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**A Descriptive and Exploratory Case Study of Secondary
Education in the British Colony of Hong Kong-1960-1980:
Implications for Nursing Education in the United States**

by

Sylvia Lee Huie

A Dissertation Submitted to the Faculty of the
Graduate School of Loyola University of Chicago in
Partial Fulfillment of the Requirements for the
Degree of Doctor of Philosophy

December

1987

DEDICATION

To the memory of my father

Lee Lok Shan

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VITA

The author, Sylvia Lee Huie, is the daughter of Marian Lee and the late Lee Lok Shan. She was born in Hankow, in the People's Republic of China.

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CHAPTER I

NURSING EDUCATION IN THE UNITED STATES AND HONG KONG: AN OVERVIEW

Introduction

Speculations on the future destiny of Hong Kong have been very much in the news for the past several years. The impending return of Hong Kong and its surrounding territories to China when the lease expires in 1997 has created a mass emigration of the population. Many residents have already begun to leave Hong Kong with their families to settle in more desirable locations such as the United States. They have also started sending their children abroad to continue their education in specialized fields of study with the hope that their children may settle in those countries after their studies are completed rather than returning to Hong Kong.

There are cultural and social patterns which influence each student, teacher, or administrator, such as their individual values, attitudes, cognitive styles, self conceptions, role expectations, and modes of interpersonal interactions. All of these factors are brought from each pupil's, teacher's, and administrator's various backgrounds into the school context. Foreign students have much to learn, not only the educational material, but also a new

language, new foods, and a new culture. The adjustment these students must make, from an "old" to a "new" way of life, is often wrought with many difficulties and much effort.

In consideration of the health care field, the behavior and response to health and illness are also influenced by people's socio-cultural backgrounds. Individuals bring with them distinct practices for the prevention and treatment of illness. The American health care providers have been socialized to believe that modern medicine, as taught and practiced in Western civilization, is the answer to all human needs. There is a common tendency within the medical profession not to perceive patients as they are, as individuals with varying backgrounds. Rather, they incline to judge patients with a set of predetermined rules of behavior sick people are expected to respond. Nurses from a different culture, for example, may experience conflict in their attitudes and practices; therefore, they experience difficulty in deciding whether to hold onto their traditional customs or to drop them and adopt the ones they are learning in nursing schools of their host country.

As the largest group of health care providers in the United States, nurses and the profession of nursing itself are changing along with the needs of society. The effects of urbanization, industrialization, advances in technology,

improvements in technique, as well as new discoveries in medicine have made nursing a highly technically skilled and complex social system. Because of the continuous efforts of many nursing leaders and educators, nursing education has systematically been upgraded and revised. Nevertheless, the public has traditionally viewed the nurse as a person who comforts and cares for the sick rather than as a highly trained health care professional. To this day, the general public, and in some cases other professionals as well, have little accurate understandings of a nurse's educational background and role.

Purpose

The purpose of this research is to present a descriptive and exploratory case study of secondary education in the British Colony of Hong Kong from 1960 through 1980. During these years tremendous changes took place in the society of Hong Kong. Among them were: a doubling in population; unparalleled growth of the economy; concern on the part of the government and community about social and educational welfare; a great increase in world travel; and the increased accessibility of foreign studies to those other than the wealthy and the elite. Because nursing education is an area of immense interest to many residents of Hong Kong, an attempt will be made in this

research to examine the implications of the academic and cultural background of students from Hong Kong attending nursing education in the United States. At present, the ever increasing demands placed on the nurse's role have led to the formulation of a variety of nursing programs each with its own purpose. In consideration of the complexity of nursing education as a specialized field, only programs which prepare graduates for licensure as registered nurses will be explored. Therefore, for the purpose of this study, education as it relates to licensed practical or vocational nursing will be omitted. A description of the various types of programs available, the choice of a particular program, and the admission procedure will also be explored.

Historical Development of Nursing Education

The word "nurse" was first applied to the care given to infants. The mother, who was usually the care provider, was responsible not only for nursing the child, but also for the care of any sick family members and/or neighbors. Methods of care were passed by word of mouth, most often among the women of the community. In early societies, small organized community services were formed to cope with various health problems. Many times, illnesses were viewed as evil-doings by some cultures, and the care of the sick was closely allied to religion, superstition, and magic.

The first group officially organized for nursing purposes was the male nursing order of the Crusaders who founded the military religious Order of the Hospital of St. John of Jerusalem. The members of the Order were known as Knights Hospitalers. These Hospitalers fought during battles and also cared for the sick and the wounded.¹ At the same time, the rise of Christianity stimulated many wealthy Christian converts to become "deaconesses," formerly a humble occupation for slaves, to attend to the sick as a way to fulfill their Christian duty. The Order of Poor Clares, composed largely of formerly wealthy women who preferred a life of service, the Tertiaries founded by St. Francis, and the Third Order of St. Dominic were some of the other religious nursing orders. Generally, women were not allowed to pursue any career such as nursing or teaching unless they joined the appropriate religious orders. Nursing was regarded by many people as a "calling" rather than a career; hence, the rise of the public's expectation of a nurse's self-sacrifice, acceptance of low pay, and unquestioned obedience to orders was born. Many of the characteristics or attitudes found in nursing today, such as the wearing of caps and uniforms and the use of the name "sister," can be traced back to the Middle Ages.

During the Reformation, many of the Catholic

¹Norma Anderson, "The Historical Development Of American Nursing Education," Journal of Nursing Education 20, No. 1, (January 1981), p. 19

organizations were disrupted by the movement, and nursing was at its lowest in the countries that were involved. As the state began to close its churches, monasteries, and hospitals, the nursing profession lost its social standing along with the churches. Nurses were no longer recruited from the respectable classes of the community. Care of the ill and unfortunate fell to whomever would accept the job. Generally, nursing was provided by women who were too old or ugly to be prostitutes or too incompetent to be housemaids. These women had little or no education, no experience in the care of the sick, and very little interest in improving their nursing ability. Discipline and supervision were almost nonexistent, and most of the nurses worked very long hours for little or no pay.

In 1836, one of the most important developments in nursing education on the Continent was the founding of the Deaconess School of Nursing at Kaiserswerth, Germany. A Lutheran minister, by the name of Theodore Fliedner (1800-1864), and his wife founded a hospital for the poor and utilized the deaconesses to provide the nursing care. The Kaiserswerth School offered a three year program. It included lectures in theory, ethics, religion, and nursing art. Physician's bedside instructions and household duties such as cleaning, laundry, cooking and nursing care were also emphasized. Kaiserswerth was the first organized

training school for nurses.²

Florence Nightingale, (1820-1910), a very well educated, wealthy, and socially prominent English woman, was sensitive to the poor conditions in hospitals and other health and welfare facilities. The social situation motivated her to enter the nursing profession. It was at Kaiserswerth that Florence Nightingale studied nursing. In addition to her studies in Germany, Nightingale's services in the Crimean War, her years of nursing experience as hospital superintendent, and her intense research on health care all helped her develop an entirely new concept of nursing. She felt strongly that both education and practice were necessary in order to function properly in the nurse's role. The profession of nursing must learn to apply theoretical concepts to practical use.³

In 1860, incorporating her own ideas with those she learned, Nightingale established a school of nursing at St. Thomas Hospital in London, England. For one year, the nursing students studied at the school, after which time they were added to the nursing staff for two years where they gained supervised clinical experience. A diploma was awarded to each student upon the completion of the training

²G.J. Griffin, and J.K. Griffin, History and Trends of Professional Nursing, 7th ed. (St. Louis: The C.V. Mosby Co., 1973).

³Florence Nightingale for Her Nurses, (London: MacMillan and Co. Ltd., 1914).

period. Two types of students entered the school: wealthy and educated girls who paid a tuition fee and were expected to become matrons and teachers; and young women of the poorer classes who were paid a modest wage to provide the care. Nightingale's three-year diploma program became the model for nursing education both on the Continent and the United States.

Before Florence Nightingale's time, excluding the religious orders, only males were allowed to become nurses. It was assumed that any female who would engage in this occupation would also be a prostitute. Following the time of Florence Nightingale, women were allowed into the nursing profession, and in the ensuing years, nursing has become almost exclusively a female-dominated occupation. Not only are the nurses' peers and supervisors likely to be females, but the general public expects nurses to demonstrate the female personality traits associated with nurturing and serving. Nurses are expected to be maternal, caring, compassionate, and as emotionally involved with patients as mothers are with their sick children. Nurses are also perceived as passive, unassertive, submissive, and dependent females in contrast to the physician who is regarded as decisive, aggressive, independent, and a dominant male father-figure.⁴ Unfortunately, the perception of these

⁴Helen Cohen, The Nurses' Quest for a Professional Identity (California: Addison-Wesley Publishing Co., 1981).

traditional female "traits" interferes with the nurse's professional orientation. Regardless of how modern the curriculum or the type of teaching method, the age-old tradition persists and continues to be communicated to the students, resulting in a lack of autonomy in nursing which is apparent at all levels.

Nursing Education in The United States

Florence Nightingale's school at St. Thomas Hospital in London, England was established during the time of the Civil War in the United States. The lack of trained nursing personnel to care for the sick and wounded forced the development of the first real nursing schools in the United States. A number of nursing schools patterned after the Nightingale model were opened in New England, New York City, and Massachusetts. These early schools contracted with hospitals for the provision of nursing services in exchange for educational services. During the following decades, the number of training schools rapidly expanded. These schools extended from the East Coast to as far west and as far south as Denver and the Gulf Coast. The rapid expansion of hospitals and nursing schools somewhat lowered the educational standards particularly in the smaller hospitals. The clinical facilities in the community hospitals, where nursing students were located for their training, were

frequently inadequate. Hospitals also saw an economic advantage in the establishment of schools of nursing as a means of providing service to patients. Thus, they discovered that students in training were not only more easily disciplined and controlled than hired nurses, but they were also cheaper and more satisfactory in providing their service. Most hospitals established nursing schools to provide nursing for the hospitals. Nursing leaders, such as Abbey Woolsey, stressed the desirability of elevating nursing to an educated and honorable profession. In her book, A Century of Nursing, written in 1876, Woolsey pleaded for quality in educational programs and expressed her belief that nursing schools should be equal to teacher's colleges.

As the number of schools increased, the need for trained instructors also increased. It was soon recognized that nurses who wished to prepare for administrative or teaching positions were not adequately prepared by the basic nursing programs. The university was the place to fulfill the required education. Isabel Hampton Robb (1860-1910), an outstanding leader in nursing and nursing education, identified problems in nursing education and suggested several solutions. She worked tirelessly for state registration of nurses, standardization of nursing educational programs, and better preparation of nursing instructors. Through the efforts of Robb and her colleagues, classes at Teachers College, Columbia University

were organized in 1899 and became the first university classes for graduate nurses in the United States. In the years to follow, there were continuous revisions of the curriculum, standards of education and scope of practice in nursing. The American Society of Superintendents of Training Schools, the National League for Nursing Education, the American Nurses Association, the American Public Health Association, the National League for Nursing, and the International Council of Nurses were all founded to ensure the continuation of nursing standards and performance. In 1903, a handful of eastern states passed laws establishing a legal system of registration and licensure. This practice was eventually followed by the remainder of states.

When World War I ended, the Goldmark report, funded by the Rockefeller Foundation, revealed many weaknesses in the educational preparation of nurses. Nursing education in 1922 was still on an apprenticeship basis. The Rockefeller study resulted in the establishment of endowed collegiate schools of nursing (Table I).

Table I

Growth in Nursing Education in the United States
1880-1926

<u>Year</u>	<u>Nursing Schools</u>	<u>Nursing Graduates</u>
1880	15	157
1890	35	471
1900	432	3,456
1910	1,129	8,140
1920	1,775	14,980
1926	2,155	17,522

Source: United States Bureau of Education

In the wake of World War II, a shortage of nurses existed. In an effort to solve this problem of providing more nurses for the military services, the Cadet Nurses Corps was established. All of the essential theory and practice were completed in two-and-a-half years. The demand for nurses continued after World War II due to the expansion of the biomedical sciences.

Since the practice of nursing has become more complex due to advances in medicine and high technology, the nursing profession is confronted with the problem of keeping up with this progress. Such problems have led to the recommendation that nursing practice be divided into two career roles based on educational preparation. For instance, two studies on nursing education, the Brown's Report (1948) and Bridgeman Report (1953), both pointed out the weaknesses in nursing

education.⁵ It was recommended that nursing be placed within the framework of higher education. By combining both the nursing shortage and the problems in nursing education, Montag's study on the differentiation of nursing functions in 1951 suggested a method of preparing a new type of nursing; the associate degree nursing program. This program was intended to prepare technical nurses to work under the supervision of professional nurses and to attend to the intermediate or "technical" functions of nursing care. In the thirty years since its inception, the associate degree program has become the largest category of nursing education in the United States.

In some areas of the country, there is strong support for the requirement of a baccalaureate degree for licensure as a registered nurse. However, in most areas there are still three kinds of nursing programs: baccalaureate, associate degree, and diploma programs. A new addition during recent years is the "articulated" or "degree completion" program, which is designed for students who have already obtained registered nurse licensure through the diploma or associate degree and wish to continue their nursing education to obtain a baccalaureate degree.

