment experienced in the work environment. This descriptive, quantitative research surveyed faculty aged 20-51+ years. The majority of participants held a master's degree and considered themselves instructors or professors in their institution. Utilizing SPSS, a significant relationship (personal burnout $p = .004$; work burnout $p = .003$; student burnout $p = .000$) was found between burnout and the creativity of associate degree faculty. There was no relationship ($p = .109$) between disempowerment and creativity. Creativity is the element in nursing curriculums that allow nurse educators the flexibility to incorporate various learning activities to meet individual learning needs. When the nurse educator lacks the ability to be a critical, creative, and reflective thinker, neglect of the nursing student's skills ensues.

Dedication

This dissertation is dedicated to my husband, Matt, and my mentor, Dr. Valerie Coxon. Without the support and encouragement these two special people have given me through my dissertation, I may not have completed this portion of my PhD in a timely manner.

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Acknowledgment of supportive people throughout my dissertation must start with my husband, Matt. He has encouraged, motivated, and shown me such patience in my long hours of writing, that I feel he has lived it with me. With his love beside me, I am a better person and have grown to appreciate the spare moments between writing and I look forward to many more in the future.

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CHAPTER 1. INTRODUCTION

Introduction to the Problem

Burnout and disempowerment are two elements that may hinder creativity and critical thinking in nurse educators. Johnson (2009) found organizational culture was a statistically significant contributing factor to feelings of disempowerment in nursing faculty. Manojlovich (2007) stated nurses who feel empowered are highly motivated and able to motivate others through empowerment. Conversely, disempowerment leads to feelings of frustration or failure in one's self. Therefore, creativity and critical thinking are directly influenced by perceived feelings of burnout and disempowerment.

Critical thinking is a necessity in the nursing profession (Romeo, 2010). The nursing profession has evolved into a complex occupation that requires nurses to be more than taskers. Critical thinkers are able to think beyond the information presented to analyze and evaluate data and to determine their next actions. Nurses who use creativity in their critical thinking are able to create individualized plans of care for patients. Nurses must be problem solvers, decision makers, and work autonomously but in collaboration with other health care members. The nurse of today must use critical thinking and creativity throughout her day to ensure safe and effective patient care.

Nursing education strives to teach and develop the critical thinking abilities of students through the nursing process. However, research indicated nurse educators are not significantly improving critical thinking abilities in students despite being mandated by the National League of Nurses (NLN) and The American Association of Certified Nurses (AACN; Brunt, 2005; Hickman, 1993; Rane-Szostak & Robertson, 1996). This

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leads to the question of what type of work environment favors or hinders the development of creativity and ultimately, critical thinking skills.

When examining nursing program content, emphasis should be placed on the how the content is organized, delivered, and processed by the student. Evaluation of these processes should lead to delivery of content through active learning strategies, which encourages analysis and application of information in new and unique ways. Therefore, nurse educators become the gate keepers of students' creative learning and ultimately developing their own critical thinking skills. Simpson and Courtney (2002) believed educators must also be students in the on-going development of their creativity and critical thinking abilities. Schaefer and Zygmont (2003) found student-centered teaching styles foster critical thinking, creative problem solving, and independence in learning. When educators offer learning strategies to encourage the creative process, critical thinking is learned over time (Blondy, 2011). Critical thinking then becomes a daily habit, which transposes to clinical practice and lifelong implementation.

Creating a healthy work environment where true collaboration, shared decision making, appropriate staffing, authentic leadership, and skilled communication exists favors an empowering work force that will creatively engage students in critical thinking learning activities for successful nurses (Brady, 2010). When educators feel empowered, they are more likely to seek out scholarly articles to improve their teaching and feel supported to implement creative activities (Ritter, 2011). Creativity and critical thinking activities must be a regular part of the classroom to make certain nursing students develop those skills early in their education.

Therefore, this quantitative study sought to determine whether a relationship existed between the perceived feelings of burnout and disempowerment and the creativity of associate degree nursing faculty. Demonstrating a relationship between these variables could lead to a new sense of awareness of healthy working environments. This study found statistically significant relationships between burnout, disempowerment, and creativity.

Background, Context, and Theoretical Framework

The work life of a nurse is fast-paced, interactive, and constantly changing, which requires nurses to be able to think on their feet and be proactive instead of reactive to patient changes. Nurses who do not demonstrate this ability to think quickly jeopardize patient safety and risk outcomes that may not be favorable. The nursing profession cannot afford nurses who guess, use their gut instinct instead of evidence based data, jump to conclusions without asking for input, are close-minded, and disengage from interactive care of their patients (Sullivan, 2012). The days of just carrying out the physician's orders are gone and nurses must understand all aspects of a patient's medical condition to fully care for his or her needs. Generating this type of nurse requires nursing education that will abandon the traditional lecture and rote memorization predominately used in nursing programs (Sullivan, 2012).

New research outlines the benefits of critical thinking, collaboration, and creativity in nursing education (Chabeli, 2007; Kowalczyk, Hackworth, & Case-Smith, 2012). Creativity in critical thinking benefits patients, but also provides a sustained credibility to the profession of nursing that must be maintained in order to continue providing quality nursing care (Chabeli, 2007). Nurses must be open to collecting

assessment data, analyzing the results, reasoning intuitively, making assumptions, testing assumptions, and finally implementing their plan with an on-going evaluation of any interventions. This interactive process, the nursing process, requires the nurse to have sound critical thinking skills that allow her to alter her assumptions, analysis, and evaluation every step of the way (Chabeli, 2007).

Nurses are under more pressure to act quickly and meet the needs of their patients, all while providing efficient and quality healthcare. For over a decade, nursing education has been challenged in producing nursing professionals who are able to think critically, use clinical judgment in working with patients, and creatively provide individualistic care for patients, all while realizing there is not a standard recipe to fit every patient. Nursing as a profession and accrediting agencies have projected the shift to creativity and critical thinking teaching strategies; yet research suggests this has not been as successful as expected (Brunt, 2005; Hickman, 1993; Rane-Szostak & Robertson, 1996).

A literature search through CINAHL did not reveal any studies investigating creativity integration into nursing cares. Logically, creativity and imagination are needed to provide individualized care to meet the patients' needs. Nurses who lack the ability to put themselves in their patients' shoes to provide the best possible care jeopardize patient outcomes and may inadvertently create negative experiences for a patient's health (Berg, Hansson, & Hallberg, 1994). A high degree of tedium in the work place leads nurses to perform routine, mundane tasks that limit creativity and possibly lead to negative outcomes, whereas, positive work environments may lead to creativity and positive patient experiences (Berg, Hansson, & Hallberg, 1994).

Forrester and Hui's (2007) research positively connected a students' creativity to their teacher's innovative teaching strategies on the content presented. Historically, students were subjected to rote memorization and formal assessments, which limited creativity and critical thinking in both student and educator. Fasnacht (2003) found students lost their ability to think creatively when their education lacked creativity. With the integration of case studies, simulation, and concept maps in nursing education, nurses have become more flexible and innovative in patient care. Therefore, nursing faculty are considered the gatekeepers to building the creative foundation in nursing students, which leads to a lifetime of creative thinking and positive patient outcomes.

Knowles (1984) believed adult learners seek to find the correlation and link between the content they are studying and relevancy to themselves. When the link is clear and identified, adult learners eagerly engage in learning and apply what they have learned. Nurse educators have that responsibility to engage the student in a meaningful, motivated way that stimulates creativity and critical thinking. Crookes, Crookes, and Walsh (2013) found utilizing multi-faceted approaches in the classroom helped eliminate the perceived gap between nursing practices and the education that supported that practice. As pointed out previously, nurse educators must be the change agents to ensure the nursing profession matures to provide creative, competent patient care.

Most nursing faculty have little if any training in critical thinking or creative teaching practices (Blondy, 2011). Creativity and critical thinking are not simply concepts that can be taught like that of the cardiovascular system, yet nurse educators are expected to teach creativity to students to keep up with the fast paced health care system of today. Creativity and critical thinking develop from experience and education

(Fasnacht, 2003). Nurse educators do not necessarily possess good critical thinking abilities themselves. A research study by the National League of Nursing (2011) reported that 40% of nursing faculty felt the least prepared in teaching critical thinking skills to students, as compared to other concepts. This could be attributed to the fact that a standardized definition of critical thinking has not been conceptualized or accepted by the nursing profession (Mundy & Denham, 2008). Yet nurses are expected to possess proficient critical thinking skills to pass the national examination for licensure. This gap between theory and practice is accentuated by the nurse educator's lack of knowledge on how to develop his or her critical thinking skills and self-reflection on their short comings with teaching critical thinking skills.

Emphasizing the importance of critical thinking, the NLN (National League of Nursing) and ANCC (American Nurses Credentialing Center) declared critical thinking a core competency for graduates of an accredited institution (Riddell, 2007). The ability to be a good critical thinker upon graduation has never been a debate in the nursing profession (Crookes, Crookes, & Walsh, 2013). What has been debated is the definition of critical thinking, ways to cultivate critical thinking in nursing students, types of activities that would encourage critical thinking, improving educators' critical thinking skills, and the type of work environment that may inhibit or develop critical thinking in nurse educators (Kataoka-Yahiro & Saylor, 1994; Kowalczyk, Hackworth, & Case-Smith, 2012; Romeo, 2010).

Adding to the stressors of teaching critical thinking to nursing students is the amount of burnout faculty perceive in the work environment. Burnout, defined for this research as a physiological condition that develops from one's working environment, is

characterized by exhaustion and mental withdrawal. Burnout leads to feelings of

exhaustion, negativity, and detachment from the work environment (Gonzalez-Morales,

Peiro, Rodriguez, & Bliese, 2012). These conditions do not stimulate growth or

encourage educators to be creative, innovative, or expand on their critical thinking

abilities.

Nurse educators often perceive feelings of burnout from their colleagues, which

has been associated to greater burnout within the group (Gonzales-Morales, et al., 2012).

Maslach (2003) believed burnout is not about the person, but more about the social

environment in the workplace. The social environment within an organization has been

attributed to greater feelings of burnout among the group members. When co-workers

complained or shared feelings of exhaustion, research showed perceived feelings of high

workload, depleted resources, lack of support, and high demands were more likely to

occur (Gonzales-Morales, et al., 2012). The perceived feelings of burnout from the group

may lead to additional burnout, as faculty may feel they have no support from co-workers

if they need it, since everyone around them also feels burned out.

Nursing education is a demanding profession, and accrediting agencies expect

specific core measures be demonstrated by the program. These expectations and

additional stressors on directors and deans, including faculty turnover, an ageing faculty

population, NCLEX passage rates, and the pressure to provide a healthy work

environment, are just a few of the sources of stress that can lead to burnout in nursing

faculty. Maslach (2003) has identified six key areas where imbalances may exist between

work and the person: workload, control, reward, community, fairness, and values. Her

research supported the notion that the more incongruences among these areas, the greater

the burnout and job dissatisfaction in the employee. Ultimately, burnout leads to absenteeism, turnover, and negative behaviors that are reflected in the group. Other obvious signs of burnout are lack of motivation, lack of care in outcomes, giving the bare minimum, and a callous or cruel attitude towards work initiatives or co-workers (Maslach, 2003).

Nurse educators experiencing burnout often have a higher intent to leave their work (Leiter & Maslach, 2009). Apathy occurs with prolonged feelings of job dissatisfaction. Therefore, the nurse educator is less likely to seek out learning opportunities to create a critical thinking learning environment. The nurse educator becomes cynical, withdrawn, and contributes minimally to the work environment. Her intent to leave overshadows her ability to be productive in the classroom. Maslach (2003) believed people become emotionally detached as a way of protecting themselves from further stressful involvement. Burnout does not occur from one negative occurrence, but rather from a prolonged exposure to an environment that clashes with our own personal values. Nurse educators are expected to teach in the classroom and in clinical environments, mentor and counsel students, seek out scholarly activities, be involved with committee work, publish papers, and even further their education (Maslach, 2003). Such demands on workload are bound to lead to burnout.

Dealing with students and patients every day can be stressful and demanding (Bittner & O'Connor, 2012). As nurses, we are expected to be good listeners, helpers, and have the ability to fix all problems. This expectation puts a great deal of pressure on nurses and nurse educators day after day. There is also very little reward for performing as expected (Bittner & O'Connor, 2012). Not many students or patients say "thank you

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for teaching me that material" or "thank you for taking me for a walk"; it is a largely underappreciated profession due to these expectations of service (Bittner & O'Connor, 2012). Consider also the student who requires a great deal of attention or discipline due to failure to follow the policies. Maslach (2003) stated it is the continual dealings with these students that lead to burnout and not the severity of the dealing. The unfulfilled personal need to be liked is a force that affects burnout when faculty have continual interactions with students who are disrespectful and unappreciative.

Workplace empowerment can have a positive effect on an educator's job satisfaction (Bittner & O'Connor, 2012). In contrast to burnout, empowerment is characterized by feelings of support, access to resources, and opportunities for advancement. Nurse educators who perceive they have control over their teaching environment and have active participation in the decision-making process experience greater empowerment and job satisfaction (Johnson, 2009). Empowerment also contributes to the culture of the organization, leading nurse educators to work independently and feel like they have the support to make decisions about their own teaching strategies. The manner in which faculty interact with each other and with students may transfer to teaching and interactions within the work environment. Exhibiting role modeling behaviors builds a profession that is respected and empowered to think creatively and critically about a patient's needs.

Studies by Laschinger, Finegan, and Shamian (2001) and Shader, Broome, Broome, West, and Nash (2001) established empowered nurses have measurable, positive outcomes on organizations, such as improved job satisfaction and effectiveness in job performance. In Smith, Capitulo, Griffin, and Fitzpatrick (2012), data showed nurses who

were more satisfied at work felt more fulfilled and valued as professionals. Empowered nurses also felt their input was valued, therefore, implementing and initiating new teaching strategies were encouraged and the level of commitment to the organization increased. Students may be personally motivated to model behaviors exhibited by the educators. This leads them to seek out experiences, create learning opportunities, and stimulates them to be lifelong learners.

Conceptual Framework

Burnout and disempowerment lead to suppressed creativity and, indirectly, to a decreased ability to teach critical thinking, as represented in Appendix A. This research attempted to correlate the direct relationship between the independent variables of burnout and disempowerment with the dependent variable of creativity. The literature review drew correlations of creativity to critical thinking.

Theoretical Framework

This research was grounded by the Diffusion of Innovation Theory created by E.M. Rogers (2003). This theory outlined how new processes and ideas become adopted by social networks. Dingfelder and Mandell (2011) believed that based on Rogers's theory, the faculty played a major role in whether to adopt a new innovative method, more than the innovative method that drove the adoption. The authors supported the notion that faculty who were motivated and sought out information to improve their teaching methods were more likely to implement those methods. Therefore, if faculty members did not feel motivated or empowered, they were not likely to seek out innovation, creativity, or critical thinking activities, nor would they implement them.

Murray (2009) described a wide gap between theory and practice as a result of multiple variables that influence professionals. Rogers (2003) described the process of diffusion of innovation as "an information-seeking and information-processing activity, where an individual is motivated to reduce uncertainty about the advantages and disadvantages of an innovation" (p. 172). If faculty members are motivated to seek out information and new ideas, Rogers's theory supported the idea that they will then implement the new innovation. The barrier to this process is the burnout and job dissatisfaction that disempowers the faculty member from implementing creative learning activities, which build critical thinking skills.

Statement of the Problem

Critical thinking is required of nurses, but evidence to support critical thinking and creativity as a vital component of a nurse educator's competencies is scarce. Nursing programs have not demonstrated significant improvement in critical thinking skills in their graduates (Brunt, 2005). Teaching modalities continue to rely heavily on rote memorization and assessments, which limit the skills needed to mature critical thinking abilities, such as analysis and clinical judgment. Burnout and disempowerment are factors that may prevent nurse educators from seeking out scholarly articles to build their critical thinking knowledge and, subsequently, new teaching strategies. Nurse educators must be willing and able to revise their delivery of key concepts without adding more content for memorization.