In general, nurses prepared in baccalaureate programs

⁵Esther L. Brown, Nursing For The Future (New York: The Russell Sage Foundation, 1948), p. 77, and Margaret Bridgeman, Collegiate Education for Nursing (New York: Russell Sage Foundation, 1953).

would be held responsible for the more complex aspects of nursing care, while nurses educated in diploma and associate degree programs would administer the more standardized components. Despite the intent of associate degree programs to prepare a specific type of worker, the graduates of these programs are required to take the same state licensing exam as those taken by the diploma and baccalaureate graduates in order to be registered. All programs require nursing graduates to accept equal legal responsibilities. Thus, beginning in 1952, nurses were being prepared in three types of educational programs, each of which had been conceived in a different light. The bifurcation between collegiate and non-collegiate programs has continued to be a source of great frustration and argument.⁶ Members of the nursing profession are now considering the feasibility of altering this practice by differentiating more precisely among nurses based upon their educational preparation. Under this plan, the title of professional nurse would be reserved for graduates of baccalaureate programs, while diploma and associate degree graduates would be categorized as technical nurses.

Baccalaureate program. These programs are offered by a senior college or university and are similar in nature to

⁶Jerome Lysaught, Action in Affirmation Toward an Unambiguous Profession of Nursing (New York: McGraw-Hill Book Co., 1981).

all other programs offered by the institution. An applicant majoring in nursing must meet the admission, promotion, and graduation requirements expected of all students. The course of study combines special education in the theory and practice of nursing with general education in the humanities and the behavioral, biological, and physical sciences. These programs are usually completed in four years. In some programs, one or two years of general education is a prerequisite for admission to a college program in nursing. In others, general education courses and nursing courses are integrated throughout the course of study. A wide variety of health facilities are utilized as clinical laboratories for selected learning experiences in nursing practice. The objective of these programs is to prepare a professional practitioner who is capable of planning, providing, and evaluating nursing care for individuals, families, and special population groups in the home and in health care facilities. Only graduates of baccalaureate programs are qualified for public health and community nursing and may begin their careers as staff nurses in public health agencies and hospitals. These graduates also have the educational background necessary for graduate study, which prepares them for clinical specialization, supervision, consultation, teaching, administration and research (Figure I).

Figure I

Sample of a four year Baccalaureate Degree Program

First year

Fall Semester	Units	Spring Semester	Units
Chemistry	5	Chemistry	4
Psychology	3	Sociology	3
Intro. to Nursing	2	Intro. to Nursing	2
English	3	English	3
Elective	2	Human Anatomy	3
Physical Education*	<u>1</u>	Physical Education*	<u>1</u>
	16		16

Second Year

Fall Semester	Units	Spring Semester	Units
Bacteriology	4	Physiology	3
Psychology	3	Nutrition	2
Fundamentals of Nursing I	8	Fundamentals of Nursing I	8
Physical Education*	1	Elective	2
	<u>16</u>	Physical Education*	<u>1</u>
			16

Third Year

Fall Semester	Units	Spring Semester	Units
Nursing II	7	Nursing II	7
Political Science	3	Political Science	3
Nursing Research	3	Nursing III	7
Public Health Science	<u>3</u>		
	16		17

Fourth Year

Fall Semester	Units	Spring Semester	Units
Trends in Nursing	2	Senior Nursing Seminar	2
Nursing IV	10	Nursing V	8
Elective	3	Prin. of Administration	2
	<u>15</u>	Elective	<u>3</u>
			15

* Many colleges no longer require P.E. but offer it as an elective.

Source: Mary Searight, Your Career in Nursing, (New York: Julian Messner, 1977), pp. 133-134

Associate Degree Programs. Many characteristics of the associate degree program are similar to those of the baccalaureate program in that both are conducted and controlled by an educational institution. However, the objectives of the two programs differ. The associate degree program in nursing is not equivalent to the first two years of baccalaureate study. The majority of associate degree programs are located in community and junior colleges, although a few are located in senior colleges and universities or private institutions. An applicant must complete the admission, promotion, and graduation requirements compulsory for all students. The course of study may be two academic years or two calendar years, combining nursing theory and practice with college-level, general education courses in the liberal arts and sciences. Health facilities are utilized to provide selected learning experiences in medical-surgical nursing, maternal and child nursing, and psychiatric nursing. The program is designed to prepare the graduates to give patient-centered care, usually as general duty nurses in hospitals. The graduates have technical nursing competence based on an understanding of the scientific principles of nursing care. The focus of the program is on the relationship between theory and practice (Figure II).

Figure II

Sample of the Associate Degree Program

First Year

Fall Semester	Units	Spring Semester	Units
Anatomy	3	Physiology	3
English	3	Bacteriology	3
Psychology	3	Sociology	3
Nursing I	5	Nursing II	5
Physical Education*	<u>1</u>	Physical Education*	<u>1</u>
	15		15

Second Year

Fall Semester	Units	Spring Semester	Units
U.S. History	3	Political Science	3
Nursing III	10	Nursing IV	10
Physical Education*	1	Physical Education*	1
Elective	<u>2</u>	Elective	<u>2</u>
	16		16

*Many colleges no longer require P.E. but offer it as an elective.

Source: Ibid, pp. 127-128

Diploma Programs. These programs are generally three years in length, although some programs have been shortened to either thirty months or two calendar years. In most diploma programs, students complete the major portion of their clinical experience in the home hospital. The disciplines of psychiatry, pediatrics, and obstetrics are offered in affiliated institutions if they are not adequate in the hospital curriculum. The program is focused primarily on the sick and disabled in hospitals and similar community agencies. Nursing courses include theory and

practice in medical-surgical nursing, maternal and child nursing, and psychiatric nursing. The program is designed to prepare the graduate for a beginning position usually in a hospital as a general duty nurse. These graduates possess technical competence as a major emphasis of this program is on learning through the practical application of knowledge (Figure III).

Figure III

Sample of the Diploma Program

First year

Fall Semester	Units	Spring Semester	Units
Nursing I	6	Nursing II	10
Physiology	3	Anatomy	3
Psychology	3	Nutrition	2
Sociology	<u>3</u>		
	15		<u>15</u>

Second Year

Fall Semester	Units	Spring Semester	Units
Nursing III	11	Nursing IV	11
Microbiology	3	Public Health	3
Psychology	<u>3</u>	Ethics or Philosophy	<u>3</u>
	17		17

Third Year

Fall Semester	Units	Spring Semester	Units
Nursing V	12	Nursing VI	11
Trends in Nursing	2	Elective	5
Elective	<u>3</u>		
	17		<u>16</u>

* Courses in natural and social sciences may be taught at an affiliating college.

Source: Ibid, pp. 122-123

Articulated Programs. These programs are specially designed for registered nurses who have graduated from the associate degree and diploma programs to obtain the baccalaureate degree in nursing. Graduates of diploma programs and associate degree nursing programs seeking opportunities for career mobility have increasingly recognized that a baccalaureate degree is essential for beginning leadership positions and for advanced study. Much research has been done on the relationship of education to the performance of graduates of these various programs. For example, the percentage of graduates of these three programs who passed the State Board Examinations was compared and evaluations on the proficiency in performance were rated. It was found that the diploma graduates had the highest passing rate, baccalaureate degree graduates second, and associate degree graduates the lowest. On performance, despite frequent claims about the differences between associate degree and baccalaureate curricula in theoretical content and clinical experience, actual observations of the graduates indicate little differences between them, except in areas of problem solving and leadership abilities where baccalaureate graduates are considered to be better. However, the consistent opinion expressed within nursing circles is that there is a difference in performance between the various educational programs. Such an opinion is used to justify the thwarting of associate degree graduates to

continue with their education toward the baccalaureate in nursing.

Because the students in the articulated or degree completion programs are already registered nurses, their experiences and prior education are applied to their course work which is designed to help develop further expertise in the areas of physiology, community nursing, interpersonal relations, management, leadership and teaching skills, as well as in a specialty of their choice. In order to qualify for this type of program, a registered nurse with a diploma would be required to complete the community (junior) college general education requirements equivalent to an associate degree upon transferring to a senior college (Figure IV).

Figure IV

Sample of the Articulated Program

Junior Year

Fall Semester	Units	Spring Semester	Units
Community Health Nursing	6	Community Health Nursing	6
Pathophysiology	3	Microteaching	1
Physical Assessment Lab.	1	Health & Culture	4
Principles of Group Interaction	2	Principles of Group Interaction	2
Electives	4	Electives	<u>3</u>
	<u>16</u>		16

Senior Year

Fall Semester	Units	Spring Semester	Units
Preceptorship Study	4	Preceptorship Study	4
Management	4	Trends in Professional Nursing	2
Electives	8	Electives	<u>10</u>
	<u>16</u>		16

Source: Ibid, p. 137

Nursing Education in Hong Kong

Similar to other educational systems of Hong Kong, nursing education in Hong Kong follows the British model. Prior to 1893, hospital workers in Hong Kong were for the most part, untrained, apart from a few European nursing sisters who came from England. It was the general belief that the work of nurses was no more than that of housemaids. By the beginning of the twentieth century, there were two government hospitals to provide the health care needs of the

Colony. These two hospitals were also the foundation for nursing training. In 1912, the first group of women, three English and one Chinese, who spoke the English language, were accepted as apprentices to learn the skills of nursing. The English language was the medium of instruction. It was difficult to recruit Chinese to become nurses because of the language barrier.⁷ These young nurses provided nursing services to patients in the hospitals under the supervision of English nursing sisters. The resignation rate of probationer nurses was high, mainly due to the requirement that all probationer nurses be unmarried. In spite of the difficulties, slow and steady progress was made by those who took up nursing as their career and remained single.

In 1921, the first school of nursing was opened. It consisted of seventeen male and female probationer nurses, most of them Chinese. The school was organized on a very rudimentary study-hour system. Probationer nurses attended classes and worked in the wards taking care of patients during the day. They put in long hours each day studying and working. In 1931, the Hong Kong Nursing Board was formed, and Chinese nurses gradually became the backbone of the hospital staff. Unfortunately, promotion prospects for locally trained nurses were very unlikely, and the resignation rate remained high.

⁷Stratton, D., "History of Nursing in Government Hospitals," The Hong Kong Nursing Journal (May 1973), pp. 34-37

During the Japanese occupation between 1941-45, nursing training was interrupted and suspended. It was not until December 1945 that the school of nursing was reopened. Lectures were given by experienced nursing sisters and senior medical officers, while the matron and medical superintendent both served as examiners. The bulk of learning by the probationer nurses was acquired through four years of apprenticeship in the wards. Because almost all of the nursing sisters were English and a large proportion of the patients were Chinese, the probationer nurses had to be fluent in both the English and Chinese languages.

It was not until the first qualified English sister tutor arrived in 1949 that a formal syllabus and curriculum were formulated for nursing education. She modernized the training program by introducing the Preliminary Training School. During the three months of preliminary training, the new probationer nurses enjoyed full student status and learned basic nursing and natural sciences prior to working in the wards. The training period was eventually shortened to three years. Along with this trend toward modernization, there were gradual improvements in student welfare and promotional prospects for locally trained Chinese and Portuguese nurses. The resignation rate began to drop considerably during these years.

In 1953, a locally trained Chinese nurse became the first qualified sister tutor after successfully completing

the Sister Tutor's Diploma Course at the Royal College of Nursing in Edinburgh, Scotland. A number of qualified English sister tutors also joined the teaching team in the government hospitals.

In 1954, the Study-block System replaced the Study-hour System. Probationer nurses studied full-time for a total of twenty weeks which were divided and spaced over the three years during the course of their training. Students were not required to attend class and work in the wards on the same day, and clinical experience was planned, recorded, and evaluated. In addition, the title of the trainee from "probationer nurse" was changed to "student nurse." As the number of nursing schools increased and the welfare of the students improved, the number of students entering into nursing was also on the rise. A scrutiny of progress in nursing education during the past thirty years has revealed a change in terminology from "training" to "education," from "superintendent" to "director," from "probationer" to "student nurses," and from "training school" to "school of nursing."

By the early sixties, a few more locally trained Chinese nursing sisters received their Sister Tutor's Diploma. However, political turmoil, including the riot of 1967, had caused the exodus of the English sister tutors, further accentuating the so-called brain drain. During and shortly after the riot, even the Chinese tutors were leaving

Hong Kong. New graduates shouldered greater responsibilities while the senior nursing staff emigrated to Canada, the United States, and Australia. The problem of a shortage of tutorial staff became most acute by the end of 1967, leaving only four qualified tutors. Nevertheless, the training of students continued, as well as active recruitment of sister tutors and the utilization of senior staff nurses to teach in the nursing school. Meanwhile, the somewhat out-dated policy of offering scholarships to only the unmarried nursing candidates was waived, and the restriction on recruiting male nurses was lifted. With the approval of the Government Training Division, the training period for tutors was shortened to ten months. The Australian ten-month Diploma in the Nursing Education Course was selected in lieu of the British two-year Sister Tutor's Diploma Course. Three nursing officers were sent to the College of Nursing in Melbourne in 1968, returning fully qualified by the end of the year. From then on, nurses were selected on an annual basis.

In 1968, the existing Study-block System was extended to thirty-four weeks. Curriculum and nursing procedures were revised and continued to be up-dated periodically. The teaching became standardized, and the administration of the

nursing schools was independent of the hospitals.⁸

Nursing education in Hong Kong has progressed a great deal since the turn of the century, even though the standards of practice in Britain are still more advanced. At present, nurse's training schools have grown and multiplied, and nursing training is conducted in government, government-aided, and private hospitals. English is used in the government hospitals, and English or Chinese is spoken during instruction in the other hospitals. Plans for the local training of nurse-teachers and for affiliation of some of the nursing courses are underway in the Hong Kong Polytechnic. The tutor/student ratio has dropped and the welfare of both teachers and students has improved. The first Chinese principal nursing officer was appointed in 1979. Nursing service is provided mainly by Chinese registered nurses and administered by Chinese nursing officers (Table II).