The research literature on critical thinking and creativity indicates that we know these concepts are vital to nursing student success on NCLEX. We know nursing faculty are mandated to teach critical thinking skills, as well as creative teaching strategies to

encourage critical thinking in nursing students, but we do not know if burnout and disempowerment affect the ability of associate degree nursing faculty to teach creatively.

Critical thinking and creativity are connected and may be influenced by many outside sources; however some internal sources can be minimized leading to less burnout and empowerment. Consciously constructing a healthy work environment supports faculty and can lead to greater retention. By building strong leadership and a healthy work environment, nurse educators can feel empowered and supported so the internal stressors are minimized.

Purpose of the Study

The purpose of this study was to examine what influences affect creativity within the work environment and then to establish the relationship between creativity and burnout and disempowerment amongst associate degree nursing faculty. The assumption was that these variables influenced and altered faculty's ability to seek out and implement creative teaching strategies which encourages critical thinking in nursing students. The expected research results will show a statistically significant relationship between burnout and creativity.

Research Questions

The purpose of this research was to understand the relationship between the variables of creativity, burnout, and empowerment to support nursing faculty in the need for a healthy work environment. Ritter (2011) described higher job satisfaction, greater retention, and ultimately a greater degree of engagement in staff when they felt supported and experienced less burnout. Literature has shown healthy work environments have numerous positive effects on faculty, including higher retention, less burnout, higher

engagement of faculty, and greater job satisfaction (Hebenstreit, 2012; Perkins &

Zimmerman, 1995).

RQ1

Is there a statistically significant relationship between perceived feelings of burnout and

creativity in associate degree nursing faculty?

Null Hypothesis

There is no statistically significant relationship between perceived feelings of burnout

and creativity in associate degree nursing faculty.

Alternative Hypothesis

There is a statistically significant relationship between perceived feelings of burnout and

creativity in associate degree nursing faculty.

RQ2

Is there a statistically significant relationship between feelings of disempowerment and

creativity of associate degree nursing faculty?

Null Hypothesis

There is no statistically significant relationship between feelings of disempowerment and

creativity of associate degree nursing faculty.

Alternative Hypothesis

There is a statistically significant relationship between feelings of disempowerment and

creativity of associate degree nursing faculty.

RQ3

Does the regression of the independent variables of burnout and disempowerment have a significant effect on the dependent variable of creativity in associate degree nursing faculty?

Null Hypothesis

There is no significant effect of the independent variables of burnout and disempowerment on the dependent variable of creativity in associate degree nursing faculty.

Alternative Hypothesis

There is a statistically significant effect of the independent variables of burnout and disempowerment on the dependent variable of creativity in associate degree nursing faculty.

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Rationale, Relevance, and Significance

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Students require creativity and critical thinking skills to pass NCLEX and be successful in healthcare today. Faculty can play a large part in their success. Shell (2001) reported faculty have a difficult time teaching critical thinking and often are unsure what critical thinking teaching strategies look like. The National League of Nursing (2011) reported 40% of nursing programs surveyed cited resistance to implementation of critical thinking activities related to faculty lack of preparedness. Very little has been researched on how to teach critical thinking to faculty and even less on how to prepare faculty to teach critical thinking to students. Faculty tend to teach how they were taught, which most likely was the traditional lecture and rote memorization (Blondy, 2011).

Shell (2001) also believed assumptions about critical thinking interfere with faculty's ability to teach critical thinking. The author stated the traditional roles of teacher and student inhibit their ability to work collaboratively in critical thinking. Other barriers included time, class size, the beliefs that a great deal of research and planning is needed to implement critical thinking activities, the perceived need to teach all content in a short time, and that students are learning "just fine" from their teaching style. Faculty understand the value in critical thinking, yet these assumptions and barriers are hindering the nursing student's success.

Faculty are highly sought nationwide; supporting them and minimizing influences that can drive them away from nursing education is essential. One motivating factor that may influence faculty's engagement in seeking out scholarly articles to improve teaching practices is empowerment. Empowerment refers to having control and independence over one's work environment, which leads to growth and innovative behaviors (Hebenstreit, 2012) Directors and deans can best support faculty by creating a culture where faculty are able to make decisions about their work, establish social structures to support faculty, and building opportunities for faculty to grow professionally (Hebenstreit, 2012) . When faculty do not perceive this empowering environment, they may disengage from new creative or innovative teaching strategies.

Significance of the Study

The healthcare field changes quickly and expects the nursing profession to change with it; therefore, nursing programs need to maintain competent staff to meet the ever-changing needs. With the nursing shortage continuing, nursing faculty members are younger, less experienced, and less educated than previous generations (Kuehn, 2011).

Difficult working conditions are cited as a factor in the shortage, and for faculty, salary has been reported as an obstacle for remaining in a nursing program. With over 500 faculty expected to retire between 2015 and 2018, nursing programs must promote healthy work environments to maintain faculty and build nursing programs that produce creative, critical thinkers for graduates (Kuehn, 2011).

This study may assist Directors and Deans in recognizing the relationship between faculty who are burned out, disempowered, less creative and, therefore, their students suffer, possibly jeopardizing the programs NCLEX passage rates. The results from this study significantly support the correlation between faculty's motivation and innovation and their work environment. In order to promote a healthy work environment, nursing programs need to address salaries, benefits, workload, collegial support, professional development, scholarship, institutional support, and leadership. This research study addressed the effects burnout and disempowerment have on faculty who perceive they are working in a non-healthy work environment. The results of this study may also lead to further studies in the field of how burnout and disempowerment affect faculty in their day-to-day work and how directors and deans can eliminate that perceived feeling, building a nursing program that supports faculty.

Nature of the Study

A quantitative, correlational survey design was chosen for this study utilizing statistical analysis of data to determine if there was a relationship between the independent variables of burnout and disempowerment and the dependent variable of creativity in associate degree faculty. The objective was to demonstrate a relationship

between the variables, as perceived by the researcher, and to support faculty in the need for a healthy, understanding work environment.

In this quantitative, correlational research study, one Internet packet, incorporating three separate survey questions, was distributed by e-mail to members of the National Organization of Associate Degree Nurses (NOADN). The Creative Personality Scale for the Adjective Check List was used to measure faculty's perceived feelings of creativity. The Conditions for Workplace Effectiveness Questionnaire II examined the structural empowerment perceived by the participants. The tool also measured power, opportunity, resources, information, and support. The Copenhagen Burnout Inventory was used to measure personal, work related, and student related burnout. Demographic data was collected on age, gender, educational level taught, years at institution, workload, level of education of participant, and title of participant. Further details regarding methodology are found in Chapter 3 of this dissertation.

Definition of Terms

Burnout-- a condition that develops from one's working environment; characterized by overwhelming exhaustion, feelings of cynicism, and detachment from the job, which lead to lack of motivation and a feeling of ineffectiveness in job performance.

Creativity--"a metacognitive process that: (1) generates novel and useful associations, attributes, elements, images, abstract relations, or sets of operations, and (2) better solves a problem, produces a plan, or results in a pattern, structure, or product not clearly present before" (Pesut, 1985, p. 5).

Critical Thinking-- critical thinking involves inquiry and examination of data, thoughts, and statements in order to create a relationship and identify new concepts.

Empowerment--"the interpersonal process of providing the resources, tools and environment to development, build and increase the ability and effectiveness of others to set and reach goals for individual and social ends" (Hawks, 1992, p. 610).

Assumptions, Limitations, and Delimitations

Due to time and budget constraints of this dissertation, the sampling frame was limited to associate degree nursing faculty who were members of the NOADN. Snowball sampling may have led to additional participants who were not members of the organization. Assumptions of the study were that participants spoke and read English at an adequate level to answer the survey, the participants answered honestly based on their life experiences, and the participants answered independently, without influences from co-workers.

Limitations of the research study were participants may have perceived stress from the survey questions that were of a personal nature, participants may have been rushed due to workload, answering questions quickly without reading them thoroughly, and participants were limited to associate degree nursing faculty. Further research in diploma, baccalaureate, master's level, and doctoral faculty would be necessary to examine the variations between nursing programs. This research was limited by time constraints, thereby focus on one level of nursing faculty was utilized for this study.

Organization of the Remainder of the Study

The organization of the rest of the dissertation is as follows:

Chapter 2 will cover literature review on creativity, critical thinking, burnout, and disempowerment. Relationships between variables will demonstrate the need for a healthy work environment, void of burnout and disempowerment. Creativity and critical thinking are linked through a literature review.

Chapter 3 will cover the methodological framework to support the quantitative research study. Roger's *Diffusion of Innovation* theory supports the study. A literature review identified several studies similar in nature that demonstrated a relationship between a social environment and faculty's motivation.

Chapter 4 will provide the data analysis and findings from the data collection. Demographic data will be presented, including correlations between any significant demographic data and creativity, burnout, and disempowerment. Chapter 4 will summarize the findings by hypothesis.

Chapter 5 presents a summary and conclusion of the study with results, limitations, and future recommendations for further research. Significant results will be supported by the literature and correlations will be made between variables. A regression analysis will draw conclusions between the dependent variable of creativity with both independent variables of burnout and disempowerment.

CHAPTER 2. LITERATURE REVIEW

Introduction to the Literature Review

The purpose of this research study was to examine the relationship between perceived feelings of burnout and disempowerment and their correlation and effect on creativity in associate degree nursing faculty. The literature review will outline a theoretical framework that supports the idea that nursing faculty typically strive to improve teaching strategies and promote lifelong learners in students. The literature review will outline unhealthy work environments, where faculty perceive burnout and disempowerment and the proposed hypothesis that the environment ultimately hinders their innate ability to seek out scholarly activities and improve the learning environment.

The literature review scanned several databases, including CINAHL Complete and with Full Text, Education Research Complete, ERIC, and PsycInfo. Research also included the National League of Nursing database, which houses the Nursing Education Perspectives Journal. Key words used in the search included all operationalized defined terms.

Theoretical Framework

Everett M. Rogers (2003) stated "an innovation is an idea, practice, or project that is perceived as new by an individual or other unit of adoption" (p. 12). Roger's theory of *Diffusion of Innovations* has been widely cited as the most appropriate theory in adopting technology in higher educational environments (Sahin, 2006). Diffusion, as used by Roger's theory, begins with the construct of a social system in which communication of a new idea, practice, or project is disseminated. Roger believed the social system was a key element in adopting innovations and without a social network, an individual's

motivation or creativity could be compromised (Sahin, 2006). The social system is comprised of innovators, early adopters, early majority, late majority, and laggards. The innovators became gatekeepers and motivators for other individuals in the social system, which was also viewed as adventuresome and often required the innovators produce necessity or data before innovation would be adopted. However, innovators possessed complex knowledge in regards to the innovation and often became the experts in the field (Sahin, 2006).

More importantly to this research were the early adopters. Those individuals were more closely associated to the social system, adopting innovations when they felt supported from leadership and their peers to adopt an innovation that had been presented (Sahin, 2006). These individuals were more likely to be viewed as role models and leaders amongst the social system. Therefore, those that lagged in adopting innovations looked to the early adopters for guidance and a "stamp of approval".

In a study by Medlin (2001), the author utilized Roger's theory to understand the factors that might influence a faculty member's motivation to adopt an innovation. The author found the most influential factor to adoption was the individual's social system. Without support from peers, leaders, mentors, or students, faculty's drive to adopt significantly decreased (Sahin, 2006). Secondly, an organization's resources, including support or mandates from the organization to adopt an innovation were cited as motivating factors. When faculty perceived they had the resources they needed in order to adopt innovations a greater number of faculty were motivated, regardless of a label of innovator or early adopter, as outlined by Rogers.

In multiple research studies, as found in Sahin's (2006) review, access to resources, as well as support and training, were cited as either the majority factor or the second top identified factor in adoption of innovation amongst faculty. Teaching load was also documented as a significant factor in two studies. Theoretically, the correlation between teaching load and burnout would lead faculty to feel lack of support and possibly disempowerment.

Review of the Research Literature and Methodological Literature

Critical thinking has been a crucial part of nursing education. Accrediting organizations, such as the National League of Nursing (NLN), have created objectives and expectations for nursing programs to integrate critical thinking into the curriculum. However, many educators have been unable to adequately define critical thinking, and how to measure critical thinking cannot be successfully analyzed without a working definition that educators can utilize. Schaffer and Rubenfeld's (2000) definition of critical thinking is widely used, as it incorporates necessary skills and personality traits vital to critically thinking:

> Critical thinking in nursing is an essential component of professional accountability and quality nursing care. Critical thinkers in nursing exhibit these habits of the mind: confidence, contextual perspective, creativity, flexibility, inquisitiveness, intellectual integrity, intuition, open-mindedness, perseverance, and reflection. Critical thinkers in nursing practice exhibit the cognitive skills of analyzing, applying standards, discriminating, information seeking, logical reasoning, predicting, and transforming knowledge. (p. 357)

Most definitions of critical thinking have included terms such as goal oriented, purposeful, and higher order thinking. Chabeli (2007) believed critical thinking occurred when original ideas identify relationships between thoughts and concepts in relationship to the data presented. The author also believed critical thinking involved inquiry and

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examination of data, thoughts, and statements in order to establish a relationship between concepts and identify new concepts. Critical thinkers do not accept notions, but rather they analyze and question information that others may see as common knowledge.

The American Psychological Association (1990) developed a definition of critical thinking that has been predominately used by nurse educators and has identified traits that are key to being an effective critical thinker:

> Habitually inquisitive, well-informed, trustful of reason, open-minded, flexible, fair-minded, in evaluation, honest in facing personal biases, prudent in making judgments, willing to reconsider, clear about issues, orderly in complex matters, diligent in seeking relevant information, reasonable in the selection of criteria, focused on inquiry, and persistent in seeking results which are as precise as the subject and the circumstances of inquiry permit. (p.3)

Brookfield (1995), a leader in critical thinking research, established four key components in the critical thinking process: first, identify and challenge assumptions, next, recognize the importance of context, third, explore and imagine alternatives; and last, exhibit reflective skepticism. These components define critical thinkers and have been key to effectively problem solving through the critical thinking process.

Other authors (McDonald, 2002; Paul, 1993; Profetto-McGrath, 1994) cited adjectives such as discipline-specific, reflective reasoning, analytical attitude, critical reflection, purposeful thinking, and nonlinear process in their definitions of critical thinking. Regardless of which definition one has chosen to use, nurse educators must create an environment where critical thinking is fostered, nurtured, and taught alongside other key concepts in nursing. This includes addressing both the affective and cognitive aspects of critical thinking. For instance, Brookfield (1995) believed emotions were key

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elements to critical thinking, as analysis of data is based on prior experiences, which often bring about emotions tied to that memory.

Research has shown that nurse educators have not adjusted their teaching to nurture critical thinking but continue to cite lack of knowledge in critical thinking as an obstacle (Blondy, 2011). Nurse educators have also been uncomfortable with a student-centered approach, which has been required in critical thinking (Sullivan, 2012). They have often been stuck in teacher-centered approaches based on their learning experiences and the lack of time to research and integrate teaching strategies (Kowalczyk, Hackworth, & Case-Smith, 2012).

A study conducted by Kowalczyk, Hackworth, and Case-Smith (2012) sought to understand educators in what their level of confidence was in teaching and assessing critical thinking in the classroom and clinical environments. Six hundred and ninety two program directors were invited to participate in the study, with a response rate of 45.8%. Overall, the program directors reported a 37% positive feeling in teaching and assessing critical thinking, and over 70% stated they could benefit from professional development in the area of teaching critical thinking. Negative influences, as cited by Kowalczyk et al. (2012), on integrating critical thinking were intensive workloads, strict content delivery requirements, and time constraints to deliver all necessary content, and negative student and fellow educators' attitudes to delivery methods that were new and innovative. In Kowalczyk et al. (2012), 48% percent of the participants stated time constraints due to administrative duties and the need to cover a certain amount of material as their biggest obstacles to implementing critical thinking strategies.

Time constraints for various job responsibilities were often cited as an obstacle to an educator's ability to grow and increase learning opportunities for students. Zurmehly (2008) supported the notion that nurse educators were under more pressure to build curriculums that meet the needs of today's healthcare versus shortening the length of time to complete a nursing education program. Chabeli (2007) stated the traditional methods of teaching do not foster critical thinking and nurse educators' need to explore options that encourage analysis, collaboration, and cooperation to ensure they are meeting the needs of patients. Nursing education has been a dynamic, ever changing environment that demands educators change with it. Educators should be prepared to enter their profession expecting change, unpredictability, and to maintain rigor in their own learning in order to assist their students.

Nurse educators can best support nursing students by presenting critical thinking learning opportunities that encourage the student into purposeful thinking. Profetto-McGrath (1994) believed teaching critical thinking to nursing students encouraged individualized, effective patient care grounded in evidence-based practice. Students trained in critical thinking skills were able to research, analyze and implement care that led to positive patient outcomes. Critical thinking allowed students to be reflective and supported clinical decision making beyond the textbook. In contrast, nurses who did not develop critical thinking skills were close-minded and jeopardized patient outcomes. Based on the idea that they were correct and unable to change their view or follow a protocol, without thought for a specific patient situation, patient safety became a highly regarded consideration (Profetto-McGrath, 1994). Critical thinking drives nurses to

question and seek out explanations to assessment findings, thereby providing the best possible care to their patients.

Many authors have believed the nursing process is the first step to a nurse's critical thinking process. Duchscher (1999) stated critical thinking was an integral part of the nursing process. The author believed nursing should have very little linear thinking. Nursing required problem solving and clinical judgment with any information or assessment completed. Kolb (1994) suggested nursing was a cyclical process that required the participant to gather information, reflect, and make decisions. This process was largely affected by prior experiences, personal reflection, and trial and error. Therefore, the nursing process, depicted in figure 1, guided the nurse down a path that encouraged that cyclical process of assessment, intervention, and evaluation.
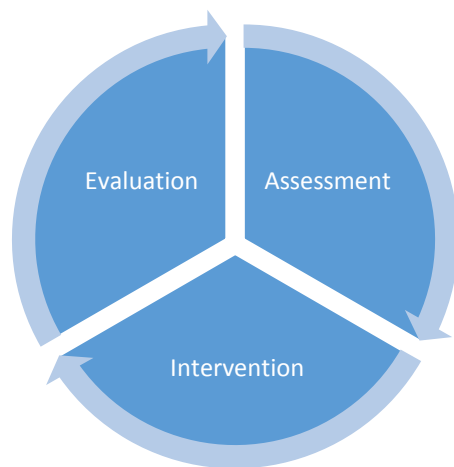

Figure 1. *Nursing Process*

In providing quality care, nurses have needed to develop critical thinking skills that have allowed them to be flexible and individualize patient care. Brunt (2005) stated nurse educators understand critical thinking is an underlying process that should be

integrated whenever possible in nursing education. There seemed to be a strong link between critical thinking and academic achievement; however that link has not been associated with nursing competence. Therefore, understanding what type of environment fosters critical thinking is vital to nurse educators and nursing programs.

Healthcare has made dramatic changes and transitions in the last decade, but nursing programs may not have kept up with the times. Simpson and Courtney (2002) cited teaching someone to be a critical thinker was not as easy as teaching an objective concept, such as oxygenation. Nursing curriculum must critically evaluate the quality of the content delivered, the organization of the content and how students would evaluate the information presented. The authors believed students must practice critical thinking skills over and over. Nurse educators should present simple ideas that progress to analysis and critique of information. Simpson and Courtney (2002) believed the degree to which students learned critical thinking was dependent on the nurse educator's integration of discussion into teaching strategies, creating an active learning environment. Nursing students who have not possessed critical thinking skills have been dependent on nurse educators to develop those skills to deliver quality nursing care.

Repetition, practice, and internal motivation have been key to developing critical thinking skills and may be uncomfortable for most students. Zygmont and Schaefer (2006) believed critical thinking skills developed with experience. Therefore, it has been logical to question the ability of nurse educators in fostering critical thinking in their students. Predominantly, nurse educators studied did not have any formal education in teaching critical thinking. Zygmont and Schaefer (2006) found as educators advanced in age, their ability to engage students in critical thinking teaching strategies decreased.

These findings may have suggested nurse educators experience heavy workloads or burnout the longer they stay with their institution. Zygmont and Schaefer (2006) also found faculty lacked analysis in their own critical thinking abilities. A number of factors may have contributed to this, such as the lack of formal critical thinking education, work environment, the expectation that nurse educators learn by experience and not from scholarly articles, or the inability of nurse educators to see the value in teaching critical thinking.

Thinking about one's thinking is imperative in critical thinking and students should understand the steps in that process. Kataoka-Yahiro and Saylor (1994) believed critical thinking must contain several elements before the learner could effectively become a critical thinker. Those elements included: a specific knowledge base in nursing, experience in nursing, critical thinking competencies, attitudes for critical thinking, and standards for critical thinking. Therefore, critical thinking was a complex, learned art that required persistence and an experienced educator well versed on the concept.

Creativity

In order to effectively foster critical thinking, nurse educators must not merely rely on lecture that encourages rote memorization of facts and concepts. Creativity and the use of creative teaching strategies encourage nursing students to analyze data, reflect and explore, as well as engage in purposeful thinking to make assumptions, thereby engaging critical thinking. Dikici (2014) defined creativity as the "ability to produce work that is relatively novel, high in quality and appropriate to the task" (p. 182). Pesut (1985) defined creativity as "a metacognitive process that: (1) generates novel and useful associations, attributes, elements, images, abstract relations, or sets of operations, and (2)

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better solves a problem, produces a plan, or results in a pattern, structure, or product not clearly present before" (p. 5). Creative nurse educators sought out new, innovative strategies to incorporate in their classroom. These creative teaching strategies led nursing students to think objectively, analyze, and force purposeful thinking.

Creativity was not strictly a process. Some authors believed creative people have distinct personality traits that were easily recognized. Hass (2014) stated creative people are "more autonomous, introverted, and open to new experiences, norm-doubting, self-confident, self-accepting, driven, ambitious, dominant, hostile, and impulsive" (p. 46). Hass (2014) enlisted 321 undergraduate students to describe a creative sculpture or piece of art that they had previously seen. After the free text question, the participants were invited to complete a trait rating matrix to freely write in traits they believed were indicative of creativity. The results did not identify a significant difference in participants and their field of study. However, those participants that demonstrated creativity in their free text question were more likely to exhibit traits consistent with creativity. Therefore, researchers could hypothesize creative educators were more likely to actively engage in scholarly activities to identify teaching strategies to foster critical thinking due to their drive and desire to seek out new learning experiences.

Another key quality in creative educators was the habit of thinking. Educators who were found to be the most creative thought about their students' learning, strived to create a learning environment that was motivating, and made every effort to be the best educator in and out of the classroom (Horng, Hong, ChanLin, Chang, & Chu, 2005). In a study by Horng et al. (2005) the authors led a qualitative study through focus group interviews, in-depth interviews, classroom observation and content analysis. Three

educators who had each received creative instruction awards were the sole participants. Personality traits that were identified before the study included a desire to learn, a strong desire to acquire new knowledge, and perseverance in dealing with difficulties.

Another interesting trait of the participants was that of the habit of thinking. In review of the participants' teaching environment, the authors found impressive teaching plans, implementation of creativity, and a combination of information and application on a regular basis. The results of the authors' study reported a nurse educators' creativity and critical thinking relied on educators who sought out innovative teaching strategies and participated in scholarly review of articles. Therefore, creative educators pursued original teaching strategies, and engagement in that pursuit motivated educators to continue the process of creativity.

Some educators were self-motivated and independently pursued learning opportunities. However, educators were not always supported or encouraged to engage in scholarly activities. Ferrari, Cachia, and Punie (2009) stated educators are key contributors to creative environments, but they need support from institutions. Creativity was less likely to flourish in environments where educators lacked the resources and motivators to actively engage in innovative teaching strategies (Ferrari et. al., 2009). Deductively, when feelings of disempowerment and burnout were felt it may have led to educators who were not as ambitious or motivated to engage in creating learning environments that encouraged critical thinking. Ferrari et al. (2009) argued of all the external influences on creativity, motivation had the greatest impact on implementation of creative teaching strategies. The authors believed an educator's intrinsic motivators are what drive creative people; they became fully immersed in their work and creativity

effortlessly flowed. Therefore, creativity was directly affected when the educator lost the drive to create or sought out learning strategies.

Institutions can support educators through various methods. Ferrari et al. (2009) believed creative environments should begin with a change in the view of creativity in the educational setting. The authors encouraged a shift in pedagogies to a more inclusive approach, which allowed students to be in control of their learning process. This in turn forced innovative teaching strategies to meet the students' needs. Educators who lacked the knowledge on the subject or did not provide a learning environment that allowed students to discover and explore would not be meeting the students' needs. This change in environment did not address an educator's lack of motivation or drive due to the culture or work environment; therefore it must be taken into consideration, but not as the only solution to motivating creative educators.

Creative educators did not rely on lecture alone to deliver their content, and they possessed more than the ability or motivation to seek out new, innovative learning strategies. Dikici (2014) described creativity as "the ability to produce work that is relatively novel, high in quality and appropriate to the task" (p. 180). The author conducted researched with 202 elementary and secondary school teachers in an attempt to establish a relationship between teaching styles, behavior traits, and a teacher's creativity-fostering behaviors. The Thinking Styles Inventory and Creativity Fostering Teacher Index Scale were used on volunteers in the study. Results did not show a significant difference between age or gender and creativity in classroom teachings. However, the findings did show those educators with experience demonstrated more creative teaching behaviors in the classroom than those with less experience (Dikici,

2014). An educator's creativity was often correlated to personality traits; however those personality traits alone did not produce creative educators. Educators who inspired creativity in the classroom encouraged students to process information, solve problems, and question information presented to them. This required educators to present information in various ways to meet the needs of each student.

Creativity was not a trait that had been shown to develop based on age or by gender. This led researchers to believe that creativity is affected by other factors, which could be related to their work environment. Zurmehly's (2008) correlational research compared registered nurses in management positions to job satisfaction and critical thinking. The Watson-Glaser Critical Thinking Appraisal and the Minnesota Satisfaction Questionnaire Short Form were used to measure autonomy and job satisfaction in the sample size. A response rate of 73% was cited. The results showed a significant positive correlation between critical thinking and the nurses' job satisfaction. Critical thinking and creativity are not synonymous, but as described previously, educators who felt supported in their work environment had greater motivation to engage in activities that were creative. Therefore, job satisfaction may have played an integral role in creativity, as research has demonstrated with critical thinking.

Educators were not alone in benefitting from creativity. Forrester and Hui (2007) researched 27 teachers in Hong Kong primary schools. Research was completed using classroom observations and data collection with the Creativity Fostering Teacher Index and the Creative Personality Scale. Forrester and Hui (2007) found a positive correlation between creativity and teaching strategies educators utilized in the classroom, as well as the teachers' creative personality. The authors' study on educator creativity and their

students' subsequent verbal and figural creativity described a significant relationship to creative teaching strategies. Forrester and Hui (2007) confidently explained with their data analysis that an educator's background did not correlate to a student's creativity, but rather to the teaching techniques. The authors summarized their findings by stating educators are significant "gatekeepers" in a student's development and creative potential. This research supported the relationship between an educator's teaching strategies and the development of the students' learning. One can also correlate that an educator's delivery of critical thinking strategies led to the progress of the student's critical thinking. Educators who have consistently presented critical thinking experiences for students encouraged the development of critical thinking, which was crucial to quality patient outcomes in the hands of the registered nurse.

Consistently creating a teaching environment where creativity flourishes and was encouraged allowed students to view concepts in multiple ways and began to build a foundation for future learning. Horng et al. (2005) believed creativity led students to think independently, which led to critical thinking and autonomy in decision making. In the author's qualitative research, creative educators adopted real-life situations to learning experiences encouraging feedback and active learning. A creative learning environment took an extensive amount of time to develop, which required educators to develop intrinsic motivation in creating meaningful experiences.

Horng et al. (2005) stated educators required experience and mentors to guide them in creativity. The majority of educators in the study were highly motivated to engage in creativity when they experienced job satisfaction, a love for their students, and a true desire to present their passion in their field of study. That intrinsic motivation

would be diminished when the work environment did not support an educator. Adversely, creative instruction would be carried out if the organization encouraged communication between co-workers, supported new ideas, removed barriers to research, and included mutually supported colleagues.

Creativity must be used well beyond the constraints of nursing school. According to Myra Levine (1997), creativity was the "marriage of the art and science of nursing" (p. 216). Many nurses believed it was a vital part of daily life with patients. Fasnacht's (2003) literature review stated the overall creativity of nurses in baccalaureate programs has decreased and has been found to be concerning for the nursing profession. In the author's literature review, defining creativity varied across disciplines; however, general themes included that of taking risks and functioning independently. The review also supported the notion that creativity would be developed in a supportive environment. The concepts of a supportive environment, staff with intrinsic motivation, and mentors or colleagues with creative inspiration were seen numerous times in the literature, which positively influenced an educator.

Empowerment

Empowerment is a complex construct that is sometimes viewed as a relationship between social environment, an individual's needs, and an employer's demands. Perceptions and acclimation to empowerment are individualized and are altered based on various environmental influences (Perkins & Zimmerman, 1995). Perkins and Zimmerman (1995) represented empowerment as a construct that took on different forms depending on populations, developmental stages, and environment. Empowerment has been theorized and researched in various fields of study, yet, much like critical thinking,

the definition challenged researchers to find a common theme. The definition of

empowerment utilized by this paper will be "the interpersonal process of providing the

resources, tools and environment to development, build and increase the ability and

effectiveness of others to set and reach goals for individual and social ends" (Hawks,

1992, p. 610).

Communication that focuses on honesty, trust, and mutual respect encouraged

empowerment and provided a nurturing, caring environment where empowerment would

be supported. Hawks (1992) supported the theory that communication between two

individuals was the basis for perceived feelings of empowerment. Another factor for

empowerment to be successful was one of commitment. If both participants are not

committed to the outcome, the climate would not lead to empowering actions (Hawks,

1992). Ultimately, empowered individuals gained autonomy, increased responsibility,

and became reflective, caring individuals. In a study by Carlson-Catalano (1988),

empowerment activities were considered those that change activity and demonstrate

analytic nursing collegiality. In Hawks' (1992) literature research, empowered

individuals demonstrated an increased ability to set and reach goals, greater autonomy,

and responsibility in their work environment. Therefore, the line of demarcation between

educator and student was blurred by empowerment, which allowed greater educator

satisfaction in seeing growth in themselves and others.

In Kanter's (1993) work, the author described empowered educators as those who

were more likely to engage in organizational activities that were positive and experienced

less job strain or burnout. Empowered educators were those that felt supported in

resources, information, and opportunities to grow and develop (Kanter, 1993). In

Kanter's (1993) research of 656 sales workers, the most effective and highest performers were those workers who held perceived feelings of power and autonomy. The feelings of support led not only to empowerment, but also to the feeling of being valued and contributing to their work environment. In Hawks' (1992) definition of empowerment, empowerment occurred between two or more people: the person who empowered and the person who was empowered. In Arneson and Ekberg's (2006) literature review, educators who were empowered actively made decisions and participated in activities that shaped their lives. Therefore, when educators felt disempowered, the environment lacked the ability to provide needed resources to do the job, or the environment was one that did not foster educators' ability to participate in reaching their individual goals, including engaging in scholarly activities.

Organizations have played a vital part in ensuring employees felt empowered and supported in scholarly activities. Kanter (1993) theorized employees who felt empowered and were able to complete high quality outcomes worked in environments where resources, support and the opportunity to learn and implement new ideas were present. Kanter (1993) also found employees in empowered work environments were less likely to experience burnout or job dissatisfaction. Participation in task forces and team projects led to control over the process and encouraged the sharing of power by more people, thus empowering employees. Kanter (1993) also found employees engaged in positive activities and were found to be more committed to the organization. Therefore, organizations benefitted from employees engaged and empowered in their work environment.