⁸Jessie Childe, "History of General Nursing Education in Government Hospitals," The Special Journal of the 4th Anniversary (Hong Kong: Association of Government Nursing Staff, 1981)

Table II

Nursing Personnel in Hong Kong

<u>Total Registered</u>	<u>1982</u>	<u>1983</u>	<u>1984</u>
Registered Nurses (general)	10,814	12,512	13,259
Registered Nurses (mental)	509	566	663
Registered Nurses (sick children)	-	1	
Enrolled Nurses (general)	3,826	4,116	4,486
Enrolled Nurses (mental)	267	297	346

Source: Hong Kong Information Services 1983

According to the Hong Kong Government Medical and Health Department, the 1982 entry requirements for the student nurse are as follows. Candidates should:

1. Have the following subjects, one of which must be at grade 'C' in the Hong Kong Certificate of Education or equivalent: English language, plus four other subjects, including Chinese or a foreign language and two science subjects (i.e. chemistry, physics, biology or mathematics);
2. Be eighteen years of age or above;
3. Be able to speak English and Cantonese fluently;
4. Female candidates must be unmarried.

The length of the nursing training is three years, and students are given a monthly salary of HK\$2005-2405, free medical and dental care, and free uniform and accommodations. In return, except during the thirty-six weeks of study blocks, students provide nursing service when not attending classes.⁹ In addition to the British nursing curriculum, the Chinese health culture, particularly the

⁹The Joy of Caring, (Hong Kong: Medical and Health Department of Hong Kong, 1985).

teachings of Tao, Confucius and I Ching, is included and emphasized. Students graduate by passing the Hospital Final Examination which consists of two parts: both written and oral examinations on the principles and practice of nursing. Licensure is achieved by passing the state board examination. Career mobility is based on three things: ability, past experiences, and continuing education. The maintenance of good health and the prevention of disease are strongly emphasized among the Chinese. The community education on health maintenance as a part of the nursing function is introduced early in the student's curriculum (Figure V).

Figure V

Sample of the Hong Kong Nursing Program

Introductory Block: 8 weeks - beginning first day of school
 Elementary Anatomy and Physiology
 Nursing Ethics and Etiquette
 Principles and Practice of Basic Nursing
 Pharmacology
 Elementary Microbiology
 Elementary Nutrition
 Introduction to Psychology

First Study Block: 8 weeks - five months later
 Anesthesiology
 Elementary Surgical Nursing
 Introduction to Operation Room Technique
 Medical Sociology
 Anatomy and Physiology
 Principles of Nursing
 Pharmacology
 First Aid
 Radiotherapy
 Introduction to Psychiatric Nursing

Second Study Block: 6 weeks - beginning of the second year
 Medical Nursing
 Surgical Nursing
 Radiology
 Nutrition

Third Study Block: 6 weeks - last half of the second year
 Surgical Nursing
 Pediatric Nursing
 Gynecology and Introduction to Obstetrics

Fourth Study Block: 4 weeks - beginning of the third year
 Ophthalmology
 Otorhinolaryngology
 Infectious Diseases
 Introduction to Dental Surgical Nursing
 Introduction to Industrial Health
 Nursing Ethics and Etiquette

Final Revision Block: 2 weeks - Approximately four months before Nursing Board examination

Subject Review
 Principles of Management
 Principles of Teaching

Source: The Government Hospital School of General Nursing

The impending return of Hong Kong and its surrounding territories to China when the lease expires has created a mass emigration of students desiring to study abroad. Nursing is one of the professions often sought by these students. The many levels of preparation for training in nursing and the various programs available are often confusing to the prospective students. The dilemma of having to decide which program to choose may be most frustrating. In this chapter, the author has attempted to give a description of nursing education in the United States and Hong Kong including a historical background, curriculum, admission and graduation requirements of the various types of programs. A review of related literature and methodology involved will be discussed in the following chapter.

Chapter II

AN OVERVIEW OF THE LITERATURE AND METHODOLOGY

Since World War II, there has been a rapid growth in economy, technology, and air travel, as well as an increased awareness of international affairs. World trade has certainly intensified the desirability of studying abroad. Because of the involvement by the United States in Southeast Asia over the past twenty years, coupled with the lease of the New Territories between China and Great Britain, international studies on Asian countries have drawn tremendous interest and concern. Scholars, in general, are most interested in the educational enterprise of the countries involved.

The methodology used in this research consists of a combination of the area study, a verstehen approach, unstructured interviews, participant observation, and triangulation.

Review of the Literature

Through a review of literature, it was revealed that there have been a number of studies conducted in the United States and Hong Kong which deal with certain aspects of the present research study. The material can be divided into

four areas: (1) the Colony of Hong Kong; (2) related educational issues; (3) Hong Kong students in the Western countries; and (4) health care concepts and nursing education.

The Colony of Hong Kong. The American Chamber of Commerce published a book on the Colony of Hong Kong to help Americans better understand the Chinese culture, including such things as Chinese food, customs, religion, education, language, style of dresses, laws, and basic attitudes that may be encountered while in Hong Kong.¹ Endacott focused on the early history of Hong Kong and noted that the British tradition of voluntary effort contributed greatly toward the development of the educational system.² On the other hand, Moore explored the results of industrialization and the imitation of Western cultures on social change. He attempted to differentiate among various types of social changes including the social stratification system, clothing styles, wedding formats, male-female relationships, kin terminologies, and the naming systems, as either a reflection of the Chinese tradition or an imitation of

¹Living in Hong Kong, (Hong Kong: The American Chamber of Commerce in Hong Kong, 1982)

²G.B. Endacott, A History of Hong Kong, (Hong Kong: Oxford University Press, 1964), p. 132

western culture.³ Similarly, Hong and Podmore analyzed the profile of the Chinese family in urban industrialized Hong Kong. Hong examined the composition, socializing function, division of labor, and the supervision of children, while podmore focused on family norms. Both found the relationships between husband and wife, parents and children, to be more within the norms of the Western conjugal family than the traditional Chinese family.⁴

Related Educational Issues. Hong Kong has also been the topic of dissertation research for many educationally related issues. Yuen-Yu-Kwong from the University of Minnesota, wrote on physical education and recreational sports delivery systems within the general educational system in Hong Kong. According to Yuen, the educational system, the professional preparation process, and the community setting all in some way limit the effectiveness of physical education and recreational sports delivery systems. For example, both indoor and outdoor sports are limited because of the lack of facilities and space, and so

³Robert L. Moore, "Modernization and Westernization in Hong Kong: Patterns of Culture Change in an Urban Setting," (Ph.D. dissertation, University of Honolulu, East West Center, 1977).

⁴See Lawrence Hong, "A Profile Analysis of the Chinese Family in an Urban Industrialized Setting," International Journal of Sociology, 3:1 (May 1973), and David Podmore, "Family Norms in a Rapidly Industrialized Society: Hong Kong," Journal of Marriage and the Family 36:2 (May 1974), pp. 400-405

overcrowding is a constant problem. Yuen recommended that the physical layout be improved, the professional personnel be better prepared, and that the awareness of the lack of facilities be increased.⁵ The research of Viggiano, from the University of Connecticut, focused on the educational opportunities for women in Hong Kong. Viggiano found the existence of an overall lack of involvement in technical and science subjects for female students. The lack of science knowledge and technical skills by women tends to perpetuate female-oriented careers. It would appear that the old Chinese concept concerning the cultivation of female virtues remains the goal of education for women. Viggiano also discovered that career counseling and expansion of technical education as a whole were greatly needed.⁶ Nevertheless, the Hong Kong government has not been insensitive to the educational needs of its population. The influx of refugees from China and Southeast Asia has been tremendous over the past twenty years; therefore, education has been a priority. In 1982, the government invited a panel of visitors from Britain, the United States, Australia, and Germany to review its educational system. The panel acknowledged the

⁵Yuen-Yu-Kwong, "An Assessment of the Physical Education and Recreational Sports Delivery System in Hong Kong" (Ph.D. dissertation, University of Minnesota, 1982).

⁶Helen Viggiano, "An Analysis of Contemporary Women's Education in the Crown Colony of Hong Kong: A Study of Educational Opportunities for Women," (Ph.D. dissertation, University of Connecticut, 1983).

challenges that Hong Kong educators face as a result of the population explosion and the complexity of a multi-cultural society. Adaptation of ideas and strategies from other countries to fit its own situation, however, has had little significance in terms of its effectiveness. Again, the problem areas were identified as overcrowding, limited recreational facilities, and ill-prepared professionals. Problems such as these cannot be easily corrected. Furthermore, the necessity for most students to learn English and Chinese has created another difficulty. The time required for language instruction tends to "crowd out" other curriculum areas, usually creating a short supply of competent language teachers in the education system, primarily at the primary and secondary levels.

The language issue appears to surface repeatedly in the literature. Mandatory bilingualism is looked upon as both a privilege and a burden. The task to master two languages at the same time is not an easy one. According to Sun, Chinese students generally have difficulties writing in English.⁷ Both Woo and Smith discussed the weaknesses and strengths of the English language teaching situation in Hong Kong. Smith elaborated on the possible conflict experienced by the Chinese university students, between their native

⁷Amelia Sun, "Brokenly with Their English Tongue: The Writing Program in the Contemporary English Course," University of Hong Kong: The Writing Program in the Contemporary English Course 25, No. 1, (October 1970) pp. 79-89

cultural values and the temptations of modern industrialized society. The fact that these students are caught between two cultures is reflected in the way they are caught between the two languages.⁸ Similarly, Kwok discovered that even though the undergraduate Chinese students in the English department have had extensive practice in writing English, the students found technical writing easier. The students experience more problems in capturing the language when situations are unfamiliar to them.⁹ Boyle considered the inclusion of cultural, political, and social factors rather crucial in the teaching of language to students. Helping students to develop cultural awareness of people in countries where English is the native language will enhance comprehension and expression of the language.¹⁰

Hong Kong Students in the Western Countries. The impact of foreign students has been strongly felt in countries such as the United States, Canada, Britain and Australia. A number of studies on the culture, socio-

⁸See Joseph Woo Yam Ting, "Bilingualism in Hong Kong: The Orient Anglicized," The Journal for the National Association for Bilingual Education 2, No. 2, (March 1978) p. 27-31; and Larry Smith, "Teaching English in Asia: An Overview," Topics in Culture Learning 3 (1977)

⁹Helen Kwok, and Mimi Chan, "Creative Writing in English: Problems Faced by Undergraduates in the English Department," University of Hong Kong: Topics in Culture Learning 3 (May 1976)

¹⁰Joseph Boyle, Facing Reality in University English Teaching in Hong Kong, (Chinese University of Hong Kong, 1981)

economic status, and the educational background of these students have provided information for teachers and their communities to meet the needs of the students. Cross-cultural adjustments and coping among the Western culture will require much time and effort. These adaptations can be accomplished by overcoming the language barriers, adapting a different lifestyle and value system, establishing friendships, and fitting into the educational world. According to Ho, old beliefs on authoritarianism, rigidity, conformity, culturcentrism, traditionalism, and compulsive study orientation are some of the characteristics of these students.¹¹ The California State Department of Education published A Handbook for Teaching Cantonese-Speaking Children which addresses the history, educational background, historical and socio-cultural factors of the Chinese immigrants. The handbook is used by California's public school teachers to help them better understand these immigrant students.¹² The Chinese Cultural Resource Book, prepared by Irene Kwok for the Bureau of Elementary and Secondary Education, Washington D.C., is directed to

¹¹D.T.F. Ho, Culture-Specific Belief Stereotypy and its Personality Attitudinal and Intellectual Correlates, (ERIC Document Reproduction Service, ED141453)

¹²California State Department of Education, Bilingual Education Office, A Handbook for Teaching Cantonese-Speaking Children, (1985)

teachers in the Chinese bilingual/bicultural programs.¹³ Similarly, Higbee's research was aimed towards United States admissions officers on the admission and placement of students from Hong Kong. His recommendations were based on a careful evaluation of the education structure; language instruction; academic year; school programs at all levels; accreditation, certifications, diplomas and degree procedures; academic curricula; college entrance examinations; grading scales and teacher education.¹⁴ Research such as this is not limited to the United States. Chapman also outlined the educational system of Hong Kong to assist Canadian teachers in understanding the behavior of immigrant Chinese students. Chapman described both the cultural background and the current educational practices of Chinese students. She examined such common practices as the emphasis on passing examinations, the practice of perfect reproduction of information by memorization rather than assimilation and accommodation, and the copying of accepted ideas rather than creativity.¹⁵ Lee and Smith noted Chinese

¹³Bureau of Elementary and Secondary Education, Chinese Cultural Resource Book: For Elementary Bilingual Teachers by Irene Kwok, (DHEW/OE, Washington D.C. Division of Bilingual Education, 1975)

¹⁴Homer Higbee, and Marjorie Winters, ed. The Admission and Placement of Students from: Hong Kong, Malaysia, Philippines, Singapore. (American Association of Collegiate Registrars and Admissions Officers, Washington, D.C., February, 1979)

¹⁵Rosemary Chapman, Education and Hong Kong, (Toronto Board of Education, Ontario, Research Department, December 1972)

university students typically do not speak out in discussion, neither do they participate in social activities in the way that students from other cultures might.¹⁶ These characteristics are often interpreted by Westerners as docility and lack of imagination. In his research on the subject of cognitive learning, Tsang found that the mathematical cognitive structure was different between a group of junior high students educated in the United States and that of a group of students recently arriving from Hong Kong. According to Tsang, the reason for the contrast appeared to be due to the discrepancy in the mathematical curricula of these two groups.¹⁷ According to Newsweek magazine, in a special issue entitled Newsweek on Campus, Asian-American students are the fastest-growing segment in American higher education. At Berkeley, Asians make up 23 percent of undergraduates, and at Cornell and Ohio State Universities, their number have more than doubled in the last five years. Mathematics, engineering, and science courses appear to be the subjects taken most often. One of the reasons may be due to the fact that newly-arrived Asian

¹⁶See Lee-Hee-Soo, "A Follow-Up of Southeast Asia Alumni from Selected Higher Education Institutions in Texas," (Ph.D. dissertation, Texas A and M University, 1982); and Smith, Teaching English in Asia: An Overview

¹⁷Sau-Lim Tsang, Mathematical Cognitive Structures of Junior High Students Educated in the United States and of Those Recently Arrived from Hong Kong: An Exploratory Study, (Berkeley Unified School District, California, Asian American Bilingual Center, 1978)

students often have to struggle with the English language; therefore, they prefer to choose subjects that are taught in the international language of mathematics. These students are also perceived as being studious, hardworking, and high achievers. John Gryder, an associate dean at Johns Hopkins University, credited the achievement of these students to close family ties, motivation, and the enormous respect they have for the value of education.¹⁸

Health Care Concepts and Nursing Education. Also of much interest in the past thirty years have been health care concepts and nursing education. Social scientists have noted an abundance of social cultural diversity and behavior towards health and illness among Americans. Until recent years, there has been very little research dealing with the impact of cultural beliefs and attitudes on illness and health.