Kanter (1993) argued that employees reacted to their work environment.

Therefore, when employees perceived an empowering environment, the organization was

more likely to benefit from their productivity due to job satisfaction. The author stated

empowerment was directly affected by access to resources, opportunities to learn and

grow, and receiving support from formal leaders. Smith, Capitulo, Griffin, and

Fitzpatrick (2012) stated empowered nurses have a positive effect on organizations and

have been shown to have higher job satisfaction and greater work effectiveness. The

author's quantitative research examined a nurses' perceived feelings of empowerment

and their anticipated turnover. A 53% response rate was returned using the Conditions of

Work Effectiveness Questionnaire-II and the Anticipated Turnover Scale. Sixty two

percent of the participants considered themselves to be moderately empowered, 22%

reported highly empowered, and 16% reported low empowerment. This research

supported the theory that the stronger the relationship the employee has to an

organization, the less likely they are to leave their job (Smith et al., 2012). This perceived

empowerment or psychological empowerment, as described by Spreitzer (1995),

involved participation in the workplace, with access to resources and minimal role

confusion. Empowerment aided in strengthening an organizational effectiveness and

allowed employees to reach their goals through skill development.

In a study by Laschinger et al. (2001), 600 participants were recruited for a non-

experimental, quantitative research study. Data was collected using the Conditions for

Work Effectiveness Questionnaire. The authors' hypothesis, that structural power would

be directly related to psychological power, was found to be a direct, positive relationship.

Therefore, an educator's perceived feeling of empowerment or disempowerment can be

linked to the hierarchical position in the organization. Laschinger et al. (2001) data also showed a significant link between workplace empowerment and the ability for employees to complete their work with the necessary leadership support. The authors found job strain had a significant impact on emotional and behavioral aspects of employees that led to burnout, additional sick time, and loss of concern for work outcomes. Whalen (2009) conducted a correlational study to examine stress-producing external demands that could impact a nurse educator's job satisfaction. The author utilized three questionnaires and obtained a 20% response rate. Whalen's (2009) results showed the negative impact of stress on an individual led employees to stop interacting with colleagues and the organization and could also interfere with the employee's goal attainment. It is important that nursing program chairs recognize stress and disengagement in their educators and utilize resources to alleviate job dissatisfaction and, ultimately, turnover in their institution.

Spreitzer (1995) correlated empowerment to the culture of an organization. The culture caused reactions, actions, and perceptions to the work environment by those employees within the organization. Johnson (2009) conducted a descriptive, correlational research study with 407 nurse faculty to answer her hypothesis that faculty who have control over their teaching and take an active role in nursing program objectives, experienced feelings of being empowered. Johnson (2009) utilized the Demographic Informational Survey, the Organizational Culture Assessment Instrument, and the Psychological Empowerment Instrument to collect data on the sample size.

Data analysis indicated one universal theme amongst nurse educators: the responsibility to research, develop, and disseminate knowledge to nursing students led to

greater feelings of empowerment. In Johnson's (2009) research, the length of time at an organization and age of faculty were significant in relationship to the amount of empowerment the faculty perceived. Johnson (2009) also found the organizational culture was a significant contributor to feelings of empowerment. According to Kanter's (1993) model of organization empowerment, an employee's social influences have less effect on work attitudes or behaviors than organizational influences. Nurse educator's may or may not transfer their perceived feelings into teaching and student interactions. Therefore, an organization's culture, as well as other factors, should be evaluated on an institution-by-institution basis.

Job satisfaction in nurse educators was also studied by Baker, Fitzpatrick, and Griffin (2011). The authors posited nurse educators had a high level of responsibility and expectations, yet their autonomy and authority may have been minimal. In their descriptive, correlational research, 139 full-time associate degree nursing faculty were given four instruments to measure the relationship between job satisfaction and psychological empowerment. Data indicated very high job satisfaction amongst the participants (89%). Spreitzer (1995) previously defined empowerment to include four main components: meaning in work; competence, or confidence in one's job performance abilities; self-determination, or feelings of control over one's work; and impact, or the ability to influence organizational outcomes. Baker's et al. (2011) research showed faculty felt empowered in areas of meaning and competence. Fewer respondents showed they had less autonomy and even fewer felt they had any significant control or impact within their nursing program. Further data indicated there was no significant difference in education level, tenure status, or academic rank in the findings correlating

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disempowerment and job satisfaction. These findings differ from other research. The authors' research supported the theory that those faculty who had access to resources, felt they had flexibility and sense of relevance in their work environment and were found to have higher job satisfaction. Nurse educators and program chairs should share in responsibilities for program success, including identifying and developing teaching strategies.

Burnout

Multiple factors can influence feelings of empowerment. One such concept that can affect an educator's feelings of empowerment is burnout. Leiter and Maslach (2009) defined burnout as a condition that developed from one's working environment. Conditions such as workload, lack of control in work, incongruence between personal goals and organizational goals, inadequate recognition or rewards for work done, and poor working relationships could lead to burnout. The authors found employees that experienced these conditions often demonstrated cynicism and, ultimately, poor mental and physical health.

Literature has shown that burnout has a negative consequence in relationship to empowerment (Baker et al., 2011). Leiter and Maslach (2009) believed burnout was characterized by overwhelming exhaustion, feelings of cynicism, and detachment from the job, which led to lack of motivation and a feeling of ineffectiveness in job performance. Leiter and Maslach (2009) surveyed 667 Canadian nurses in an attempt to establish a relationship between burnout and turnover. The Maslach Burnout Inventory, Areas of Work Life Scale, and the Turnover Intentions Scale were utilized to collect the data. The results of the study supported previous research which showed a relationship

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between burnout, exhaustion and cynicism, which directly correlated to inefficacy. One particular construct, workload, was linked to exhaustion alone, while burnout was predictive of turnover (Leiter & Maslach, 2009). The research results also supported the primary concern for burnout was the extent nurse educators felt they were involved in their work. Empowered nurse educators were actively engaged in their job, participated in program objectives and contributed to successful student outcomes. Educators who did not feel burned out were engaged in job responsibilities, felt they were effective in their job, and experienced a high level of energy and motivation.

Forister and Blessing (2007) supported Maslach's research in identifying key concepts in burnout as decreased productivity, faculty turnover, and poor instructional quality. Maslach (1993) believed work overload, lack of control, lack of reward, lack of community, lack of fairness, and conflict of values were high predictors to feelings of burnout. Maslach (1993) believed once an employee began to feel that emotional exhaustion, they were unable to feel the motivation or desire to give to others, including an organization. They began to cut back on their involvement both personally and professionally and, thus, personal accomplishments and drive were reduced.

When burnout was not recognized and continued, an employee's intent to leave began to rise (Maslach, 2003). The loss of nursing faculty is concerning as faculty are difficult to replace and it is time intensive to mentor new faculty. Nurturing and empowering current faculty to maintain retention could be the best defense. Maslach (1993) believed burnout was a syndrome of emotional exhaustion, depersonalization, and reduced personal accomplishment. The syndrome of burnout has been linked in literature to decreased productivity, faculty turnover, and poor instructional quality (Forister &

Blessing, 2007). Forister and Blessing (2007) recruited 387 participants for a quantitative study in determining whether younger faculty experienced higher burnout than the more experienced faculty members. Fifty percent of the participants surveyed utilizing the Maslach Burnout Inventory were found to have high or moderate levels of emotional exhaustion. Most interesting in this data was the fact that older faculty had less emotional exhaustion. One can hypothesize that the older faculty learned to adjust to their workload and organizational culture or know how to balance work responsibilities to minimize the feelings of burnout.

Those faculty members who do perceive feelings of burnout often stated they were not the only faculty in the institution with those feelings, leading one to think burnout may be contagious. Gonzalez-Morales, Peiro, Rodriguez, and Bliese (2012) considered burnout a psychological syndrome which derived from an educator's exposure to constant job stress and role strain. In the author's research of 659 educators from primary and secondary education, the perceived feelings of burnout from co-workers was measured using the Maslach Burnout Inventory and the Occupational Stress Indicator. Data analysis from the research was inconsistent between the 111 schools, citing 25% of the respondents did not share feelings of burnout with co-workers. However, the majority of schools did demonstrate some correlation of burnout amongst faculty, which supported the theory that perceived feelings of lack of support from administration was related to one's environment (Gonzalez-Morales et al., 2012).

Educators often felt their resources were depleted and exhibited negative, callous or excessively detached attitudes to job responsibilities (Gonzalez-Morales et al., 2012). The authors found employees experiencing burnout felt overextended and believed their

physical and emotional resources were drained. Their research showed burnout results

from work place demands, exhaustion, and lack of resources (Gonzalez-Morales et al.,

2012). Generally speaking, burnout has often been a by-product of the educator's

environment, compounded by the educator's lack of motivation to participate, leading to

an educator's lack of creativity and interest in job performance and, eventually, burnout.

Healthy work environments have led to nurses with higher job satisfaction and

retention (Breau & Rheaume, 2014). Breau and Rheaume (2014) conducted a cross

sectional design to evaluate whether a nurse's work environment led to burnout and

intent to leave. Breau and Rheaume (2014) researched over 33,000 nurses in a variety of

settings using the Practice Environment Scale of the Nursing Work Index, the Conditions

of Work Effectiveness Questionnaire, the Minnesota Satisfaction Questionnaire, and the

Perceived Quality of Care on Unit scale. The research found one in five nurses were

highly dissatisfied with their jobs, citing limited opportunities for advancement, wages,

and educational opportunities as the main reasons for dissatisfaction. The authors found

unhealthy work environments consisted of burnout, job dissatisfaction, and the intent to

leave. Breau and Rheaume's (2014) research showed a significant relationship between

empowerment and job satisfaction, and surprisingly, 69% were not intending to leave

their employer. Basic concepts such as providing support, resources and information for

opportunities supported the nurses feelings of empowerment and, ultimately, on their

perception of a positive work environment. When nurses perceived a collaborative

working relationship with co-workers, their feelings of empowerment were strengthened.

The terms *burnout* and *disempowerment* have clearly related to faculty job

satisfaction and have often been used simultaneously in a literature review; however,

understanding the relationship is vital to improving the work environment. Leiter and Maslach (2009) examined the relationship between burnout and empowerment. They believed burnout occurred from the prolonged feelings of disempowerment. The longer an employee felt unproductive, ineffective, and unaccomplished, the more likely they were to experience burnout. Leiter and Maslach's (2009) research demonstrated a significant correlation between burnout and inefficiencies in the work environment. Employees who experienced burnout symptoms were found to invest less energy in work related responsibilities. Forister and Blessing (2007) research stated previously also found a correlation between burnout and age. Faculty members who were older were more likely to have job satisfaction and less emotional exhaustion.

Job strain has been linked to many physical and emotional symptoms. Laschinger et al. (2001) cited that the following symptoms were displayed when burnout occurred: a reduction in personal and work accomplishments, increased sick time and tardiness, workplace conflicts, headaches, insomnia, disengagement from work obligations, and negative impacts on expected student outcomes. Laschinger's et al. (2001) non-experimental study of Canadian nurses showed those who perceived a high degree of psychological job demands also perceived a very low degree of job control. Job control, as defined by the authors, was the ability to which the employee felt freedom and the ability to learn new things (creativity), development of new tasks or processes to improve the work environment, and the authority to make decisions about their own work or influence their work environment. When job control was lost, growth was halted and productivity of the employee was minimal due to their feelings of disempowerment.

The study of burnout has been important in many ways in understanding the performance and health of employees who were exposed to unhealthy work environments. Shirom's (2005) research supported the theory that burnout's stability over time held constant. Employees felt the effects of burnout up to eight years and those feelings often did not change over an extended period of time. This chronic nature of burnout can lead to continued physical and emotional exhaustion. After four studies on burnout, overwhelmingly Shirom (2005) supported the low physical and emotional energy as the core concept of burnout. These findings could also be the reason many researchers believed burnout could be transferred from one individual to another and should be a concern for employers. The need to create positive healthy work environments has assisted in preventing a burnout epidemic within an organization.

Tedium has been directly linked to burnout as well. Berg, Hansson, and Hallberg (1994) conducted a descriptive study to examine the climate of creativity and innovation in relationship to tedium and burnout in a ward with severely demented patients. Data was collected using the Creative Climate Questionnaire, the Burnout Measure, and the Maslach Burnout Inventory. Results of the study indicated there was very low creativity on the unit; conversely there was very high tedium and burnout. The researchers followed the participants for one year and collected data to show an increase in creativity, but this was attributed to the direct effect of the researcher's presence. Therefore, one could deduce that support and feelings of empowerment, which were encouraged by the presence of the researcher, could have led to an increase in creativity amongst the participants. Berg et al. (1994) explained the opposite impact of burnout was the positive outcome of creativity.

Chapter 2 Summary

Critical thinking concepts and discussion in the field of nursing education first appeared in articles in the 1980's. Since that time, nurse educators have researched, analyzed, and implemented strategies to promote critical thinking through the use of creativity. The interest and necessity to continue to explore this concept will not be waning anytime soon (Zygmont & Schaefer, 2006). The National League of Nursing (NLN) and the American Association of Colleges of Nursing (AACN) have also realized the importance of critical thinking by mandating the concept be incorporated into a nursing curriculum to achieve accreditation (Institute of Medicine, 2011). Critical thinking has become an obsession that drives nurse educators to implement creative strategies that lead to successful outcomes (Billings, 2003). Therefore, research in the connection of creativity to critical thinking has become a great interest of researchers and variables, such as burnout and disempowerment, demonstrate the negative impact an unhealthy work environment can have on faculty.

CHAPTER 3. METHODOLOGY

Introduction

The purpose of the research study was to seek a relationship between an individual's perceptions of disempowerment and burnout to the practice of creativity in educational settings. When faculty engage in scholarly activities, they are able to increase creativity through learning activities found in the literature (Ellis, 2013). These learning activities also support critical thinking in nursing students (Zygmont & Schaefer, 2006). Most educators realize the importance of teaching critical thinking skills (Chabeli, 2007). However, nurse educators are increasingly challenged with high workloads (Ellis, 2013; Nardi & Gyurko, 2013; Zibrowski, Weston, & Goldszmidt, 2008), disempowerment related to the culture in the organization, job satisfaction, and high levels of burnout (Baker, Fitzpatrick, & Griffin, 2011). These constructs decrease the nurse educator's ability to engage in scholarly and other activities that support creative thinking and creative educational activities (Berg, Hansson, & Hallberg, 1994; Roberts & Glod, 2013).

Research Design

This quantitative, correlational research attempted to establish relationships between several variables. A correlational study was used to explore the relationships, if any, between the feelings of perceived burnout and disempowerment to creativity in the associate degree nursing faculty. This correlational study sought to develop a relationship between the two independent variables, of burnout and disempowerment and the dependent variable of creativity. A correlational design allowed the researcher to test

several hypothesis in expected relationships between the variables identified (Lodico, Spaulding, & Voegtle, 2010).

The main purpose of the study was to seek a statistically significant relationship between creativity of associate degree nursing faculty and their perceived feelings of burnout and disempowerment in their work environment. Based on the literature search, a relationship would be expected after data analysis. Identifying a relationship can assist faculty in seeking out healthy work environments that will support scholarly activities and improve creativity and critical thinking in students.

Target Population, Sampling Method, and Related Procedures

Quantitative research utilizes a sample size from a larger population in order to hypothesize, draw conclusions, and apply theories to the larger population (Lodico, Spaulding, & Voegtle, 2010). Selection of a population may be chosen based on application to the research and accessibility of a sample size. For the purpose of this research study, an organization comprised of only associate degree nursing faculty defined an appropriate sampling to generalize results upon completion of the research.

Target Population

The target population for this study was full time associate degree nursing faculty in the United States, currently estimated to be over 15,000 (American Association of Colleges of Nursing, 2012). This population was selected due to the intense stressors of teaching in the fast-paced associate degree nursing programs. Associate degree nursing programs typically run two or three years. This means faculty teach a great deal of content in a short amount of time and may feel pressured to keep the student moving in the program, leaving faculty with a heavy workload and little time to seek out scholarly

activities. The sampling frame was associate degree nursing faculty within the National Organization of Associate Degree Nursing (NOADN) database, whose current membership exceeds 1,100.

Demographically, the inclusion criterion for this study was that subjects needed to be over the age of 18, able to read and understand the questionnaires, and members of the NOADN. Inclusion criteria also included a snowball sampling from those members whom were encouraged to forward the survey link to colleagues interested in participating. Voluntary and anonymous participation was maintained while ensuring ethical considerations for protection of the participants, through consent forms that de-identified participants and any of their personal identifying factors, and an anonymous link from the informed consent to Qualtrics. Qualtrics is an on-line survey software that allows researchers the ability to create survey's, collect data, and analyze data at a basic level.

Sampling Method

Sampling of the population was done through purposive sampling as well as snowball sampling from the members of NOADN. This type of sampling allowed the researcher a precise method of choosing a smaller subpopulation of the larger population (Lodico, Spaulding, & Voegtle, 2010). For this study, only associate degree nursing faculty were studied. The need for focusing on a specific sample size allowed a precise focus on that level of nursing educators in comparison to educators in a baccalaureate program, who may or may not have time built into their contract to engage in scholarly activities.

Purposive sampling of associate degree nursing faculty was useful in the ease of obtaining membership to NOADN and for the proposed hypothesis that faculty in these programs experienced the most amount of burnout and disempowerment. Research by Shirom (2005) and Laschinger et al. (2001) suggest workload, faculty shortages, lack of support or resources for research, and leadership in associate degree nursing programs may differ from baccalaureate nursing programs. Some researchers believe purposive sampling may lead to bias and the lack of generalizability to the entire population, due to the non-randomness of selection by the researcher, but such sampling allows the researcher to collect basic data and trends in a given sample, which can then be generalized to the population (Gay, Mills, & Airasian, 2006). The sample size is a good representation of associate degree nursing faculty from programs that are two or three years in length, due to the membership list having over 1,100 members. The absence of faculty from baccalaureate programs was taken into consideration for this study, but deemed a potential topic for future research, as those educators typically have research and scholarly activities built into their contracts on an annual basis.

Sample Size

For the purpose of this research study, the sample size was estimated using the Polaris sample size calculator (http://www.polarismr.com/polaris-help-center/stat-calc-sample-size). Based on a confidence level of 95%, +/- 5% margin of error and 50% variability, the optimal sample size for this study was estimated to be approximately 375 participants. The National Organization of Associate Degree Nurses membership exceeds 1,100 and therefore, e-mails were sent to all members in an attempt to reach or exceed the recommended sample size. A follow-up reminder e-mail was sent 10 days

after the initial e-mail asking for volunteers for the study. The survey remained open for 21 days and received 225 responses. Eight participants either did not finish the survey or elected to exit the survey due to criteria. Therefore, 217 participants were included in the data analysis, for a response rate of 20%.

Recruitment

Recruitment of the sample began with permission from the NOADN to distribute recruitment material through their database to all associate degree nursing faculty. Once adequate permission was obtained from the director of NOADN, the necessary electronic material was sent to the NOADN director for distribution through an e-mail. All correspondence was sent with complete directions, contact information, informed consent, purpose of study, and links to data collection instruments.

Qualtrics, an on-line software company was chosen for data collection. Qualtrics is a professionally run internet based company that allows research development and data collection for up to 250 respondents free of charge. For an additional fee, the researcher can continue to collect data after the first 250 participants. Due to the time frame, this study did not exceed that number; therefore, no costs were incurred. Qualtrics allowed the researcher to create order and conduct a trial run of the survey with a field test group of peers to ensure research questions were clear and ambiguity was minimal.

Instrumentation

Instrumentation utilized in quantitative research is often a standardized tool that has been used numerous times for data collection. The instruments chosen for this research were selected based on the research question. It was imperative the instruments

collected demographic data, as well as perceived feelings of burnout and disempowerment in the workplace.

Demographics

A demographic data sheet created by the researcher collected data on age, gender, educational level taught in nursing program, years at institution, workload, level of education of participant, and title of participant. The demographic data was used to describe the sample and compare the sample with the larger population of nurse educators. Data analysis on demographic data and the correlation to creativity, burnout, and disempowerment will be completed in chapter 4.

Creative Personality Scale

Harrison G. Gough (1979) created the Creative Personality Scale as an extension of the Adjective Checklist. The scale was originally used to describe views of one's self. It soon became a reliable and valid tool used to measure creativity (Gough, 1979). Early attempts to support the reliability of the Creative Personality Scale began with educators identifying students who showed creative tendencies. Those students IQ, major and personality were measured over time and compared to the Adjective Checklist (Gough, 1979). Those identified students were also judged by experts in the field of creativity and originality was introduced as a concept associated with creativity (Gough, 1979). Gough's (1979) Creative Personality Scale consists of 30 adjectives in which the participant chooses any adjectives that describe themselves.

In a study by Gough (1979), more than 1,600 males and females from various professions and majors were surveyed to demonstrate reliability and validity of the Creative Personality Scale. The Cronbach Alpha reliability coefficients ranged from .73

in the male participants to .81 in the female participants. Each subset was further separated out by adjective and compared to Domino, Schaefer, and Welsh's scales, which were previously found to be reliable and valid (Gough, 1979). On the individual adjectives represented in the Creative Personality Scale, all were found to be statistically significant at $p < .01$. Gough (1979) concluded that the Creative Personality Scale was found to be reliable and valid and could be implemented to measure creativity in multiple settings and professions.

Conditions for Workplace Effectiveness Questionnaire II

The CWEQ-II is derived from Kantor's original work on structural empowerment (Laschinger et al., 2001). Kantor defined structural empowerment "as the extent to which employees feel they have access to these structures in their work settings" (Laschinger, Wong, & Grau, 2013, 1). Laschinger, Wong, and Grau (2013) believed if an educator had the opportunity and structure to advance in an organization, they were more likely to develop their knowledge and skills. Through the conceptual framework for the CWEQ-II, Laschinger et al. (2013) believed structure in the work place came from access to information, access to resources that would assist the organization in achieving their goals, and access to support. The questionnaire measures six concepts of empowerment: opportunity, information, support, resources, formal power, and informal power. The questionnaire also includes two items on global empowerment that are used for construct validity purposes.

The CWEQ-II consists of 19 items, which are summed and averaged to provide the cumulative empowerment score. Score range is between 4 and 20. Higher scores represent stronger perceptions of working in an empowered work environment. Scores

ranging from 4 to 9 are described as low levels of empowerment, 10 to 14 as moderate

levels of empowerment, and 16 to 20 as high levels of empowerment. Cronbach's alpha

reliability coefficient for the CWEQ-II is calculated at .89 (Laschinger et al, 2001).

Therefore, demonstrating the reliability of the CWEQ-II for use in measuring

empowerment within an organization.

Copenhagen Burnout Inventory

For the purposes of this study, Kristensen, Borritz, Villadsen, and Christensen

(2005) define burnout as "fatigue and exhaustion". The authors go on to state that this

occurs from long term "work situations that are emotionally demanding" (196).

Originally created from the need to find an adequate measurement of burnout for the

Project on Burnout, Motivation and Job Satisfaction in Denmark, the Copenhagen

Burnout Inventory (CBI) was studied for five years on participants who worked in the

human services profession. Over 1,900 participants were followed from various

professions. The CBI measures three aspects of burnout, personal, work related, and

client related. Six questions focused on personal burnout, including physical feelings and

emotional exhaustion. Seven questions on work burnout included questions on frustration

and exhaustion due to the work environment. The student burnout section contained six

questions on the impact students have on the faculty members' energy and level of

frustration.

In a previous study conducted by the developer, the Cronbach's alpha for internal

consistency was very high and ranged from .85-.87. There were considerable differences

in professions, which was consistent from year to year in the study (Kristensen et al.,

2005). The CBI also demonstrated high face value validity, with a low non-response rate.

Also of interest is the ability of the study to measure an individual's burnout rate over time. Kristensen et al. (2005) cited evidence to support the theory that burnout does not stabilize, but change over time based on various factors, such as organizational changes or restructuring.

Data Collection

Initial contact was made with the National Organization of Associate Degree Nursing Faculty (NOADN) chair to discuss the possibility of utilizing their membership for this research project. The organization's membership is cited at over 1,100 members, who are associate degree nursing faculty. The roles of the members encompass faculty, directors, and professors in both the classroom and clinical settings.

The Creative Personality Scale was preferred as the instrument to measure creativity due to the extensive list participants choose to describe themselves and the reliability of the instrument. The scale was public domain and obtained easily with direction and permission from the author. The Scale was not modified in any way and adjectives were kept in order of sequence listed.

The Conditions for Workplace Effectiveness Questionnaire (CWEQ) was preferred as the instrument to measure empowerment in the work place. There are two sections to the CWEQ. The CWEQ I pertains to nursing staff who work in a clinical setting. Therefore, the CWEQ II, which is directed at working with students, was utilized for this study. Permission was obtained from the author of the questionnaire, as well as the scoring guide.

The Copenhagen Burnout Inventory (CBI) was preferred for this research based on the extensive data that supported the reliability and validity in assessing burnout in

employees. Permission was sought and obtained from the National Research Centre for the Working Environment, Denmark. The CBI questions were maintained as presented in the original document with the exception of changing the word patients to students.

An introduction to the research study was developed as well as the informed consent. The participants were asked for voluntary participation and encouraged to forward the research link on to colleagues that may be ADN faculty, but not members of NOADN. This snowball sampling elicited some response from directors who wished to share the survey link with faculty, which was encouraged.

Using Qualtrics, an online survey software platform, a survey including demographic data, the Creative Personality Scale, CWEQ, and CBI was developed for distribution. Qualtrics allowed the researcher to organize and group each instruments questions together for easier analysis. The informed consent and welcome message were placed as the opening page for participants. If participants chose to proceed with the survey, their implied informed consent was obtained by their choosing to click on the link leading them to the survey.

Letters of permission, data collection instruments, newly created Qualtrics survey, and the research plan were submitted to the Institution Review Board at Capella University for study approval. Upon receiving approval, without exceptions, a new e-mail was sent to the NOADN chair for approval. Prior to distribution of the survey to NOADN members, the survey was sent to a focus group of peers, who were nursing educators. Their feedback on wording and grouping of questions was taken into consideration and the survey was revised based on their feedback.

After purchase of the NOADN membership, the chair distributed the welcome e-mail. Upon receiving the e-mail, if participants agreed to participate in the study, they were directed to the Qualtrics survey site to complete the survey. On this secure site, the informed consent, Creative Personality Scale, CWEQ-II, Copenhagen Burnout Inventory, and the demographic data was collected in the newly created instrument which included all questions.

Qualtrics secure website collected and stored all data from participants. No personal identifying information was collected or accessible from the participants. The survey remained open and data collection continued for 21 days. After the initial 10 days, a reminder e-mail was sent to encourage additional participation. This resulted in approximately 50 additional participants.

Upon completion of the data collection period, the survey was closed and the data was downloaded from Qualtrics to the researcher's personal computer and SPSS for data clean-up and analysis. The data was also stored on a thumb drive located in a locked safe in the researcher's home, in addition to an off-site server, Dropbox. All storage sites are password protected and require a unique password.

In total, 216 responses were collected to be included in the data analysis. Once all the data was cleaned up and outliers were evaluated for validity, data analysis began by grouping variables and data into subsets to evaluate each instrument separately, as well as a composite score. The complete data analysis with summary is presented in Chapter 4.

Operationalization of Variables

It has been maintained that creativity and burnout are very difficult variables to define and measure. Defining, or operationalizing creativity and burnout allows the

researcher to theoretically control how variables will be measured (Lodico, Spaulding, &

Voegtle, 2010). Therefore, the definition of variables utilized in this research study must

be outlined and supported by a literature review.

Creativity

As previously stated, a definition of creativity has been difficult to operationalize,

but for the purposes of this study is as follows: "a metacognitive process that: (1)

generates novel and useful associations, attributes, elements, images, abstract relations, or

sets of operations, and (2) better solves a problem, produces a plan, or results in a pattern,

structure, or product not clearly present before" (Pesut, 1985, 5). Creativity was

measured with the Creative Personality Scale. The Creative Personality Scale has been

utilized in research with architects, graduate psychology students, engineers, Air Force

officers, and medical students, to name a few (Gough, 1979).

Empowerment

Empowerment for this study is "the interpersonal process of providing the

resources, tools and environment to development, build and increase the ability and

effectiveness of others to set and reach goals for individual and social ends" (Hawks,

1992, 610). Therefore, disempowerment would be the lack of those resources and tools

within the work environment. Empowerment was measured with the Conditions of

Workplace Empowerment Survey II.

Burnout

Burnout is characterized by overwhelming exhaustion, feelings of cynicism, and

detachment from the job, which leads to lack of motivation and a feeling of

ineffectiveness in job performance (Leiter & Maslach, 2009). Burnout was measured

with the Copenhagen Burnout Inventory. The CBI has clearly differentiated patterns and correlations to fatigue, intention to quit, and psychological well-being (Kristensen et al., 2005).

Data Analysis Procedures

The Statistical Package for the Social Sciences (SPSS) version 22, was used to complete the data analysis on all data collected. Data was cleaned and grouped by variables. Subscales were created with groups of questions delineating each survey tool. The following steps were then completed.

Step 1: Demographics such as age, gender, and educational level taught in nursing program, years at institution, level of education of participant, and title of participant were explored and standard univariate descriptive measurements were reported, such as mean, standard deviation, median, group percentages, and ranges. Appropriate charts and tables were generated to display this summary data.

Step 2: Reported the summary results of the administered tests including mean, standard deviation, minimal and maximal of scales and subscale scores for the Creative Personality Scale, CWEQ-II, and CBI.

Step 3: Tested the data for normality and other assumptions of each bivariate and multivariate test to determine the most appropriate test to use. Tested each hypothesis using the appropriate test, including parametric or non-parametric testing, bivariate statistics and regression analysis for the final hypothesis.

Step 4: Conducted additional testing as needed to add clarity and help interpret the results found in previous testing.

A correlation coefficient was conducted to measure parametric and non-parametric versions. A high correlation coefficient (-1 or +1.0) represented a high degree of relationship, whereas a low coefficient (0) represented a low degree of relationship (Gay, Mills, & Airasian, 2006). Statistical significance was also reported to indicate the likelihood that the association between the variables did not happen by chance, but were indeed indicating a relationship, although it is assumed that correlation does not represent causation (Lodico, Spaulding, & Voegtle, 2010). Demonstration of a high degree of relationship signifies a relationship exists, but does not signify one variable causes the changes to the other variable.

Data security was maintained by Qualtrics, who utilizes online trust seals including Norton, Trustee, McAfee, and the Better Business Bureau. Data is kept private, safe and secure (http://www.qualtrics.com/login/). In completing data collection, the data was downloaded to the researcher's personal computer, a thumb drive now locked in a secure safe in the researcher's home, and Dropbox. All sources of data storage are secured with passwords and limited access to the thumb drive is ensured through personal possession.

Demographics

The Qualtrics survey included general demographic information about age, gender, years at institution, workload, level of education of participant, and title of participant. This demographic data was used to describe the sample and complete additional analysis between the demographic variables and the independent and dependent variables. Table 1 describes the measurement of demographic variables with SPSS coding.

Table 1. Demographic Variables and SPSS Coding

Demographic Variable	Scale	Code
Age	Nominal	1=20-30 years 2=31-40 years 3=41=50 years 4=51 years or older
Gender	Nominal	1=Male 2=Female
Years at Institution	Nominal	1=Less than 5 Years 2=5-10 Years 3=11-20 Years 4=Greater than 20 years
Workload	Nominal	1= Less than 20 hours 2=20-25 hours 3=26-30 hours 4=31-35 hours 5=36-40 hours 6= 41 hours or more
Level of Education	Nominal	1=Diploma 2=Associates Degree 3=Bachelor's Degree 4=Master's Degree 5=Doctoral Degree
Title of Participant	Nominal	1= Instructor 2=Professor 3=Supervisor 4=Director

Limitations of the Research Design

A quantitative, correlational design served as the framework for this research.