Spector compiled extensive research on the health practices among Asian, Black, Hispanic, Caucasian, and native American communities. She illustrated the various ways in which individuals and groups define health and illness, responses and choice of health care, and the common forms of self-medication and treatment. "Folk medicine" is common among certain groups. For example, the English

¹⁸"Asian-Americans: The Drive to Excel," Newsweek: on Campus (April 1984), pp. 4-13

Catholics use wet tobacco to treat cuts, and among many ethnic groups, chicken soup is used for curing the common cold.¹⁹ In contrast, the Chinese believe that eating chicken will make a cold worse. According to Zborowski, different ethnic groups respond to pain in different ways. Among the Jewish and Italian patients, pain is handled in an emotional and exaggerated fashion. On the other hand, Americans tend to be more stoic, and the Irish choose to ignore pain.²⁰

Transcultural adjustment and adaptation are often difficult within any given country. Each individual is indirectly asked to reject his family traditions and to adopt the values of the dominant culture. At the same time, the providers of health care, physicians, nurses, social workers, and para-health professionals -- are socialized into a culture of their own, a culture with its own set of beliefs, practices, habits, likes and dislikes, norms and rituals, and even a language which lay people often find difficult to understand. There is a predetermined set of rules of behavior to which sick people and their family members are expected to respond. Any deviance from the norm would be considered non-compliant or unacceptable.

¹⁹Rachel E. Spector, Cultural Diversity in Health and Illness, 2nd ed. (Norwalk, Connecticut: Appleton-Century-Crofts, 1985)

²⁰Mark Zborowski, People in Pain, (San Francisco: Jossey Bass, 1969)

similarly, Bloom noted the various cultural beliefs and how they influence an individual or family's compliance to instruction and prescription.²¹ Also, the family unit most often plays a pivotal role in determining not only whether a family member will receive care, but whether that care should be provided by the family at home or by professionals in a hospital setting. Currently, the issue of nursing education is of much interest and is debated both nationally and locally. Nursing education has undergone revolutionary changes since the 1940s. It has developed from a pure-in-hospital apprenticeship program into a broad educational experience provided at various levels in universities, community colleges, and hospital diploma schools. Following the Brown and Bridgeman's findings, which indicated a weakness in nursing education and a shortage of nurses during the 1950s, the associate degree in nursing was developed. This new program has helped to alleviate some of the problems of nursing supply; however, it has also created great controversy on the level of educational preparation. While the diploma programs are decreasing steadily and the baccalaureate degree programs are increasing gradually, the associate degree programs have grown twelve-fold over the past twenty years. In the late 1950s and early 1960s, the American Nurses Association (A.N.A.) believed that

²¹Samuel W. Bloom, The Doctor and his Patient, (New York: The Free Press, 1965)

improvements in nursing practice were dependent upon the advancement of nursing education. In 1960, the A.N.A. House of Delegates proposed that the baccalaureate program be the basic educational foundation for professional nursing. This recommendation was addressed again in 1964 and almost every year since. In 1978, the A.N.A. House of Delegates adopted the resolution that by 1985, the minimum preparation for entry into professional nursing practice would be the baccalaureate degree in nursing. In 1974, the New York Nurses Association became the first state to adopt the resolution regarding entry into professional practice. Other states soon followed suit. By 1980, thirty four state nurses associations had voted to support the A.N.A. stand. Now that 1985 has come and gone, 1990 is the future target date for support of the A.N.A. stand.

In 1983, Mitchell researched nursing education in Hong Kong and discovered that it was quite different from that in the United States. Nursing students in the United States finance their own education while students in Hong Kong receive a stipend when attending nursing schools. However, the amount of clinical experience gained in the wards by American nursing students is limited because of the Patient's Rights Charters which state that the patients have the right to be cared for by trained and professional

personnel.²² Most American hospitals are not controlled by the government. Hospital administrators may form their own policies and procedures and can select the type of graduate nurses they employ. More and more hospitals prefer to employ baccalaureate-prepared nurses only. This, in turn, influences the course of the type of nursing program prospective nursing students choose. In 1971, Williams and Aichlamyr surveyed high school counselors and their knowledge of the requirements of the three types of nursing schools. They found that many counselors were often confused about the unique school entrance requirements. The counselors had little knowledge of intraprogram credit transfer possibilities and could not distinguish between professional and technical nursing.²³ Similarly, Taylor and Richter found that only very few freshmen nursing students identified the high school counselor as the person who most influenced their choice of nursing as a career.²⁴ In addition, Lande surveyed 934 female Catholic high school seniors and found 68 percent of the students had indicated a desire to enter nursing as a consequence of personal contact

²²Josephine Mitchell, "Nursing in Hong Kong," Nursing Mirror (Dec. 14, 1983), pp. 46-47

²³Mary L. Williams and Rita H. Aichlamyr, "High School Counselors' Interpretation of Nursing School Programs," Journal of Nursing Education (April 1971), pp.21-26

²⁴Joe K. Taylor and Frances S. Richter, "What Motivates Students into Nursing?" Hospitals: Journal of American Hospital Association 43 (1969), pp. 59-61

with nurses.²⁵

Writing about the challenges, issues, and trends in nursing today, Ellis pointed out the changes taking place in nursing education. Based on the statistical characteristics of people eager to pursue a career in nursing, most programs have been designed to address the needs of the adult learner, rather than gearing all educational patterns toward recent high school graduates. Part-time programs which enable students to work while attending nursing schools are also on the increase. Classes that were traditionally conducted during peak morning hours are being re-scheduled for late afternoon or weekends in order to better accommodate the needs of the working students.²⁶

Methodology

The material for this dissertation was obtained from several sources, both descriptive and documentary. A computer search reviewing all relevant literature on related topics has been conducted; a perusal of official and personal records of general and nursing education; unstructured interviews with educators, students, parents

²⁵Sylvia Lande, "Nursing Career Perceptions among High School Students," Nursing Research 15 (1966), pp. 337-342

²⁶Janice R. Ellis, Nursing in Today's World: Challenges, Issues, and Trends, 2nd ed. (Philadelphia: J.B. Lippincott Co., 1984)

and nurses; and several visits to Hong Kong have been completed to obtain the most recent material in secondary and nursing education. Being descriptive in nature, this dissertation is an area study based on George Bereday's method of comparative education.

George Bereday. Bereday, an educator born in Poland in 1920, attended Oxford University, England and Harvard University, Massachusetts. He defines comparative education as "the systematic study of foreign educational systems," and the goal of the study is to search for lessons from the achievements and mistakes of different societies. According to Bereday, the field of comparative study can be broken down into two major parts: the area studies, which are concerned with one country or region; and the comparative studies, that involve many countries or regions at the same time. He states that there are four basic steps in comparative education. These four steps are: (1) description -- the systematic collection of pedagogical information in one country; (2) interpretation -- the analysis of pedagogical data relating to history, politics, economy, and similar social sciences; (3) juxtaposition-- the simultaneous review of similarities and differences; and (4) comparison -- the concentration on a particular aspect of the educational system or an analysis of the total

relevance of education in several nations.²⁷

Following Bereday's theory, an indepth study will be made of Hong Kong: its geographic layout; its administration and policy preferences; its people; and its cultural orientation regarding family, religious beliefs, health concepts, political attitude, educational system, and social welfare. Also, the present situation will all be examined in order to gain an understanding of the inter-relationship, development, and rationale of the society as a whole. Moreover, the verstehen method will be employed. The origins of the concept "verstehen" is rooted in the thinking of two famous German sociologists, namely, Wilhelm Dilthey and Max Weber.

Wilhelm Dilthey (1833-1911). Dilthey was a philosopher, trained in the school of Bokh and Ranke, who lived in an era when Metaphysics lost ground and neo-Kantianism and positivism proved inadequate. He attempted to find a new methodology and interpretation of the study of man and society. Dilthey distinguished between the natural and social sciences by defining the former as being concerned with the grasping of laws and principles, or begreifen, whereas the latter aimed at an understanding of institutions and organizations, or verstehen. He therefore

²⁷George Bereday, Comparative Method in Education, (New York: Holt, Rinehart and Winston, Inc., 1964) pp. 10-28.

asserted the need for a psychological science which would come to grips with the understanding of structural contexts, or struktur-zusammenhang, an understanding through rebuilding or reconstruction of other peoples' actions or experiences in ourselves. His concern was with conservation and objective revaluation of cultural forms rather than with social controls.²⁸

Max Weber (1864-1920). Max Weber on the other hand, was the founder of the German Society of Sociology and editor of the Archiv fur Sozial wisseaschaft und Sozial politik. Sociology, to Weber, was concerned with social activities: a science which attempted the interpretive understanding of social action involving persons or groups in order to arrive at a causal explanation of its cause and effects. Thus, structural forms such as the government, church, and education were, according to Weber, not units, as other social sciences thought, but were themselves centered around social activity. Weber held that social science differs from natural sciences by being an "understanding science," or verstehen, as Dilthey had originally claimed. In brief, Max Weber called for an understanding of the behavior people had as they interacted

²⁸H.A. Hodges, Wilhelm Dilthey: An Introduction, (London: Routledge and Kegan Paul Ltd., 1949)

with one another.²⁹

The concept of verstehen, though greatly utilized in qualitative research, has two limitations in its operation. One of the weaknesses is its dependence upon knowledge derived from personal experience; for, the ability to define behavior varies with the amount and quality of the personal experience and the introspective capacity of the interpreter. The other limit is the difficulty of measuring the validity and reliability of similar studies.³⁰

This study, based on behaviorally observed professionalization, is rooted in the verstehen methodological approach where participation observation becomes an important research strategy. In order to observe the group's behavior and to get a variety of meanings of the actors and reactors, this strategy requires the scholar to become personally involved in a group in some capacity. In this case, it means studying the action and reaction of nursing students in the United States and Hong Kong. Indeed, what a person says off-guard may be more significant than the prepared answer to a prepared question.

Observations were made wherever possible throughout the author's stay in Hong Kong of the daily life and behavior of the people. Participant observation was

²⁹May Brodbeck, Readings in the Philosophy of the Social Sciences, (New York: The MacMillan Company, 1968)

³⁰Abel Theodore, "The Operation Called Verstehen," American Journal of Sociology 54 (1948-49), pp. 211-218

conducted in such areas as the general operation of the schools, classes in session, activities during recess and during class-changing time. These visual impressions were recorded firsthand, and then followed by careful note taking.

Frequent social and professional contacts with nurses, physicians, nursing educators, and nursing students enabled the author to gain insight into the nursing profession and the educational system in Hong Kong. On one occasion, the author, being a family member of a patient in the hospital, was able to make the observation as an outsider, observing the hierarchy of the nursing profession, the ways in which student nurses were guided, and how information was transmitted to them.

Unstructured Interviews. According to Patton, there are three basic approaches to interviews: (1) the informal conversational interview; (2) the general interview guide approach; and (3) the standardized open-ended interviews. Each approach has its strengths and weaknesses, and each serves a different purpose. The difference among these three approaches is on the design of the interview questions which are determined and standardized ahead of time.

In the case of the informal conversational interview, no predetermined set of questions are designed. Most of the questions flow from the immediate context. This approach

allows both the interviewer and evaluator to be highly responsive to individual differences and situational changes. However, the process usually takes a long period of time. The interview guide is designed to make sure that basically the same information is obtained from a number of people by covering the same material. The guide helps to make interviewing across a number of different people more systematic and comprehensive by delimiting the issues to be discussed. It also helps the interviewer and evaluator predetermine how best to use the limited time available. The questions in the standardized open-ended interview are written in advance exactly the way they are to be asked during the interview. Each person is asked essentially the same questions. One problem of this approach is that it does not permit the interviewer to pursue topics or issues that were not anticipated when the interview was written.³¹

For the present research, the general interview guide approach was used. Given the fact that the author, a registered nurse, has participated in both cultures (United States and Hong Kong) as a student and professional, materials have been gathered over the years to document probable educational similarities and differences which will be useful in the final analysis and interpretation of the research data. During some of the author's visits to Hong

³¹Michael Quinn Patton, Qualitative Evaluation Methods, (Beverly Hills, CA.: Sage Publications Incorporation, 1980) pp. 197-205

Kong, unstructured interviews were conducted. These were used to find out information that could not be observed directly. Thus, a set of issues was outlined and served as a checklist to ascertain that all relevant topics were covered in the course of the interview. The guide also kept the interaction focused, and at the same time, allowed individual perspective and experiences to emerge.