Simply stated, correlational research allows the researcher to figure out which variables

are connected. Correlational research includes variables that the researcher cannot

control, such as a mediator variable. Mediator variables explain the relationship between

two other variables (Baron & Kenny, 1986). Creativity, burnout, and empowerment are variables in this study that cannot be controlled, which became the premise for exploring the relationships. A literature review led the researcher to surmise there may be a relationship between the variables due to multiple articles on the effects burnout and disempowerment have on faculty and work environments. Although data analysis can prove the relationship, a correlational study cannot prove that one variable causes the other variable to change. For example, data analysis can verify faculty who feel burned out lack creative personality traits, but it cannot prove that when faculty feel burned out their creativity decreases. Lack of creativity could be attributed to other variables, such as social influences, cognitive abilities, or multiple other extraneous variables.

The sampling technique utilized by this research was purposive sampling due to the availability of the NOADN membership. Gay, Mills, and Airasian (2006) stated purposive sampling is also known as accidental sampling, as it accepts participants from anyone who is available at the time. This non-probability sampling can be vulnerable due to biases in the population. In an effort to minimize the biases inherent in purposive sampling of the members of the NOADN database, a snowball sampling was also included to collect data on associate degree faculty who were not members of the NOADN.

Internal Validity

Internal validity in non-experimental research should validate that changes to the dependent variable are related to the independent variables and not some other unrelated variable (Gay, Mills, & Airasian, 2006). Threats to internal validity can include anything that occurs during the research, but is independent of the research design, maturation of

individuals that occurs over time, lack of consistency in the instruments, statistical regression on tests that are given more than once, differences in the participants that are present before the study, and mortality, or a reduction in the number of participants over the length of the research (Gay, Mills, & Airasian, 2006).

In this research study, internal validity was maintained first by consistency in the instrumentation. All participants took the same survey and were encouraged to take it in one sitting. Throughout monitoring of the survey completion, it was noted less than 5 individuals did not complete their survey on the first attempt, but instead saved their spot and completed it at a later time. An additional two individuals did not complete their survey once started and were later deleted from the total number of participants due to lack of completion. Internal validity was also maintained by keeping the survey to less than 15 minutes in length, which required the participant to take the survey before boredom would be an obstacle. Lastly, internal validity would not be jeopardized in this research by the presence of more than one version of the survey for the participant to take. The survey was captured in one point in time, allowing the participant to complete it before outside variables could influence answers.

External Validity

External validity is the ability of the researcher to generalize the findings of the research to the larger population outside of the study (Gay, Mills, & Airasian, 2006). External validity is a very important part of research, without it, the purpose of research and its findings would be limited to the participants alone. Threats to external validity are numerous and important to ensure findings are generalizable. Threats that do need to be considered are reactive arrangements, when participants react differently due to being in

a study and treatment diffusion, when participants communicate and learn from each other in the study. These effects would minimally affect any outcomes, due to the survey being individualized and sharing information amongst participants would not aid them in any way, only prepare them for what the survey entailed.

Expected Findings

Murray (2009) postulated that the social context and organizational culture, which surrounded the educator had a great influence on the adoption of innovations. This influence can hinder or assist an educator in adoption of innovations. Educators without drive are less likely to conduct research, read scholarly journals, and trial new innovations (Arneson & Ekberg, 2006). The literature review clearly outlined the relationship between burnout and disempowerment to creativity in nurse educators. It was expected that this research would quantitatively support the literature findings, which can lead to further research in creating healthy work environments.

A work environment where employees feel disempowered and burned out is not a nurturing environment that motivates educators to seek out new innovations (Hawks, 1992). This type of environment will eventually create disengaged employees, staff turnover, and efficient educators. Nursing program chairs will benefit from this study in recognizing barriers to their staff creativity and ultimately student success in the nursing program.

Chapter 3 Summary

The quantitative, correlational design chosen for this research study of burnout, disempowerment, and creativity was focused on associate degree nursing faculty who

were members of the NOADN. The necessity for the study was outlined throughout the literature review in Chapter 2. Feelings of burnout and disempowerment in the work environment were examined and data analysis was collected in relationship to creativity. The results of that data analysis will be outlined in Chapter 4.

CHAPTER 4. DATA ANALYSIS AND RESULTS

Introduction

The purpose of this quantitative, correlational research was to determine if there was a relationship between an individual's perception of disempowerment and burnout and the individual's creativity in an educational setting. The research was conducted utilizing associate degree nursing faculty. Demographic information, including gender, age, and educational level taught in the nursing program, years at the institution, workload, level of education of the participant, and the title of the participant, was collected to describe the sample and investigate any relationships that may be identified. Data collection was completed utilizing the Creative Personality Adjective Checklist, the Conditions for Workplace Effectiveness Questionnaire II (CWEQ-II), the Copenhagen Burnout Inventory (CBI), and demographic questions developed by the researcher.

Description of the Sample

An e-mail invitation to participate in the study was distributed to over 1,100 members of the National Organization of Associate Degree Nurses (NOADN). The e-mail message asked members to forward the survey to colleagues, creating a snowball sampling. Two hundred twenty-five participants started the survey and 217 finished the survey with all questions answered. Eight respondents did not finish or left questions blank for unknown reasons, so their partially completed surveys were removed from the database prior to data analysis. Participants were asked to complete the demographic survey, as well as the other instruments, which were collectively combined into one survey.

Gender

In analyzing the sample, 210 (97%) participants were female and 7 (3%) were male participants (Table 1). This data leads one to believe faculty positions were predominantly filled by females in this sample. The Census Data from 2013 outlines female nurses outnumber male nurses 10 to 1, which only 10% of the total nurse population being male in gender. So the data from this research is consistent with previously published gender statistics for nurses. AACN cites only five percent of full time faculty positions are held by men, which has increased from three percent in 1980.

Age

Participants were asked to identify to which age group they belonged. Options were: 20-30 years; 31-40 years, 41-50 years, and 51 and over. Of the 217 respondents, two (1%) ranked themselves between 20-30, 14 (6%) between 31-40, 52 (24%) between 41-50, and 149 (69%) were 51 years of age or older.

Role in Institution

Participants were asked to choose a role which most closely identified their current position in the institution. Their choices included Instructor, Professor, Supervisor, and Director. Eighty (36%) of the participants were instructors, 89 (40%) were professors, 6 (3%) were supervisors, and 46 (21%) identified themselves as directors.

Level of Education

Participants were asked to identify their highest level of education completed. Options were diploma, associate's degree, bachelor's degree, master's degree, and doctoral degree. No respondents held a diploma as their highest level of education, 9

(4%) were associate degree nurses, 4 (2%) held a bachelor's degree, 159 (72%) held a master's degree, and 49 (22%) held a doctoral degree.

Length at Institution

The last demographic question asked of the participants was to indicate the length of time they had been in their current position. Answers were arranged in groups of less than 5 years, 5-10 years, 11-20 years, and greater than 20 years. Seventy-four (33%) stated they were employed less than 5 years in their current institution, 62 (28%) had been there 5-10 years, 66 (30%) had been employed 11-20 years, 19 (9%) have been in their current position greater than 20 years.

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Summary of the Results

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The summary of results will report the analysis of the three instruments used to collect data on empowerment, burnout, and creativity. The Conditions of Workplace Effectiveness Questionnaire measured perceived empowerment of faculty. The Copenhagen Burnout Inventory measured perceived burnout of faculty and the Adjective Checklist measured a faculty member's perceived creativity or lack of creativity.

Conditions for Workplace Effectiveness Questionnaire II (CWEQ-II)

The CWEQ-II consisted of 19 items, which are summed and averaged to provide the cumulative empowerment score. The CWEQ-II measured work place empowerment in six subsets: access to opportunity, information, support, resources, informal power and formal power. Participants are asked to rank each question on a Likert Scale ranging from 1-5, with 1 being none or no knowledge to 5 being a lot or knows a lot. Each subset was then summed and data analysis displayed mean scores, standard deviation, and frequency. Higher scores represent stronger perceptions of

working in an empowered work environment. Scores ranging from 4 to 9 were described as low levels of empowerment, 10 to 14 as moderate levels of empowerment, and 16 to 20 as high levels of empowerment. Low levels of perceived empowerment were found in access to opportunity ($M = 3.79$), access to information ($M = 3.75$), access to support ($M = 3.23$), access to resources ($M = 2.63$), informal power ($M = 2.99$), and formal power ($M = 3.41$). Descriptive statistics; mean, number of participants (N), and standard deviation, for each subset are outlined in Table 2. A total empowerment score, which ranged from 6-30, was created by the sum of all six elements. Cronbach's alpha reliability coefficient for the CWEQ-II was calculated at .859 in this research study, which supports a strong internal consistency for this tool. A summary for the results can be found in Table 3, which outlines the percentage of responses for each question. The subsets are grouped together by area of focus, access to opportunity, information, support, resources, informal power and formal power.

Table 2. *Descriptive Statistics of Subsets in CWEQ-II*

Subset	*M*	N	*SD*
Access to Opportunity	3.79	216	.81
Access to Information	3.75	216	1.05
Access to Support	3.23	213	1.03
Access to Resources	2.63	215	.89
Informal Power	2.99	215	.91
Formal Power	3.41	214	.93

Table 3. *CWEQ-II*

Subset	Question	0 = None	1 = Little	2 = Some	3 = More	4 = A Lot	% Response Rate
Access to Opportunity	Challenging Work		4.6	23.6	31.5	40.3	100
	Gain new skills and knowledge	0.5	15.3	37.5	28.2	18.5	100
	Tasks use skills and knowledge	0.5	8.3	32.9	28.2	30.1	100
Access to Information	Current state	0.5	9.7	28.7	24.1	37	100
	Value of top management	2.3	17.6	25.9	21.3	32.9	100
	Goals of top management	2.8	13.4	27.3	21.3	35.2	100
Access to Support	Specific information on things done well	3.2	20.4	35.6	22.7	17.6	99.5
	Specific comments about things to improve	5.1	21.8	35.6	19	18.1	99.5
	Helpful hints or problem-solving advice	8.3	19.9	34.3	21.3	15.7	99.5
Access to Resources	Time to do paperwork	2.3	37.5	34.3	18.1	7.4	99.5
	Time to accomplish job requirements	2.3	31.9	40.3	18.1	6.9	99.5
	Acquiring temporary help when needed	43.1	26.9	18.5	6.5	4.6	99.5
Job Activities Scale	Rewards for innovation the job	13.9	26.4	34.7	16.7	7.9	99.5

Subsets	Question	0 = None	1 = Little	2 = Some	3 = More	4 = A Lot	% Response Rate
	Amount of flexibility in job	5.6	13.0	34.7	29.6	17.1	100
	Amount of visibility of work-related activities	8.8	31.5	37	15.7	6.9	100
Organizational Relationships Scale	Collaborating on student issues	0.5	16.2	32.4	26.4	24.1	99.5
	Being sought out by peers for help with problems	3.2	12.5	25.9	31.9	26.4	100
	Being sought out by managers for help with problems	8.3	25.0	26.4	21.3	19.0	100
	Seeking out ideas from other professionals	5.1	23.6	32.9	22.7	15.3	99.5

Subset	Question	1 = Strongly Disagree	2 = Disagree	3 = Neutral	4 = Agree	5 = Strongly Agree	% Response Rate
Overall Work Environment	Work environment empowers me to accomplish work in an effective manner	5.1	24.5	13.9	38.0	15.3	96.8
Overall Empowering Work	I consider my work place to be an empowering environment	13.0	21.3	8.8	30.1	18.1	91.2

Copenhagen Burnout Inventory (CBI)

The CBI contained seven questions on work burnout, six questions on student burnout, and six questions on personal burnout. All questions had five response categories, with each response generating a score of 0-100 (0-25-50-75-100). Each subset asked the participant to rank the questions by using always, often, sometimes, seldom, and never. Participants who chose "always" received a score of 1, which equaled a score of 0, those who chose "often" received a score of 2, equaling a score of 25, those who chose "sometimes" received a score of 3, equaling a score of 50, those who chose "seldom" received a score of 4, equaling a score of 75, and those who chose "never" received a score of 5, which equaled a score of 100. Each subset of work burnout, student burnout, and personal burnout, was individually correlated to the Creative Personality Scale, as well as the summative results of the CBI to the Creative Personality Scale for hypothesis testing. Scores ranged from 0-700 in the work burnout subset, 0-600 in the student burnout subset, and 0- 600 in the personal burnout subset questions.

Cronbach's alpha for all questions in the CBI in this research study was calculated at .891, which demonstrates a strong internal consistency. The subset questions in work burnout calculated a Cronbach's alpha of .920, the Cronbach's alpha in student burnout questions was .893, and for the personal burnout questions, the Cronbach's alpha was .913. Internal consistency between all questions remained strong.

In the CBI questions, 11 participants chose not to response, therefore 205 valid responses were used for data analysis. Table 4 represents the mean, number of participants (N), and standard deviation for each subset. Tables 5, 6, and 7 represent each

subset, work burnout, student burnout, and personal burnout results independently. Each

question is represented with the % of responses for each score.

Table 4. *Descriptive Statistics for CBI Subsets*

CBI Subsets	*M*	N	*SD*
Work Burnout	47.39	211	21.03
Student Burnout	28.89	214	20.08
Personal Burnout	45.34	212	20.73
Total	121.73	205	55.79

Table 5. *Work Burnout*

Questions	To a very high degree (score 0)	To a high degree (score 25)	Somewhat (Score 50)	To a low degree (Score 75)	To a very low degree (score 100)	Responses %
Is your work emotionally exhausting?	3.2	11.1	36.6	35.2	13.9	100
Do you feel burnt out because of your work?	16.7	22.7	36.1	16.7	6.9	99.1
Does your work frustrate you?	7.9	21.8	42.1	21.8	6.5	100

	Always (score 0)	Often (score 25)	Sometimes (score 50)	Seldom (score 75)	Never/almost never (score 100)	Response rate%
Do you feel worn out at the end of the working day?	2.8	9.7	32.9	39.8	14.4	99.5
Are you exhausted in the morning at the thought of another day at work?	16.2	29.6	30.1	18.5	4.6	99.1
Do you feel that every working hour is tiring for you?	23.6	37.5	25.0	10.2	3.7	100
Do you have enough energy for family and friends during leisure time?	11.1	37.0	36.1	13.0	2.3	99.5

Table 6. *Student Burnout*

Question	To a very high degree (score 0)	To a high degree (score 25)	Somewhat (score 50)	To a low degree (score 75)	To a very low degree (score 100)	Response Rate %
Do you find it hard to work with students?	39.8	42.1	14.8	2.8	0.5	100
Do you find it frustrating to work with students?	31.9	40.3	21.3	4.6	1.9	100
Does it drain your energy to work with students?	27.3	38.0	24.5	8.8	1.4	100
Do you feel that you give more than you get back when you work with students?	13.4	23.1	38.0	16.2	8.8	99.5

	Always (score 0)	Often (score 25)	Sometimes (score 50)	Seldom (score 75)	Never/almost never (score 100)	Response Rate %
Are you tired of working with students?	47.2	28.2	19.4	3.7	1.4	100
Do you sometimes wonder how long you will be able to continue working with students?	35.6	27.3	20.8	14.8	0.9	99.5

Table 7. *Personal Burnout*

Question	Always (score 0)	Often (score 25)	Sometimes (score 50)	Seldom (score 75)	Never/almost never (score 100)	Response Rate %
How often do you feel tired?	3.2	10.6	42.1	37.5	6.5	100
How often are you physically exhausted?	6.0	19.0	41.7	29.2	4.2	100
How often are you emotionally exhausted?	5.6	18.5	38.0	30.6	6.5	99.1
How often do you think: "I can't take it anymore"?	37.0	26.4	22.7	12.5	1.4	100
How often do you feel worn out?	9.3	23.6	35.2	27.3	3.7	99.1
How often do you feel weak and susceptible to illness?	27.8	31.5	28.7	10.6	1.4	100

Creative Personality Scale

The Creative Personality Scale consisted of 30 adjectives in which the participant was asked to choose all adjectives that they would use to describe themselves. In scoring the creativity adjectives, one point was given to the participant if they chose an adjective

that was considered creative and one point was subtracted if an adjective that was

considered non-creative was chosen. Theoretically, scores could range from -12- 30.