In order to obtain a general idea of the educational system, including the three types of schools (government, government-aided, and the private school), each was chosen as a location for the interviews. The government schools have the most resources and financial support. However, the government-aided schools are the most frequently sought because graduates from these schools are more likely to gain entry into the universities. The least favored are the public schools which are overcrowded, lack resources, and are often substandard. Selectively, a superintendent, principal, science teacher, and a liberal arts teacher from each group of the schools were interviewed to obtain their impressions about education. Because these interviews were for the most part, arranged through personal friends, the climate was friendly and informal. After explaining the purpose of the interview and promising that their schools and their names would be kept confidential, the author found the interviewees most open and cooperative in their responses. Except for one of the teachers from a private school,

all interviews were recorded by means of a tape recorder to ensure correct documentation. In addition to interviewing the above educators, parents of different age groups and students were also interviewed about their feelings and impressions regarding the educational system and studying abroad.

Triangulation. Another way of viewing the variety of research techniques utilized in the present study is through the idea of triangulation. Denzin has defined triangulation as "the combination of methodologies in the study of the same phenomenon." He identifies four basic types of triangulation: (1) Data triangulation -- the use of a variety of data sources in a study; (2) investigator triangulation -- the use of several different researchers or evaluators; (3) theory triangulation -- the use of multiple perspectives to interpret a single set of data; and (4) methodological triangulation -- the use of multiple methods to study a single problem or program.³² Miller interprets triangulation as "the use of multiple strategies or techniques that can clarify, support and, extend qualitative research findings."³³

³²Norman K. Denzin, The Research Act, 2nd ed. (New York: McGraw-Hill, 1978), p.291.

³³Steven I. Miller, "Mapping, Metaphors and Meaning: A Note on the Case of Triangulation in Research," Sociologia Internationalis (Berlin: Duncker & Humblot, 1983) p.69

Patton believes that triangulation is ideal in all evaluation researches. However, it is also very expensive. Since most researches involve limited budgets, short time frames, and political constraints, triangulation should be used where possible to compensate any weaknesses of one method by counter-balancing the strengths of another.³⁴

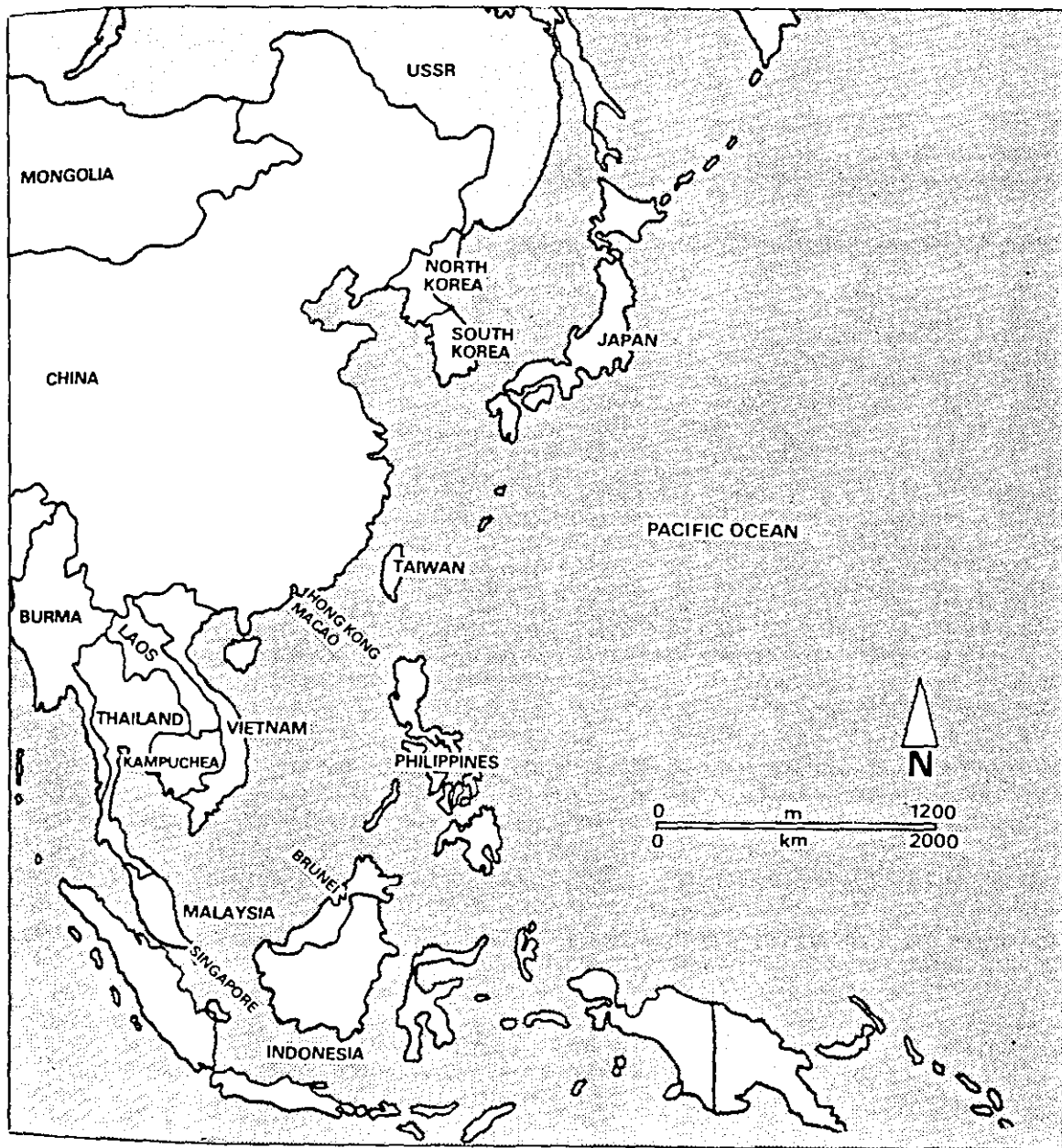
Within the present study, a variety of triangulation strategies was incorporated as a means of enhancing both the reliability and validity of the findings. Thus, for example, a critical review of the literature served as both a variety of data and theory triangulation. In the latter sense, the literature established the relevant theoretical categories that were incorporated within the study, which, in turn, served as a basis for "face" and content validity. In addition, the literature itself constituted a form of data triangulation by way of its applicability to the central research questions. This point, combined with informal observations and semi-structured interviews (a form of "within-methods" triangulation), increased the reliability of the findings.

Thus the use of multiple strategies or "linking data"³⁵ techniques are particularly applicable to the

³⁴Michael Quinn Patton, Qualitative Evaluation Methods, p. 109

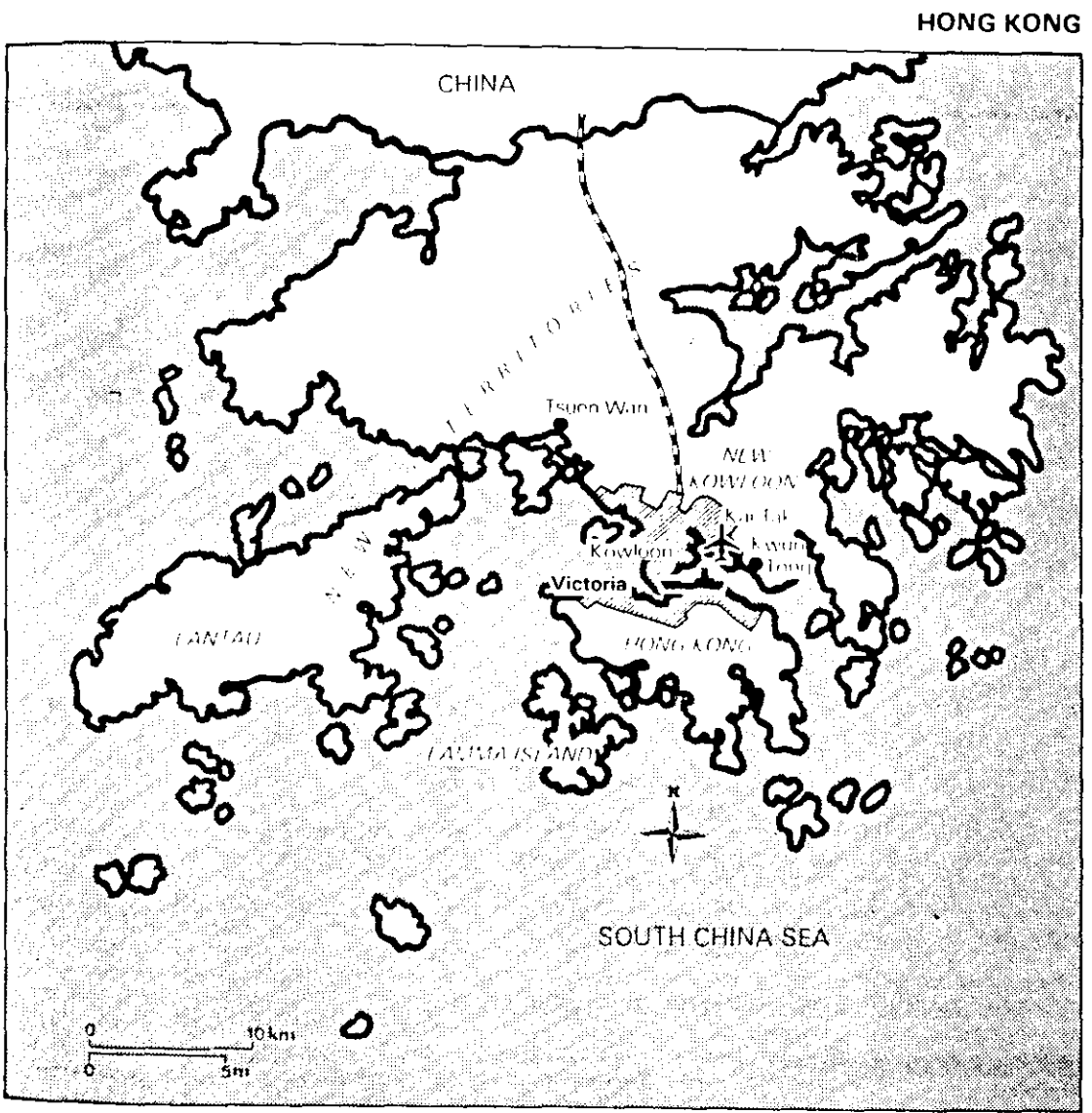
³⁵Nigel G. Fielding, and Jane L. Fielding, Linking Data, Qualitative Research Methods Series #4. (Beverly Hills, CA.: Sage, 1986), pp. 23-35

present study. Several diverse but related data sources were used to present a holistic view of the actual and potential problems facing secondary school graduates from Hong Kong who wish to enter nursing training in this society. While it is acknowledged that the various triangulating strategies do not insure complete validity or reliability, they serve as indispensable tools in providing a degree of credibility in those situations where reliance on different data sources is necessary.

Map I**ASIA AND THE PACIFIC**

Source: Map on File, (Oxford, New York: Facts on File Publishers, 1981)

Map II



Source: Ibid.

CHAPTER III

THE COLONY OF HONG KONG

Geography

The Island of Hong Kong was ceded to Britain in 1842 by China as a result of the Nanking Treaty of the Opium War (1839-1842). In 1860, Britain further secured the peninsula, Kowloon, a small district just opposite Hong Kong. Britain also leased a larger area of the mainland, known as the New Territories, in 1898 along with two hundred thirty five additional islands for a period of ninety-nine years. The entire Colony of Hong Kong covers a land mass of approximately three hundred eighty four square miles.

Since Britain's acquisition of the Colony, there has been a continuous change in its geographic layout with expansion in land mass and development of new towns and villages. These changes have stemmed from the ingenious effort of cutting into hills to create flat land and by using the resulting fill to form reclaimed land along the coastlines.

Hong Kong is situated southeast of China, one hundred miles south of the Tropic of Cancer, at the mouth of the Pearl River. Although Hong Kong's winters are not severe, there are definite seasons. The long summer is hot, humid, and rainy; the brief winter mild, sunny, and dry. Spring

and fall are somewhat in between, bringing with them typhoons and tropical cyclones common especially during the month of September.

Hong Kong is not well-known for its natural resources since most of the land is hilly, and the soil is thin and nutrient deficient. There are no large rivers, lakes or underground water tables. Instead, reservoirs are Hong Kong's main source of water supply. In the event of a prolonged dry season, it is not uncommon for restrictions and regulations to be placed on the consumption of water. Thus, Hong Kong's most valuable asset is not the land. Rather, Hong Kong's location on the world map, and the water surrounding it, (specifically, its deeply indented coastline which provides ideal shelters for shipping), are Hong Kong's most outstanding characteristics. Between the Island of Hong Kong and the mainland Kowloon, a mere quarter mile apart at its narrowest part, lies the magnificent Victoria Harbor, considered to be one of the world's greatest sea ports. Located laterally between India and Tokyo and longitudinally between Beijing and Indonesia, the harbor is a perfect center for trading. Furthermore, while California financiers' business day is drawing to an end, Hong Kong trading begins. Similarly, as Hong Kong markets are closing, London financial markets open.¹ Therefore, Hong Kong provides a very important link which enables world

¹Endacott, A History of Hong Kong, pp. 1-4.

trade to operate twenty four hours a day. Hong Kong owes much of its prosperity and success to its human resources, entrepreneurial initiative, and labor productivity. The people of Hong Kong are not afraid of hard work nor are they discouraged by long hours or low wages. Quick to respond to market needs, Hong Kong has fast become one of the most active trading centers in the world, as well as the financial capital of Asia.