Cronbach's alpha for the creative personality scale was calculated at .676, which does not

show a strong nor weak internal consistency. When calculated individually, the creative

adjectives Cronbach's alpha was .706 and the non-creative adjectives Cronbach's was

.340, which demonstrated the non-creative adjectives had a weak internal consistency

leading the researcher to question the reliability of the non-creative adjectives to

accurately represent the population's non-creativity. Table 8 shows the results of the

creative adjective data collection.

Table 8. *Creative Personality Scale*

Personality Traits (Creative)	Response rate %	Total *M*	*SD*	High Score	Low Score
Capable	100	7.93	2.81	14.0	1.0
Clever					
Confident					
Egotistical					
Humorous					
Individualistic					
Informal					
Insightful					
Intelligent					
Wide Interests					
Inventive					
Original					
Reflective					
Resourceful					
Self-confident					
Sexy					
Snobbish					
Unconventional					

(Non-Creative) Artificial	100	-3.44	1.25	.00	-7.0

Cautious
Commonplace
Conservative
Conventional
Dissatisfied
Suspicious
Honest
Well-mannered
Narrow interests
Sincere
Submissive

Missing Data

Missing data was noted randomly throughout the survey. If the respondents answered a minimum of 95% of the survey, their answers were included, and lack of data in random questions would not alter the data analysis or the outcomes of the research (Schlomer, Bauman, & Card, 2010). SPSS utilized a statistical model that permitted missing data without altering the data analysis in that an extra category was added for the missing variable. Missing data is a common occurrence on surveys, as participants may choose to skip a question due to various factors (Lodico, Spaulding, & Voegtle, 2010). Missing data due to randomness or purposeful skipping of questions was difficult to prove, but no discernable pattern was established.

Summary of the Results by Hypothesis

This section describes the testing of each hypothesis and the findings from the data analysis. Correlation analysis was utilized to determine the relationship amongst variables and the strength of variables. The following hypotheses were answered:

H1o. There is no statistically significant relationship between perceived

feelings of burnout in associate degree nursing faculty and creativity.

H1a. There is a statistically significant relationship between perceived

feelings of burnout in associate degree nursing faculty and

creativity.

H2o. There is no statistically significant relationship between feelings of

disempowerment of associate degree nursing faculty and creativity.

H2a. There is a statistically significant relationship between feelings of

disempowerment of associate degree nursing faculty and creativity.

H3o. There is no significant effect of the independent variables of burnout

and disempowerment on the dependent variable of creativity in

associate degree

nursing faculty.

H3a. There is a statistically significant effect of the independent variables

of burnout and disempowerment on the dependent variable of

creativity in associate degree nursing faculty.

Hypothesis 1

Hypothesis 1 attempted to form a relationship between the perceived feelings of

burnout and the creativity of nursing faculty. The CBI and the Creative Personality Scale

data was analyzed using a Pearson correlation test. Parametric testing was chosen for this

hypothesis as it relied on an assumption that the shape of the distribution between the

population and the descriptive statistics was normal in shape. The total creativity score

and each subset of the CBI were ran independently. The results confirmed a statistically

significant relationship between creativity and the participants perceived feelings of burnout in their personal, work, and student environments (personal burnout p = .004; work burnout p = .003; student burnout p = .000). The results are outlined in Table 9. Therefore, the researcher has evidence to reject the null hypothesis that there is no statistically significant relationship between creativity and the perceived feelings of burnout.

Table 9. *Correlation Between Creativity and Burnout*

| | | **Correlations** | | | |
		Total Creativity	Work Burnout	Student Burnout	Personal Burnout
Total Creativity	Pearson Correlation	1	-.205[**]	-.242[**]	-.197[**]
	Sig. (2-tailed)		.003	.000	.004
Work Burnout	Pearson Correlation	-.205[**]	1	.659[**]	.864[**]
	Sig. (2-tailed)	.003		.000	.000
Student Burnout	Pearson Correlation	-.242[**]	.659[**]	1	.656[**]
	Sig. (2-tailed)	.000	.000		.000
Personal Burnout	Pearson Correlation	-.197[**]	.864[**]	.656[**]	1
	Sig. (2-tailed)	.004	.000	.000	

Hypothesis 2

Hypothesis 2 attempted to determine if there was a relationship between creativity and the perceived feelings of disempowerment. The data from the Personality Scale and the CWEQ-II were analyzed using the Pearson correlation test as the chosen parametric test, assuming a normal distribution of the population in comparison to the descriptive

statistics. Utilizing a significance level of $p < 0.05$, the relationship between creativity

and the total score in CWEQ-II was found to be not statistically significant ($p = .109$). A

correlation test completed between creativity and each subset of the CWEQ-II showed

the six subsets to be not statistically significant except the relationship between creativity

and informal power ($p = 0.30$). The results are found in Table 10. Therefore, the

researcher must fail to reject the null hypothesis that there is no relationship between

creativity and disempowerment.

Table 10. *Correlation Between Creativity and Disempowerment*

	Pearson Correlation	Total Creativity Significance (2 tailed)	N
Total CWEQ-II	.110	.109	212
Subsets			
Opportunity	.060	.377	216
Information	.094	.171	216
Support	.094	.170	213
Resources	.095	.165	215
Formal Power	.036	.595	215
Informal Power	.149	.030	214

Hypothesis 3

Hypothesis 3 attempted to determine if there was a statistically significant effect

of burnout and disempowerment on the dependent variable of creativity. The data from

the CWEQ-II, CBI, and the Personality Scale were analyzed utilizing a multiple

regression analysis. Where the probability chosen is $p < 0.05$, the results are statistically

significant (p = .005) that there was a relationship between burnout and creativity in associate degree nursing faculty. However, there is no relationship between disempowerment and creativity in associate degree nursing faculty (p = .782). Table 11 represents the results from that data analysis.

Table 11. *Multiple Regression Between CWEQ-II, CBI, and Personality Scale*

		Unstandardized Coefficients		Standardized Coefficients		
Model		B	Std. Error	Beta	t	Sig.
1	(Constant)	5.908	1.371		4.310	.000
	Total Empower-ment	.022	.079	.021	.277	.782
	Total Burnout	-.012	.004	-.218	-2.864	.005

Coefficients[a]

a. Dependent Variable: Total Creativity

Chapter 4 Summary

Data analysis for hypothesis 1 revealed statistically significant results between the perceived feelings of burnout in faculty's personal, work, and student environments and the faculty's creativity adjective checklist. Interestingly, a Pearson correlation ran with data from the total CBI and demographic data showed there was no significant relationship between burnout and age (p = .767), higher levels of education (p = .813), or

amount of time in the job ($p = .163$). There was a significantly statistical relationship between burnout and the average amount of time spent with students ($p = .055$) and a marginally significant result between burnout and gender ($p = .087$).

Table 12. *Summary of Hypothesis 1 Results*

Hypothesis/Null Hypothesis	Analysis
H1a. There is a statistically significant relationship between perceived feelings of burnout in associate degree nursing faculty and creativity. H1o. There is no statistically significant relationship between perceived feelings of burnout in associate degree nursing faculty and creativity.	The researcher found evidence to reject the null hypothesis, as data analysis showed a statistically significant relationship between burnout and creativity in associate degree nursing faculty. Utilizing a $p < 0.05$, results of the Pearson correlation were: personal burnout $p = .004$; work burnout $p = .003$; student burnout $p = .000$.

Data analysis for hypothesis 2 revealed no statistically significant results from faculty's perceived feelings of empowerment and faculty's creativity adjective checklist. A Pearson correlation test was completed on the total CWEQ-II and demographic data, which revealed no statistically significant relations between empowerment and age ($p = .232$), empowerment and higher levels of education ($p = .551$), empowerment and time in job ($p = .619$), and empowerment and gender ($p = .479$). However, a statistically

significant relationship exists between empowerment and the average length of time the faculty spend with students ($p = .030$).

Table 13. *Summary of Hypothesis 2 Results*

Hypothesis/Null Hypothesis	Analysis
H2a. There is a statistically significant relationship between feelings of disempowerment of associate degree nursing faculty and creativity.	The researcher found evidence that failed to reject the null hypothesis. No statistically significant relationship was established between disempowerment and creativity in associate degree nursing faculty. Utilizing a $p < 0.05$, results of the Pearson correlation were $p = .109$.
H2o. There is no statistically significant relationship between feelings of disempowerment of associate degree nursing faculty and creativity.	

Data analysis for hypothesis 3 revealed statistically significant results in the correlation between perceived feelings of burnout and disempowerment and faculty's creativity adjective checklist. A Pearson correlation ran on creativity and the demographic data revealed a statistically significant relationship between creativity and the amount of time faculty have been in their job ($p = .020$). Other demographic data analysis showed no significant relationship; creativity and age ($p = .841$), creativity and highest level of education ($p = .571$), creativity and time spent with students ($p = .860$), and creativity and gender ($p = .217$).

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Table 14. *Summary of Hypothesis 3 Results*

Hypothesis/Null Hypothesis	Analysis
H3a. There is a statistically significant effect of the independent variables of burnout and disempowerment on the dependent variable of creativity in associate degree nursing faculty. H3o. There is no significant effect of the independent variables of burnout and disempowerment on the dependent variable of creativity in associate degree nursing faculty.	The researcher found evidence to reject the null hypothesis, as data analysis showed a significant relationship between burnout and creativity in associate degree nursing faculty. Utilizing a $p < 0.05$, results of the Regression analysis were $p = .005$, indicating a relationship between the independent variable of burnout on the dependent variable of creativity. The regression analysis showed no relationship between disempowerment and creativity, where $p = .782$.

Chapter 5 will report the results obtained with the expected findings and the literature review.

CHAPTER 5. CONCLUSIONS AND DISCUSSION

Introduction

Critical thinking is an "umbrella term" (Alfaro-Lefevre, 2008). There are multiple components to thinking critically in and out of the clinical setting for a nurse. Critical thinking requires right brain and left brain functions, which formulate purposeful, results-driven thought processes (Alfaro-Lefevre, 2008). Without critical thinking, nurses may have disorganized, emotion-driven, task-oriented thought processes that can result in negative patient outcomes and disorganized processes. Critical thinking requires creativity to come up with new ideas to do what it is in the best interest of the patient. Alfaro-Lefevre (2008) identified creativity, as well as 22 other behaviors, that are necessary in demonstrating critical thinking characteristics. Nurse educators are the gate keepers in building the foundation for critical thinking in nursing students and should be required to continue their own learning in critical thinking skills.

Burnout and disempowerment add stressors to an educator's work environment. Alfaro-Lefevre (2008) stated stress is the first factor to drain an individual's brain power and negatively affect their concentration. Whereas positive reinforcement or a healthy, empowering work environment promotes critical thinking and creativity by allowing individuals to make their own decisions and work independently. Identification of burnout and disempowerment in the work environment is crucial for directors and deans to recognize to enable them to intervene in ways that limit distractions in faculty, allow time to work on scholarly activities, and reduce stressors.

The purpose of this quantitative, correlational study was to determine the relationship between the perceived feelings of burnout and disempowerment and the effect they have on the creativity of associate degree nursing faculty. This study supported Rogers' diffusion of innovation theory. Rogers (2003) believed innovation took place in the social setting; therefore, the structure of the social setting influences the innovation of the individuals within that setting (Sahin, 2006). Social processes involve a great deal of interpersonal communication and support in order for the participants to feel welcome and safe in implementation of new ideas. Nurse educators must identify a healthy work environment in order to feel safe in researching and implementing new teaching strategies to improve critical thinking skills in their students.

This research utilized the Conditions for Workplace Effectiveness Questionnaire II and the Copenhagen Burnout Inventory to evaluate the work environment of the participants. Creativity was measured with the Creative Personality Scale. Data analysis was completed on the purposive sampling from members of NOADN. This chapter will summarize the results of the research, discuss the literature as it relates to the findings, identify the limitations of the research, and recommend further research ideas.

Summary of the Results

Data analysis was completed utilizing SPSS software. Descriptive statistics and Pearson correlation tests were completed on the data, and the following research questions were answered. Discussion of the results follows each hypothesis.

Research Question 1

Research question 1 sought to identify if there was a statistically significant relationship between perceived feelings of burnout in associate degree nursing faculty and creativity.

H1o. There is no statistically significant relationship between perceived feelings of burnout in associate degree nursing faculty and creativity.

H1a. There is a statistically significant relationship between perceived feelings of burnout in associate degree nursing faculty and creativity.

Pearson correlation was completed between the Copenhagen Burnout Inventory and the Creative Personality Adjective Checklist. The Copenhagen Burnout Inventory consisted of three subsets: personal burnout, workplace burnout, and student burnout. Utilizing an alpha value of 0.05, the correlation between workplace burnout and creativity was statistically significant ($p = .003$). The correlation between student burnout and creativity was statistically significant ($p = .000$). The correlation between personal burnout and creativity was statistically significant ($p = .004$).

In application to the hypothesis, the researcher would reject the null hypothesis for all correlations and, therefore, accept the alternative hypothesis demonstrating there is evidence for a statistically significant relationship between burnout and creativity in associate degree nursing faculty. Interestingly, when examining the subsets of burnout, all forms of burnout, including personal, work, and student, affected creativity, as they were all statistically significant, which leads one to wonder if workplace stressors carry over into personal life and vice versa. Analysis of demographic data also revealed a

statistically significant relationship between burnout and the length of time faculty spent with students.

A literature search did not reveal any research relating burnout to creativity or critical thinking in nursing faculty. Several articles linked job satisfaction to barriers, which have led to burnout, such as lack of support for scholarly activities, increased workload, time constraints, and institutional barriers (Bittner & O'Connor, 2012; Chinweuba, 2007; Ellis, 2013). Burnout, as defined in this research as a condition that develops from one's working environment, leads to lack of motivation, and feeling ineffective in one's job. Burnout is positively linked to job satisfaction and may lead to cyclically increasing levels of burnout when the conditions do not improve.

A healthy work environment supports faculty members from within to allow faculty the ability to seek out scholarship and pursue up-to-date literature for application in the classroom or clinical settings (Brady, 2010). Directors and deans must recognize unhealthy behaviors in faculty and seek to find solutions for job satisfaction, retention of staff, and excellence in nursing education. This will serve as recruitment for new faculty and nursing students. As the nursing shortage is present in 2015, healthy work environments are a necessity to maintain experienced faculty.

Maslach and Leiter (1997) believed the work place had become a cold, demanding environment, where it had become harder and harder for employees to attain job satisfaction or achieve the thrill they sought from a job well done. The work environment can certainly affect behaviors in the work setting, but it may also lead to personal stressors that are reflected onto interactions with students. Maslach and Leiter (1997) researched areas in which employees felt a mismatch between their work and their

personal values, creating perceived feelings of burnout. The authors noted work overload, lack of control, lack of reward, lack of community, lack of fairness, and value conflicts as factors which not only increased burnout in employees, but also created a work environment where burnout thrived and was often transferred to co-workers. In nursing education, faculty experience many of these factors due to the demand of the students and the nursing shortage. Data analysis in this research supported the theory that faculty who spend more time with students reported a larger amount of burnout, as compared to those who reported less time. Therefore, identifying burnout in one faculty may prevent additional faculty from becoming burned out and the inevitable spiraling effect of exhaustion, helplessness, and, eventually, job separation of valuable faculty members.

Maslach and Leiter (1997) identified high quality work by the amount of time and effort, creativity, and commitment employees put into their work. The burned out employee demonstrated a significant drop in quantity and quality of work, which ultimately became the bottom line of burn out (Maslach & Leiter, 1997). Clearly, the literature showed burnout was more than an individual's problem with coping. Burnout becomes an institutions problem when it affects productivity, student success, and job satisfaction. This research supported the significant relationship burnout has on faculty creativity.