Early History

Hong Kong, known as the jewel of the East and shoppers' paradise, was not always what it is today. Before the arrival of the British in 1842, there was a limited population of farmers and fishermen scattered among small villages. Britain acquired Hong Kong primarily to conduct free trade; its development based on what was more or less a partnership between the British and the Chinese with economic gain as a common goal. For over half a century, the majority of the Chinese population living in Hong Kong were migrants or transients who came to Hong Kong as laborers wanting to escape the bitter conditions in China. When conditions improved in China, or, in turn, worsened in Hong Kong, the Chinese would return to their homeland. Consequently, the population both decreased and increased during this time. The Chinese people preferred to leave

their children and families in China rather than establish the traditional family unit in the new land. Similarly, Westerners came to Hong Kong for the sole purpose of trade, very few bringing their families with them. Both the Chinese laborers and the Westerners who did bring their families with them usually sent their school age children back to their native countries to be educated. The government's low interest in the social conditions and welfare of the people, resulted in the Colony's attraction of mostly undesirable residents. As a result, crime was common, sanitary conditions were almost nonexistent, and epidemics and typhoons were a constant threat to the lives of the workers and to their property.²

The Japanese invasion on China in 1937 led to a mass flight of refugees into Hong Kong. From 1937 to 1941, the population more than doubled, and at the outbreak of World War II, it was an estimated 1.6 million. Shortly before the Japanese took over Hong Kong, the Hong Kong Chinese returned to China, causing the population to drop to 500,000. After the Japanese surrendered in 1945, however, Hong Kong's Chinese population began to increase once again.

During 1947-48, as the forces of the Chinese nationalist government were facing defeat at the hands of the communists' insurgence led by Mao Tse-Tung, Hong Kong

²Hong Kong 1983, (The Government Publication Center, 1984), pp. 246-250.

received an influx of people unparalleled in its history. Refugees fleeing China brought with them enormous amounts of capital which gave Hong Kong its greatest boost in economy and trade development. From then on, Hong Kong was fast becoming a highly industrialized society, as well as a major commercial and financial center. Textiles, electronic products, plastic goods, watches and clocks, and other light industries produced by Hong Kong manufacturers have rapidly spread all over the world market.

As a result of the Korean War, the Vietnam War, and the suppressed Chinese government, Hong Kong has continued to be a haven for refugees. By 1983, the estimated population was over 5.5 million, making Hong Kong one of the most densely populated cities in the world. Hong Kong's residents, rather than being transients, have become settlers. This change in the city's status has caused concern on the part of both the government and the residents in such areas as social welfare, education, and political policies. Efforts to improve the social conditions in Hong Kong continue today. Public housing, socialized medicine, and nine years of free education are some of these efforts.

Government

The Nanking Treaty has always been considered by the Chinese government to be an unequal treaty. Therefore, the

term "colony" is now officially avoided by the British whenever possible in order to maintain good relations with China. However, Hong Kong remains under the direct rule of Britain, and the Queen's appointed representative, the governor, is head of the Hong Kong administrative government. The governor derives his authority from the Letters Patent which was passed under the Great Seal of the United Kingdom and establishes the basic framework of the administration.

As head of the executive office, the governor has a tremendous amount of power concerning the direction of the administration. He presides over the two main policy-making bodies; the Executive and Legislative Councils. The governor also appoints Executive and Legislative Council members, judges and magistrates, vetoes legislation, directs the Commissioner of Police, and has the prerogative to pardon or remit sentences and to commute death. As the titular Commander in-chief of Her Majesty's Forces in Hong Kong, the governor appears to have unlimited power. However, he is subject to the rule of law, and should he exceed his legal power, he may be challenged in court.

The Executive Council, the principal policy-making body, consists of four senior members: the Chief Secretary, the Commander of British Forces, the Financial Secretary, and the Attorney General. There are twelve other members appointed by the governor under the instruction of the

Secretary of State. Of these twelve members, two are official and ten are non-official members who hold office for fixed periods of time. Official members are heads of government departments, and unofficial members are community representatives who all hold equal voting rights and are selected because of their expertise and awareness of Hong Kong and its people. The Executive Council meets once a week and advises the governor on financial matters and policies involving a wide range of subjects. The Council also considers all principal legislation before it is introduced into the Legislative Council.

The Legislative Council consists of ten official members and twenty-two unofficial members. Three of the official councilmen are senior members including the Chief Secretary, the Financial Secretary, and the Attorney General. All members except the senior members are appointed by the governor with the approval of the Secretary of State. It is the responsibility of the Legislative Council to delegate public funds, introduce public issues, and enact Legislation. However, the bills which are passed by the Legislative Council must be approved by the governor if they are to become laws.³

The law in Hong Kong resembles that of the United Kingdom and consists of a mixture of English Acts of Parli-

³Hong Kong 1985, (The Government Publication Center, 1986) pp. 52-54.

ament, Hong Kong Ordinances, and the common law of both England and Hong Kong. The judiciary system, which protects the rights of the individual, includes the supreme court, the district courts, and the magistrate courts. The system is responsible for the trying of all criminal cases, as well as the hearing of civil disputes, whether between individuals or between an individual and the government.

Hong Kong achieves its political stability and administrative cooperation through a combination of many factors. First and foremost, Chinese have traditionally had a great respect for governmental authority, in contrast to the communist regime in China which is to weed out deep-seated Chinese values, norms and organizations and to replace them with the new socialistic ideals. The Hong Kong government deliberately refrains from tampering with the cultural predispositions and social norms of the Hong Kong Chinese, therefore, allowing tradition to remain. Furthermore, England has always given the Hong Kong government a wide-range of discretionary decision-making power. Many of the enforced laws strongly reflect Chinese norms and sentiments. Britain has gone to great lengths to allow Chinese customs and organizations to remain intact, leaving the Hong Kong society very much Chinese in character.

As late as the 1950s, discriminatory measures against the Chinese on racial and cultural grounds were not

uncommon; however, it has decreased over time. Today, although racial discrimination and stereotyping have not disappeared completely, they tend to assume a more covert and subtle form. Residential segregation between the Chinese and Westerners is still present. Although it is very much by choice, the segregation is largely due to differences in the economic power of the two ethnic groups.

Hong Kong as a Colonial Society

A 1984 census recorded Hong Kong's total population at 5.4 million; with 2.8 million males, and 2.6 million females. Approximately 36 percent of the population was under twenty-five years of age. Of these 5.4 million people, 98 percent of them are Chinese, born either in Hong Kong or China. The other two percent of the population are British, Australians, Americans, Indians, Thai, Portuguese, Japanese, German, French, Dutch, and other nationalities.

Although the Chinese are the most widely distributed ethnic group in the world, they may be among the least known and understood because of their deep sense of privacy, as well as their reluctance to allow themselves to be known by others.⁴ Moreover, the Chinese are one of the few groups who have preserved the traditions and beliefs of thousands

⁴Frena Bloomfield, The Book of Chinese Beliefs, (Arrow Books Ltd. 1983), pp. 9-10.

of years while adapting to western ideas and technology at the same time.

The Chinese have a unique culture composed of complex sets of beliefs and life practices. Humility and the teachings of the ancient Chinese philosopher, Confucius, are still very much a part of the Chinese character. Confucius was not interested in establishing a society composed of equal, independent individuals. Rather, he envisioned a society where man's position was clearly and carefully prescribed. However, a Chinese person is not restricted to a particular school of philosophy but is a follower of the entire Chinese heritage. The traditional Chinese society was composed of four classes: scholars, farmers, artisans and merchants. The scholars were given the highest status because they performed what the Chinese regarded as the most important function, the transmission of an ancient heritage and the personification of Chinese virtues. The remaining three classes were merely looked upon as the commoners who worked for their living.

Chinese society in Hong Kong is a "new" society formed primarily by immigrants from diverse parts of China, particularly the southern provinces. Contrary to customs practiced previously, it has been only from the end of World War II that the Chinese decided to settle permanently in Hong Kong. The Hong Kong Chinese community has only been formally established within the past forty years.

Possessing a heterogeneous cultural pool, Hong Kong is a combination of both western and eastern ideas. Even among the Chinese, there is a variety of dialects, customs, beliefs, styles of living, and ideologies. Although many Chinese immigrants brought with them social and behavioral patterns based on the traditional rural setting of China, they have also adapted themselves to the Western and urban society. As a result, the Chinese society in Hong Kong is not an exact replica of the mainland Chinese society. Instead, it is a society developed within a particular historical and geographical setting; a society geared to ensuring its survival and prosperity.

Richard Hughes stated in Borrowed Place, Borrowed Time that Hong Kong is the only human habitation in the world that knows when it will die because of the British lease expiration in 1997. This knowledge of the future has had a great impact on the people's behavior.⁵ Hong Kong Chinese seldom make long-ranged goals but live for the present instead. Their present orientation can be readily observed in their uncontrollable compulsion to obtain immediate material goods and in their intolerance of delayed gratification. Even among the wealthy, long range goals are uncommon. There is a general reluctance to commit resources to an uncertain long-term future. Social relationships

⁵Richard Hughes, Hong Kong - Borrowed Place Borrowed Time, (New York: Fredericks A Praeger Publisher, 1968), p. 10.

which require a long-term investment are normally shunned.⁶ As any organizational effort at pursuing one's goals requires a great deal of time, individual efforts are preferred, in spite of their less effective results.

In Hong Kong, where upward social mobility through political channels is often blocked, economic mobility is the only viable alternative route to gaining prestige and status. As a result, status is equated with material goods.⁷ For the Chinese, success in life results from making large amounts of money, and an obsession with material goods is the most significant motive in the behavior of both employed and unemployed people.

The elderly are highly revered and are believed to possess greater experience, wisdom, status and power. Subsequently, it is considered the duty of the junior members of society to respect and obey their seniors. The ultimate in happiness for the Chinese includes a life of comfort, several children and grandchildren (especially male), and leisure in their old age. People look forward to growing old; prosperity and longevity are much desired and are used as greetings.⁸

⁶Joseph Y.S. Cheng, ed., Hong Kong: In Search of a Future, (Hong Kong: Oxford University Press, 1984), p. 71.

⁷Lau Siu-Kai, Society and Politics in Hong Kong, (Hong Kong: The Chinese University Press, 1982), p. 42.

⁸Linda Chih-ling Koo, Nourishment of Life: Health in Chinese Society, (Hong Kong: The Commercial Press, Ltd., 1982), p. 14.

Death is a much avoided topic, and if mentioned, it is believed to bring bad luck. White is the chosen color for the family in mourning, who for three months are not allowed to visit friends or to attend any social functions. A rosette made of yarn is worn by the women, and white is worn by the immediate family members. Green is the color designated for granddaughters, and black arm bands or a black band on the lapel of a man's suit are worn by the male members of the family.

Children are raised to be humble, courteous, friendly, gentle and obedient adults. Self-restraint is placed above all else and is taught at a very early age. The children are taught to be content with what they have and to remain on good terms with their relatives and friends, as well as strangers. Politeness and respect for elders are greatly emphasized, and children are expected not to question their parents' authority. They are to remain standing until a superior, such as a father, mother or other senior is seated; to refrain from eating until their superiors have started; and not to refuse any offer of food or refreshment when invited by a superior. Raised in this way, Chinese children forfeit their individuality and often become passive. Furthermore, any imagination or creative questioning is of secondary importance.

Religious Beliefs. As a group, the Chinese people place much faith in legends, mysteries, and long-standing traditional lore even though many of these legends cannot be fully explained. Most of the mysteries are regarded as mere superstition. Very often, the Chinese themselves do not know what lies behind the behavior and habits which have been established for many centuries. Although they have retained the lifestyle, they do not accept the cause which explains it. As always, the Chinese preserve their habits to a greater or lesser extent. Whatever one chooses to believe, most Chinese lore is fascinating and some of it very controversial.

Many Chinese have difficulty responding to questions asked by Westerners such as, "What is your religion?" and "Do you believe in God?" because religion in China is very different from that of the western countries. Christianity and Judaism are not well known by the general Chinese population. There are three major traditional Chinese religions: Confucianism, Buddhism, and Taoism. Most of the Chinese subscribe to more than one since they are not mutually exclusive. There are an abundance of deities, earth gods, kitchen gods, and patron saints for professions, events, and all aspects of daily life. A brief summary of the principal codes of the three religions is helpful in regard to Chinese beliefs:

Confucius was a great and respected sage who lived from about 551-475 B.C.. He defined a

social code of humanity and love, and specified the duties and obligations which were the roads to harmonious living. While promoting belief in the gods, the Confucian code is not what Westerners would call religion. Rather, it is concerned with moral and social standards and practices, and with food, music and all art forms.

Taoism is a magical and mystical religious force, with much secrecy in rites and organization. Taoist priests supervise worship, officiate at burials and marriages, organize some festivals, and form a religious hierarchy knowledgeable about the myriad of gods and goddesses, dragons and other spirits who guard the world.

Buddhism was brought to China from India in the first century B.C., and is responsible for the development of much art and architecture which Westerners usually think of as purely Chinese. The Indian stupa (tomb) was transformed into the pagoda as a sanctuary for relics of the Buddha. Buddha taught compassion for all living things and, as he saw no one code of laws for all life, directed all men to find their own roads to truth.⁹

The various religions share many similar beliefs and customs related to each other. Although some beliefs deal with religious duties, others encompass the mysteries of fortune and good luck. Holidays honoring patron saints, various spirits, and other gods are celebrated by the entire family. Ancestral worship is the fundamental basis of Chinese society and religion. There are specific and complex duties which sons must perform for their fathers. Even after death, ancestors maintain the same relationships they had with their family while living. Religious

⁹Living in Hong Kong, (The American Chamber of Commerce in Hong Kong, 1982), p. 30.

festivals are set aside to pay homage to ancestors and to invoke their blessings. There is no one specific day for worship; as a result, people frequent the temples whenever they felt it necessary or when it was a holiday.

Despite the words of Confucius, the philosophy of Taoism, or ancestral worship, it is clear that the primary religion of most Chinese involves the pursuit of worldly success, the appeasement of the dead and the spirits, and the quest for hidden knowledge about the future. All of this is controlled, according to Chinese beliefs, by paying ritualistic respect to the dead, keeping the spirits quiet and satisfied, seeking harmony in every-day life, and by using various methods of divination. It is common practice to burn incense and an eternal light for the gods and to burn paper images, such as carriages, houses, servants, clothes, and money. This is done in order to accompany the dead person into the world beyond and insure his or her comfort. Concerns such as these help to comprise the Chinese community and are customs which they have carried with them all over the world. These customs appear mysterious to outsiders, either because they have never experienced them before, or because having observed them, they are unsure about what the gestures represent. Therefore, any discussion about these matters by the Chinese is infrequent, lest they be ridiculed by outsiders. Rather, the Chinese wish to appear thoroughly modern and free of

attitudes which might seem archaic or backward to non-believers. This is particularly true of those who have been educated in the western countries or those who have come from the upper strata of Chinese society and have always been less involved with the peasant crudities of the vast majority of the Chinese people.

Apart from the seeking of good fortune, the major aim of the Chinese is to keep their relationship with the spirits of the dead as smooth and happy as possible. The Chinese, more than any other people, are obsessed with the dead. Ancestral worship and filial respect both result from the fear that the spirits of the dead will return to harm the living. The Chinese people, therefore, find it necessary to give constant care and attention to these customs.

The Family. A traditional Chinese family, according to Confucius, is an autocratic organization founded on two well-defined unwritten rules: the superiority of the older generation over the younger generation, and the superiority of males over females. A father has authority over his son, while a husband rules over his wife. Within each generation, the oldest son has authority over his younger brothers and sisters, although not as absolute as that of his parents. These rules are successful because they operate on the premise of mutual responsibility and

commitment, which includes love and protection on the part of the superior, and respect and obedience on the part of the inferior. This concept encompasses the belief that when the head of a family made a decision which affects himself or one of the family members, he fairly and unselfishly considers the family's interest as a whole. In turn, each family member is held responsible for the behavior of his or her section of the family.

Ideally, the family is an extended one consisting of several generations living together, including grandparents, parents, married sons, grandchildren, and servants. The oldest member remained at the head of the family, and the continuity of the ancestral cult, as well as the survival of the individual family name, is very important. However, the contemporary urban Hong Kong family and their social life exhibit a number of trends which vary considerably from the traditional family structure. Among these trends is the breakdown of the family structure from a complex kinship to a much simpler two-generation family. Contrary to the Confucian ideal, the nuclear family consists of a husband and wife and their children and is becoming more predominant. Beyond the nuclear family, blood relationships still remain very strong.

Another contemporary trend among the urban Hong Kong family is the conjugal relationship. Rather than emphasizing the relationship between the son and his parents

so strongly, more importance has been given to greater equality between husband and wife. The movement toward equality in family relations has led to the improvement in the status of women. Although many women now work outside the home, the understanding is still that the husband is the "outside" person; the one whose employment provides the major source of economic support. A wife, therefore, is the "inside" person whose chief responsibility is the maintenance of the household.

A third major trend involves the nuclear family unit and the fact that it is becoming increasingly independent, both economically and psychologically, of the larger kinship groups. This independence leads to greater equality between the family units which are established by older and younger brothers. In the past, the isolated nuclear family was considered to be a sign of poverty or misfortune; however, the present nuclear family arrangement is viewed as a conscious choice by those who desire more independence from traditional kinship ties. Nevertheless, the expectation remains that elderly parents will live with one of their children, preferably a son, rather than on their own or in nursing homes.

The fact that people in the city of Hong Kong no longer work among their relatives and neighbors in the fields or in fishing boats has created another major trend. Today, people work in offices, factories, and shops. As a

result, they have generated a movement from primary to secondary group relationship. However, the dominant trend in the modern economic enterprise is one of founder/owner preferring to turn over control of the company to his son, rather than to professionally trained and experienced managers.

Today, ancestral rites are still practiced in both rural and urban homes although tracing back fewer generations than before. The ancestral cult can only be perpetuated by male children because it is believed that daughters will become completely integrated into their husbands' families when they get married. Therefore, the birth of a boy is generally preferred because he will preserve all rites. In the area of marriage, there are some which continue to be arranged by elders seeking a compatible match. However, the final decision on who one will marry is made by the prospective bride and groom themselves. Generally, the romantic ideal of the "love marriage" is the customary approach to marriage. Interpersonal decorum, respect for elders, filial piety, cooperation, and obedience, are all values that are strongly emphasized in Chinese family. Individuals are expected to be high achievers academically, financially, and socially in order to bring honor to their families and to gain self-respect for themselves.¹⁰

¹⁰Ibid. p. 19.

Health Concepts. When it involves the issue of health, the Chinese have a culture of their own which is composed of a complex series of beliefs and life practices which help to maintain a healthy and long life. The importance of health was conveyed in the writings of I Ching (The Oracle of Change). In 700-800 B.C., I Ching described the learned man as a man who always mediated on trouble in advance and took preventive measures.¹¹ Within Chinese classical medicine, there was a consistent emphasis on treating patients before any disease symptoms were manifested. To seek treatment after one had fallen ill was not economical or reasonable; the rationale being that although the disease might be cured, there were inevitable harmful residual effects. Good health was ranked among the top priorities in life, regardless of whether an individual was more traditional or more modern in his value judgement.

The values of being healthy and keeping one's body intact are taught early to Chinese children, both at home and in school, in order to preserve the continuity of family lineage. The teaching of Confucius, to which every school child is exposed, emphasizes the respect for the human body. This respect, in turn, relates to the practice of ancestral worship and filial piety. Confucius believed that a person should not do any harm to his or her body because the body

¹¹Joseph Needham, Clerks and Craftsmen in China and the West, (London: Cambridge University Press, 1973a)

was a gift from his or her father and mother. Doing harm to one's body or allowing it to become disfigured deliberately or through carelessness was considered to be an inexcusable act; an act so extreme that it might have brought bad luck or illness from one's ancestral ghosts down to one's descendants. In the previous century when surgery was first introduced to China, it was standard practice that certain body parts removed through surgery were to be returned to the patient's family. When the patient died, the body parts were included in the casket for burial. This practice still persists in the hospitals of Hong Kong today.¹² In times of sickness, family members are very involved in the care of the patient, both at home and in the hospital. They take care of both the patient's personal needs and his nutrition. Caring for the sick among the Chinese is, of course, contrary to the degree of involvement in a sick family member's care in Western society where much of the patient's needs are left to health professionals.

Throughout the centuries, followers of Taoism persistently sought methods to both increase the life span and/or prevent the death of the physical body or soul. Taoists believed that the ideal purpose in life was to become immortal, forever enjoying the beauty of nature. People who lived to an elderly age believed they were given

¹²Koo, Nourishment of Life: Health in Chinese Society, pp. 7-8.

a reward from heaven. Subsequently, they were highly respected by others and thought to have much to teach. The ideal image of a teacher or a man of great knowledge was a wizened old man with a high bulging forehead and a long white beard. The living symbols of the interrelationship of good mental and physical health was when elderly people attained this immortal state by understanding the forces of nature and by conducting their lives in harmony with nature. The ultimate force was the opposing elements of yin and yang. Without one, the other could not exist. For example, without night, there would be no day; without love, there would be no hate. An improper balance of yin and yang resulted in illness and was the chief cause of death. In relation to health, the key was to balance yin and yang forces in order to nourish life and to live a full and normal life span free of illness.¹³ In spite of the radical changes inherent in the people's material and economic lifestyle and the influence of western medicine, the old traditional concepts and methods of health are still favored. Consequently, a number of techniques which are believed to enhance health, such as massage, diet, respiration exercises, and meditation (supposedly to increase or preserve the vital energy of life in the body) are developed and encouraged.¹⁴

¹³Ibid., p. 34.

¹⁴Ibid., p. 34

Food is believed to be a source of energy for the body. It also helps in the balance of yin and yang and is used as therapy to help cure certain illnesses. Chinese people are very conscious of their diets and methods of food preparation. What to eat and when to eat, are considered the most important factors affecting health. Most of the people have some concept of which foods are good for certain common ailments and which foods may be harmful. Raw and cold foods, except fruits, have traditionally been shunned. This practice was initiated in the past to prevent food poisoning. Soups made from bones are believed to promote healing of bone fractures, while animal tendons aid in the repair of ligament and tendon lacerations. Meals eaten slowly at a regular time each day with similar quantities at each meal ensure the maximum absorption of nourishment and prevention of any digestive disorder. Consumption of hot spicy food, deep-fried food, coffee, and alcoholic beverages should be curtailed to avoid over stimulation.

A Chinese theory which helps to understand the natural universe is known as the five elements. Belief in the five elements is based on the idea that all natural phenomena can be categorized into groups of five. The groups of five elements are:

1. Wood, fire, earth, metal and water;
2. North, south, west, east and central directions;
3. Sour, bitter, sweet, pungent and salty flavors;
4. Anger, joy, sympathy, grief, and fear and bravery feelings;
5. Ligaments, arteries, muscle, skin and hair, and

bones of the body tissues.¹⁵

The relationship between the elements in a group of five can be successfully productive or destructive. For example, the productive cycle of the five main elements can be illustrated as the following: wood is needed to feed fire. The ashes from the fire produce earth, and the earth contains metal. Metal is in water, and water is necessary if trees are to grow and be able to produce wood. The theory of the five elements implies that natural processes are continually interacting between different elements, and the groups are systematically related to one another. Examples of the relationship between the excessive use of food flavorings and its effects on body tissues are:

1. An excess of salty flavor hardens the pulse;
2. An excess of bitter flavor withers the skin;
3. An excess of pungent flavor knots the muscle;
4. An excess of sour flavor toughens the flesh;
5. An excess of sweet flavor causes aches in the bones.¹⁶

Furthermore, the flavors are also interrelated in the Yellow Emperor's Classic of Internal Medicine with other universal systems of five in the following manner:

1. The East creates the wind;
2. The wind creates the wood;
3. The wood creates the sour flavor;
4. The sour flavor strengthen the liver;
5. The liver nourishes the muscles;
6. The muscles strengthen the heart;

¹⁵Ibid., pp. 35-36

¹⁶Ilza Veith, The Yellow Emperor's Classic of Internal Medicine, (Berkeley, CA.: University of California Press, 1972), p. 138.

7. The heart governs the eyes;
8. The eyes see the mystery of Heaven and discover Tao among mankind.¹⁷

The Chinese believe there is an interdependency between the mind and the body and, therefore, there is a direct correlation between physical and mental health. Emotional extremes of any kind are believed to have an adverse effect on a corresponding organ: intense anger causes abnormal rushes of blood, thus, creating liver disorders; over-anxiety harms the lungs; worry hurts the spleen; grief and sadness cause heart ailments; and fear and shock result in circulatory disorders. On the other hand, excessive joy can be dangerous because it may lower the body's resistance against illness. Given the principle of the theory of the five elements, mental health is considered to be as important as physical health. If one is mentally healthy, he or she is able to control emotion, cultivate the mind and maintain moderate behavior.¹⁸ Proper role behavior is a reflection of one's state of mental health and is one of the reasons for the strong belief in the importance of formal education. This is believed to be so because the way a mentally healthy person behaves closely resembles the image of the Confucian scholar.

Also stressed over the centuries has been the

¹⁷Ibid.

¹⁸Koo, Nourishment of Life: Health in Chinese Society, p. 36.

importance of regular exercise in order to maintain good health. All forms of exercises are a rather common sight when encountering groups of people. Today, those both old and young, representing all social groups, can be seen in the parks early in the morning, either walking, jogging, and/or practicing Kung Fu. The emphasis placed on health by the Chinese cannot be underestimated.

In time of illness, traditional folk medicine is still widely practiced. However, Chinese are increasingly recognizing the value of Western drugs, but they continue to use herbs for certain ailments as they see fit. When seeking medical help, some persons believe that Western medicine is for Westerners and Chinese medicine is for Chinese. Others think that Western medicine is best for some diseases, like tuberculosis, but that Chinese medicine is more effective for skin diseases and blood disorders. Still others believe that a combination of both provides the best treatment. It is not unusual for a patient to see two or three physicians and herbalists during the same period. In addition, some Chinese are in the habit of keeping all the medicine that they have received and take them at their own discretion at various times for numerous ailments. They also tend to borrow and loan medication at will. This kind of practice not only is counterproductive at best but may also cause serious side effects or grave consequences.