Maslach and Leiter's (1997) research reinforced the notion that burnout was not just about a negative environment, but also the lack of positive feedback in the work environment. When faculty felt engaged in their work, they were motivated and encouraged by their productivity. A positive work environment continued to motivate

faculty, and creativity and innovation occurred from excitement of producing new solutions (Maslach & Leiter, 1997). The feelings and emotions staff experienced from the positive environment drove continued engagement and job satisfaction.

Creativity is a difficult concept to define. The literature search identified a limited number of studies which defined creativity, but even fewer studies which examined creativity and nursing. More importantly, when researching critical thinkers, creativity was an adjective that was mentioned in several articles (Fasnacht, 2003; Horng et al., 2005). Ferrari, Cachia, and Punie (2009) believed everyone held some form of creativity in themselves, but cognitive creativity stemmed from a cognitive or thinking process with a mental component that sought to create an innovative new concept. This process required an individual to have the knowledge, intellectual ability, personality, insight ability, and motivation to think in a new way (Ferrari et al., 2009). In this research study, faculty were asked to identify with specific adjectives through the Gough Adjective Checklist. Overwhelmingly, faculty chose adjectives that have often been cited as adjectives of creative people, such as self-confident, ambitious, passionate, and intelligent. Thus, faculty believed they were creative, or possessed the creative personality traits, but were not cognizant of the effect an unhealthy work environment may have had on their creativity.

Nursing faculty may not always be aware of which type of activities inspire creativity and critical thinking in their students. Creative teaching styles were commonly researched, and students who learned from creative faculty were more likely to become creative professionals. Creativity has occurred when a need or desire for a change arises in one's motivation; the result of this change produced a unique outcome (Maslach &

Leiter, 1997). Amabile (1998) wrote extensively about the effect internal motivation played on creativity, stating passion and an internal desire to do something was more of a motivator than external forces. Maslach and Leiter (1997) stated students knew when their teachers were burned out. The student saw less attention to detail in the faculty's work and a lack of personal support for the student. Attentive, engaged faculty have a direct impact on the institution, but also on the student's performance. Therefore, creativity and critical thinking work collaboratively to produce innovative results for patients or nursing students in the academic environment.

Ferrari et al. (2009) stated the creative process includes four phases: 1) preparation, 2) incubation, 3) illumination, and 4) verification. The first phase is when faculty identified a problem and sought to understand the problem or find solutions. The second phase began when faculty internalized the problem and found motivation to seek out a change in process. Theoretically, when faculty are feeling burned out, they may identify a problem, but lack the motivation or engagement to move into the second phase of creativity. Data analysis from this research study, showed a statistically significant relationship between the length of time faculty were in the job and creativity. It is possible that the longer faculty are in their position, the more burned out and disempowered they become. One could argue that with lack of feelings of empowerment, the faculty member would also stop in the second phase of creativity, breaking the cycle and never completing the creative process.

Florida (2002) studied creative environments and the cultural influence that stimulated creative staff. The author believed creative talents emerged in environments where technology, talent and tolerance were evenly balanced. This author's findings

supported the data in this research study, as faculty who perceived feelings of burnout, were less likely to feel creative. However, in hypothesis 2, an environment where faculty perceived feelings of disempowerment, faculty did not experience less creativity. This demonstrates a significant difference in environments of burnout versus disempowerment. Burnout has been linked to personal feelings or situations, whereas empowerment was linked to the resources and support in the work environment.

Research Question 2

Research question 2 sought to identify if there was a statistically significant relationship between feelings of disempowerment of associate degree nursing faculty and creativity.

H2o. There is no statistically significant relationship between feelings of disempowerment of associate degree nursing faculty and creativity.

H2a. There is a statistically significant relationship between feelings of disempowerment of associate degree nursing faculty and creativity.

Pearson correlation was ran on the CWEQ-II and the Creative Personality Adjective Check List. The CWEQ-II consisted of six concepts in empowerment: opportunity, information, support, resources, formal power, and informal power. The cumulative total for CWEQ-II and the creative checklist were analyzed, and the results were not statistically significant ($p = .109$). When the concepts of empowerment were separated into individual categories, the result for each were as follows: opportunity and the checklist were not significant ($p = .377$), results for information and the checklist were not significant ($p = .171$), the results for support and the checklist were not significant ($p = .170$), the results for resources and the checklist were not significant ($p =$

.165), the results for formal power and the checklist were not significant ($p = .595$), and the result for informal power and creativity were statistically significant ($p = .030$).

Research on the relationship between empowerment and creativity showed no statistically significant relationship between the two variables. The researcher failed to reject the null hypothesis and was unable to demonstrate a relationship between empowerment and creativity. The subset of informal power was defined as being derived from "social connections, and the development of communication and information channels with sponsors, peers, subordinates, and cross-functional groups" (Laschinger, Wong, and Grau, 2013, p. 2). This correlational analysis was statistically significant ($p = .030$) and showed a mild relationship to the work environment. In research question 1, the concept of burnout related to an unhealthy work environment, which was statistically significant to creativity. Therefore, it is logical to link informal power to creativity and understand the possible relationship that exists due to the social connections between faculty in the work environment.

Turnover in nursing education and even in healthcare is a growing concern cited by many studies, due to the looming nursing shortage (Fitzpatrick, Campo, Graham, & Lavandero, 2010). Numerous research studies have shown a link between organizational empowerment and staff nurse retention or job satisfaction, but no research has been found on empowerment and creativity. Laschinger et al. (2013) have reported several research studies linking burnout and disempowerment, citing the connection that when employees feel burned out, they are also likely to feel disempowered. The research findings in this study do not support the idea that empowerment and burnout are also connected to

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creativity. Faculty can feel burned out and lack creativity, but faculty who feel

disempowered do not necessarily lack creativity.

Breau and Rheaume (2014) found a basic structure of empowerment, where

faculty felt valued, managers sought feedback, and faculty had the opportunity for

advancement and access to resources, which allowed faculty to do their work and have a

positive impact on the work environment. The author's research utilizing the CWEQ-II,

supported the relationship between empowerment and job satisfaction. Job satisfaction

was further broke down into performance, leadership, and support from their manager.

These results were found to be congruent to previous research supporting empowerment

and job satisfaction, but measurement of creativity was not mentioned. Theoretically, the

lack of control over one's work environment would likely lead to a lack of innovation

and creativity in the classroom. The data analysis from this research study showed a

statistically significant relationship between the time spent with students and the amount

of perceived empowerment the faculty felt in their work environment, supporting the

theory of lack of control leads to lack of creativity. Perkins and Zimmerman (1995)

believed empowerment-oriented interventions provide the resources and foundation for

employees to develop new knowledge and skills and allow professionals to collaborate in

learning with colleagues. The authors stated empowerment allowed employees the ability

to achieve goals, which ultimately led to organizational goals being met.

Thomas (2009) identified workers who were highly engaged by their commitment

to work purpose and intrinsic values, such as job performance. The author felt that

intrinsic rewards were a result of positive reinforcements in the work environment.

Therefore, if faculty do not feel motivated and energized through positive feedback,

directors and deans would notice lack of creativity and innovation in faculty. The data collected for this research study did not support those findings, but significance found in the informal power subcategory could be linked to the intrinsic motivation faculty feel from their peers. Further research would be needed to correlate the relationship between peer support and support received from directors or deans.

Research by Baker et al. (2011) reported a significant negative relationship between burnout and disempowerment. The authors utilized the CWEQ-II in their research of associate degree nursing faculty and the relationship between empowerment and job satisfaction and found associate degree nursing faculty felt the most empowered in opportunities, which included challenges, gaining skills, and using skills learned. The lowest score was found in resources, such as paperwork, support for their job, and help with difficult tasks. These results are similar to this research study, as formal power and opportunity were the highest levels of empowerment the surveyed participants felt.

Research Question 3

Research question 3 sought to identify if the regression of the independent variables of burnout and disempowerment had a significant effect on the dependent variable of creativity in associate degree nursing faculty.

H3o. There is no significant effect of the independent variables of burnout and disempowerment on the dependent variable of creativity in associate degree nursing faculty.

H3a. There is a statistically significant effect of the independent variables of burnout and disempowerment on the dependent variable of creativity in associate degree nursing faculty.

A regression test of the Copenhagen Burnout Inventory and the Creative Adjective Checklist were analyzed, and the results were found to be statistically significant ($p = .005$) for a relationship between creativity and burnout. A regression test between CWEQ-II and the Creative Adjective Checklist found no relationship between disempowerment and creativity ($p = .782$). The linear relationship between the independent variable of burnout and the dependent variable of creativity summarizes a positive relationship developed. A regression test with a positive result demonstrated a strong correlation between burnout and creativity. The independent variable of burnout can promote a positive or negative change in creativity and in this instance, the data analysis shows a positive change, which means as perceived feelings of burnout increases, creativity decreases.

One article was found in a literature search that studied burnout, creativity, and tedium. Berg et al. (1994) research supported the effects burnout and tedium have on a nurse's creativity in a ward of dementia patients. The authors found through clinical supervision and an active support system, nurses in the study experienced less stress, burnout, and tedium in their job, which increased creativity, job satisfaction, and patient outcomes. Beyond this study, the concepts have been vaguely tied together in research, and no research was found linking burnout, disempowerment, and creativity. It is evident there is a large gap between the concepts of burnout, empowerment, and creativity in associate degree nursing faculty.

Maslach and Leiter's (1997) research on burnout included one's lack of control in the work setting. When faculty were not able to work independently or seek out creative solutions for daily problems, their involvement in the institution becomes less and less

over time. Without some control of their work, faculty did not find the balance between work and personal values (Maslach & Leiter, 1997). Empowered faculty perceived some control in the work environment and the necessary resources to allow autonomy in their daily work (Perkins & Zimmerman, 1995). Total control is often not possible in an organization, but if faculty are not able to take control of a challenging new part of their work, motivation is quickly drained. Therefore, a mismatch occurs leading to burnout and further feelings of lack of control.

Discussion of the Results in Relationship to Literature

The findings from this research study support the assumptions formed from many clinical observations by this researcher and colleagues. Research findings in the literature support the correlation between a healthy work environment and productive faculty with high job satisfaction. Conversely, unhealthy work environments lead to higher faculty turnover, job dissatisfaction, and may lead to burnout. Overall, the findings in this research study support the correlation between negative cultures where burnout and disempowerment exist with faculty productivity and lack of motivation to be creative and innovative. There still remains a large gap between the theory and practice in supporting faculty to limit negative behaviors in the work environment by colleagues, students, and directors. Burnout and disempowerment are just two variables that this study focused on to support faculty in scholarly activities.

The findings on burnout and creativity were assumed prior to this research study, and obtaining the statistically significant relationship confirmed the premise that the added stressors of burnout in the work environment negatively affected faculty's creativity and critical thinking. Surprisingly, the results in examining disempowerment

were not expected. The assumption that burnout and disempowerment worked in parallel and would affect faculty in much the same way was not supported by the data, which leads this researcher to believe that faculty may feel supported by directors and deans, yet be experiencing other factors that drive the feelings of burnout. The knowledge gained from these results should lead directors and deans to be cognizant of burnout symptoms and work towards a healthy work environment where faculty feel supported in and out of the classroom and clinical environments.

Limitations

Limitations in research studies often focus on methodology but can also include critique of the research study itself (Lodico, Spaulding, & Voegtle, 2010). This research study is limited by the population chosen of associate degree nursing faculty. Further research is needed to examine the cultural differences between associate degree nursing faculty and baccalaureate nursing faculty. The difference in institutions, a 2-year versus a 4-year program, may allow faculty the opportunity to participate in scholarly activities, which are built into their contract. An additional question in the survey regarding faculty workload and time allowed for scholarly activities may have shed light on how faculty are supported through continued education and research.

The limited number of responses, as represented by a 20% response rate, is an additional limitation of the research study. The lower the response rate, the greater the chances the population is not a good representation of the population. Unhappy employees tend to take aim at their employers and often reach out looking for support (Tripp & Gregoire, 2011). The low number of participants may be directly related to the low number of faculty feeling burned out or disempowered. People respond for various

reasons, but Internet surveys tend to have a lower response rate (Lodico, Spaulding, & Voegtle, 2010). A separate mailing with a link may have generated additional responses.

Implication of the Results for Practice

This study's findings are significant in the role faculty play in creating a learning environment for students to become creative, critical thinkers. The ability for directors and deans to take this research and strive to create a healthy work environment and minimize burnout are vital factors in a nursing student's success on NCLEX and in the nursing profession. Consideration should also be given to the significance of informal power and the relationship to creativity. This further supports the desire that faculty perceive the need to have support socially within the work environment. This researcher also believes the significant values in burnout demonstrate for various reasons; faculty are burned out and addressing the work environment should be a priority of nursing programs.

Critical thinking concepts and discussion in the field of nursing education first appeared in articles in the 1980's. Since that time, nurse educators have researched, analyzed, and implemented strategies to promote critical thinking through the use of creativity. The interest and necessity to continue to explore this concept will not be waning anytime soon (Zygmont & Schaefer, 2006). The National League of Nursing (NLN) and the American Association of Colleges of Nursing (AACN) have also realized the importance of critical thinking by mandating the concept be incorporated into a nursing curriculum to achieve accreditation (Institute of Medicine, 2011). Critical thinking has become an obsession that drives nurse educators to implement creative strategies that lead to successful outcomes (Billings, 2003).

Recommendations for Further Research

Based on the results of this research study, recommendations for further research are reflective of the direction healthcare and nursing programs should be aiming. Critical thinking as it relates to the nursing profession should be a priority. A common definition must be understood by the profession, which assures accuracy in measuring a nursing student's ability to think critically and to make certain nursing programs nationwide are meeting the demands of healthcare. However, this endeavor began over a century ago and will continue to be a challenge.

Next, construction of an objective tool that measures creativity in nursing faculty to ensure faculty are held to the higher standards expected of them by accrediting bodies and the nursing profession should be a priority of nursing programs nationwide. An objective, standardized tool will demonstrate the qualified nature of the nursing profession. If nurses are expecting to sit at the table with other professionals in healthcare, then the standards should be clearly outlined beginning with nursing faculty and upheld through all organizations. Further research should be conducted on the creation of a tool that supports the link between creativity and critical thinking in the nursing profession to ensure students receive education in both areas and are able to meet the demands of the nursing profession. This higher order of thinking and performing will ensure quality patient care from all nurses.

Research on the effects a social support system could have on nurse educator's burnout and creativity in associate degree nursing programs to eliminate the perceived feelings of burnout and disempowerment would be beneficial to the nursing profession. A healthy work environment will encourage creativity and support empowerment amongst

colleagues. Finally, research on the creativity of baccalaureate nursing faculty in comparison to associate degree nursing faculty would be instrumental in establishing a relationship, if any, between the creativity of associate degree faculty and baccalaureate nursing faculty and possible barriers that can limit creativity.

Conclusion

In conclusion, this quantitative, correlational research study supports the perceived link between burnout and creativity in associate degree nursing faculty. Nursing education continues to evolve, but at a much slower rate than health care reform. In order for nursing students to hit the ground running, nursing programs must adequately prepare students for an environment of fast-paced changes that require critical thinking and creativity. Nurses are required to be competent and work independently, but if nursing faculty fail to build the foundation for critical thinking, nurses become frustrated, and patient outcomes may suffer.

The American Association of Colleges of Nursing (2012) supports the need for nursing faculty to engage in scholarly research for both classroom and clinical learning environments. Nursing faculty should not only promote lifelong learning, but they should engage in learning for their own personal development. If faculty continue to strive for this benchmark, healthcare will benefit from well-educated nurses who are able to meet the needs of their patients and improve patient outcomes.

Nurse educators must also recognize the correlation burnout has on their classroom and clinical work environments. It is a faculty members' responsibility to continue to be students, seek out learning opportunities, research, and engage in

professional committees to grow as an educator. Directors and deans should open up lines

of communication to improve work conditions and minimize the effects burnout has on

faculty.

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