Political Attitude. Apathy has been commonly treated as an inherited trait, consistent with the national character of the Chinese. In regard to politics, the Chinese are very often characterized as politically apathetic. The lack of interest and avoidance of involvement in politics are evident in a survey conducted by Shanghai University assessing the political interests of the high school students. Results of the Shanghai University study indicate a very low interest level as related to the subject of political science. In spite of the preference to remain uninvolved in the area of politics, the Chinese will become intense, even feverishly involved in political activities, given the right situation. Sentiments will be unleashed, often creating utter chaos in China whenever the authority system breaks down.¹⁹ The history of China is complete with thousands of peasant riots and rebellions against the government. Although some were successful, there were many that failed. Whatever the outcome, the Chinese people maintained an active part in an attempt to relieve the appalling conditions they experienced and to possibly alter the government policies. Though political conflicts and violence in Hong Kong are rare, they do exist. Some of these political conflicts include the activities of Sun Yat-sen and his Hong Kong clique during the 1911

¹⁹Richard Solomon, Mao's Revolution and the Chinese Political Culture, (Berkeley, CA.: University of California Press, 1981)

revolution; the strikes of the 1920s; and the riots during the 1950s and 1960s.

In today's Hong Kong, the Chinese are not as apathetic as they appear. Rather, they are fairly active in the cognitive dimension of political culture. Whenever they feel the necessity to participate politically, they proceed with confidence. Particularly now that the Chinese in Hong Kong are settlers, the Chinese elite and the British elite share identical interests which are predominantly economic in nature. They are willing to give full support to the government in order to maintain political order and economic stability.

Language

Throughout history, it has been estimated that there may have been as many as one hundred different dialects spoken in China. Each of these dialects sounds so distinct that people from one village may not be able to communicate with people from the neighboring village. The two most popular and widely spoken dialects in China are Cantonese and Mandarin; Cantonese in the south, Mandarin in the north. As different as these two dialects sound, all Chinese people are able to read the Chinese characters. Each character is written the same way, in spite of the various pronunciations within the dialects and their sentence structure. Ever

since Britain took over Hong Kong, English has been the official language, and all government documents were written and read in English. Only recently has the Chinese language been adapted and spoken.

Most of the Chinese living in Hong Kong come from the southern province; therefore Cantonese has become the second official language. Because of the many dialects, communication among the Chinese is difficult, as is the ability to be proficient in both English and Chinese. There has been much discussion and debate concerning the issue of whether or not bilingualism should be made mandatory for Hong Kong students. The amount of stress placed on the students and government officials to be bilingual has currently become a major issue.

Present Situation and Future Perspectives

The question of Hong Kong's future regarding the New Territories' lease remains unanswered. From the Chinese point of view, it is natural that at some time in the near future Hong Kong will once again become part of China. The treaties signed by the Qing and British governments are unequal treaties, and it is the goal of the Chinese government to terminate all unequal treaties. Chinese communists believe that, in this regard, they are responsible for the history of China as a nation. Further-

more, reunification with Taiwan is also one of China's national goals, and the Chinese leadership is eager to use Hong Kong as an example for the Taiwanese and the Guomindong regime. It is important for the Chinese government to demonstrate to these regimes its ability to govern an island such as Hong Kong while at the same time maintaining its stability and prosperity.

According to the British government, the New Territories' lease is based on the second Convention of Peking which concluded in 1898. In 1842 and 1860 respectively, the Treaty of Nanking, which ceded Hong Kong Island, and the First Convention of Peking, which ceded the Kowloon Peninsula, both provided legal justification for British rule over Hong Kong. Theoretically, the British government can choose to return only the New Territories to China and to continue its rule over Hong Kong and Kowloon after June 30, 1997, at which time the lease will expire. In practice, however, according to the plans for development by the Hong Kong government, over half of the total population and a large portion of the manufacturing industry in Hong Kong will be in the New Territories by 1997. It is, therefore, impossible to move the Hong Kong/China border southward to Boundary Street in Kowloon where the original boundary was drawn at the first Convention of Peking in 1860.

In the late 1970s, as the deadline for the New

Territories lease approached, concern about the future of Hong Kong began to be expressed both in the territory and among foreign investors. The individual land lease granted in the New Territories, which will expire three days before the expiry of the New Territories in 1997, has created many problems. The continuing shortened span of these leases and the inability of the Hong Kong Government to renew them beyond 1997 might very likely deter possible investments as well as damage confidence.

After much deliberation, the British government concluded that if nothing was done to alleviate the uncertainty caused by the 1997 deadline, confidence would soon begin to erode during the next decade. The governor of Hong Kong visited Beijing in 1979 in an attempt to solve the specific question of land lease expiry in 1997. This visit marked the beginning of negotiations which continued over the next several years. In late 1982, the British Prime Minister, Mrs. Margaret Thatcher, visited China to begin the Sino-British talks on the future of Hong Kong. Delegations formed by the unofficial members of the Executive and Legislative Council, very much aware of the concern expressed by the people of Hong Kong about their future, were sent to London and China. It was here that they presented each government's proposal which they hoped would help to enhance the confidence of the people of Hong Kong.

In the years that followed, there were strong indica-

tions that Chinese authorities had come to realize two important points concerning the settlement of Hong Kong's future. First, they were beginning to understand that in terms of investment, 1997 was not far into the future. The willingness of investors to do business in Hong Kong could seriously be weakened if a clear-cut settlement was not reached by the middle 1980s. Second, the Chinese leaders have also become aware that their vague verbal assurances to Hong Kong investors were inadequate. What was needed from the businessman's point of view was a legal document between the Chinese and the British governments complete with international binding force.

In January of 1984, Ji Pengfei, the Chinese State Councilor with special responsibility for Hong Kong, issued the most comprehensive blueprint to date regarding China's plan for the future of Hong Kong. This plan guaranteed Hong Kong's existing social and economic system up to the middle of the next century; the crux of the plan including the making of Hong Kong into a Special Administrative Region (SAR) of the People's Republic of China. After 1997, the new administration in Hong Kong will be run by officials drawn from the local population, rather than from China. The Chinese government will appoint the key officials only after they have been consulted with or selected by the people of Hong Kong. China will also be responsible for the territory's defense and foreign policy. The local

government will retain the power to conclude agreements with other countries and international organizations on economic and cultural matters. It will also be able to issue its own entry and exit visas. The existing legal system will remain basically unchanged, leaving Hong Kong its own final court of appeal. As a special administrative region, Hong Kong will continue to enjoy financial autonomy, form its own economic policies, keep its free port status, and retain its position in the international financial and trade markets. Hong Kong's foreign exchange of stock and gold markets will continue to operate, and the Hong Kong dollar will stay in circulation and be freely exchangeable. The economic interests of Britain and other countries will also be guaranteed by law.²⁰

With China dictating the terms and refusing to compromise on the question of sovereignty and unequal treaties, the British government has begun to minimize its responsibility and commitments toward Hong Kong, while simultaneously, trying to make full use of its Colony and to reap the greatest possible economic benefits. The British Nationality Act of 1983, declaring that the 2.6 million Chinese registered as British subjects are no longer thus designated; rather, they will become citizens of the British dependent territory of Hong Kong. Moreover, when Hong Kong ceases to be a British dependent territory, these people

²⁰Cheng, HONG KONG: In Search of a Future, p. 4.

will become stateless, thus, reflecting the minimization of British responsibility toward the territory. The construction of a China/Hong Kong, Britain joint co-operation of the China Light and Power Plant of Hong Kong, (bought from Britain to supply electricity to Guangdong in exchange for coal from China), is an attempt to maximize benefits.

Under present circumstances, the interests and rights of the people of Hong Kong are not well-protected. Despite the Chinese government's assurances, Hong Kong citizens generally feel uncertain about their future. The process of transition has already begun, and the people of Hong Kong have made some psychological preparation. Among those in the upper socio-economic strata, including investors and financial groups, an exodus of capital and talent is gradually taking place.²¹ Given the opportunity, the majority of the middle class residents would prefer to emigrate or send their children to study abroad. Many Hong Kong residents have also begun to invest in real estate in the United States, Canada and Australia. There are no statistics available on the extent of this investment. However, judging from the volume of pages of overseas real estate advertisement in the local newspapers, one might easily conclude that such investments have become popular. Even small countries such as the Dominican Republic and Belize in Central America have recently set up offices in

²¹Ibid, p. 17.

Hong Kong to sell property. The main attraction to the people of Hong Kong is the automatic grant of permanent residency to any owner of real estate. After six month's residence, a land owner can become a citizen. Furthermore, he or she can hold a Dominican or Belizian passport concurrently with one issued by another government. Such terms seem to suggest that the buyers are more concerned with the right of permanent residence in a foreign country than with property investment. The main reason for emigration or the intention to do so by so many middle-class people is simply a lack of confidence in the future of Hong Kong, despite their awareness that the financial and psychological costs of emigration are often very high.

On December 19, 1984, the Sino-British Joint Declaration on the Future of Hong Kong was signed by the Prime Minister of the United Kingdom of Great Britain and Northern Ireland (Margaret Thatcher) and the Prime Minister of the People's Republic of China (Zhao Ziyang). This declaration claimed that Hong Kong would be an autonomous special administrative region in 1997, retaining its socio-economic system for an additional fifty years.²² (See Appendix I)

Generally, the people of Hong Kong appear to be fairly satisfied with the contents of this agreement; their interests protected and their future secure. The mass

²²Hong Kong 1985, p. 22.

exodus of capital and people have somewhat slowed down. Those Hong Kong residents who have travelled abroad appreciate the fact that living standards in Hong Kong compare quite favorably with those of advanced countries. Given the choice, with the guarantee of autonomy and a secure socio-economic system, these residents would prefer to remain in Hong Kong.

For the remainder of the 1980s and until 1997, there will be much concern about the direction of Hong Kong's future. Most of the people in Hong Kong believe that if stability and prosperity can be maintained in the period prior to 1997, it is possible that stability and prosperity can be continued for many years after 1997. Therefore, it is essential for Britain, China, and the people of Hong Kong to play their respective roles and to maintain the present condition. Britain must continue to fulfill its commitments to the total welfare of Hong Kong and to govern Hong Kong effectively to ensure a smooth transition. The Chinese government, on the other hand, must show its willingness to listen to the views and wishes of the people of Hong Kong and to adhere to what is agreed upon. Similarly, the people of Hong Kong must understand that the objective of the joint declaration is to maintain Hong Kong's stability and prosperity, and that stability and prosperity are the product of, among other qualities, their labor, initiative, talent, industry, and commitment. The people of Hong Kong

are ready and willing to take on the challenge knowing that their ultimate success depends upon confidence in the agreement, and the two governments' promise to faithfully implement the declaration.

The description given on Hong Kong provides background information on its history, administration, economy, social welfare, customs, and political attitude which will all lend light to the subsequent chapter on the secondary education in Hong Kong.

CHAPTER IV

SECONDARY EDUCATION IN HONG KONG

Historical Background

During the early nineteenth century, neither Britain nor China had any tradition of state education. In England, education was provided by churches and voluntary organizations or through the generosity of the public. The various churches built schools for the less fortunate children, both as an act of charity and to teach their own dogmas. In 1833, the state granted a sum of twenty thousand pounds to the Anglican and nonconformist societies for school buildings. It was from this modest beginning, along with local and voluntary efforts, that the modern English system of public education slowly emerged. In China, pupils paid fees to their teachers for the privilege of studying rote learning of the classics. This learning took place in the school houses which were generally confined to a single room. Upon the arrival of the British in Hong Kong some one-hundred and forty years ago, the total population was about 5500. The educational system consisted of a few Chinese schools which operated intermittently in order to provide the children of fisherman with some form of the Confucius classics. The European style of teaching was introduced to the Chinese by missionaries almost immediately

upon occupation of the island. Undoubtedly, propagation of the faith was the primary aim, as well as their interest in education. The missionaries organized colleges and seminaries for the training of Chinese candidates for the ministry. They also began schools which were attached to these colleges and seminaries in order to train the candidates. Unfortunately, the children of the boat people and those from the scattered seaside villages made unpromising subjects.

The Morrison Education Society of United States was first to arrive in Hong Kong. In 1843, the society was granted a plot of land by the Hong Kong government to build a school on Morrison Hill. The London Missionary Society also applied for land to build an Anglo-Chinese College. However, they were denied the land on the grounds that one educational institution on a small island similar in nature was enough. After considering what success, if any, the Morrison Education Society had, the governor of Hong Kong suggested that the two societies work together until the time when more schools were needed. In general, the schools in Hong Kong were dismal. At best, the schoolhouses were mere hovels, and teachers with low standards were ill-prepared.

The Secretary of Hong Kong proposed that the schools in Hong Kong be given financial assistance. During this period in England, however, the development of the national

system of education was delayed, due to religious differences and sectarian jealousies over the distribution of state grants used to assist the denominational schools. Although the governor recognized that public assistance was necessary, he did not want to be caught in a situation similar to England's. Therefore, he was careful to guard against the use of public funds to support sectarian education. In 1847, the first public grants were given to those Chinese schools making education free to those who attended these schools. The teachers who received the grants were responsible for providing schoolrooms and for meeting all incidental expenses. A committee, consisting of the colonial chaplain, the chief magistrate, and the registrar-general, was appointed to supervise the three Chinese schools that received these grants. The committee, however, could not interfere with the traditional Chinese curriculum and method. Rather, they added some Christian teaching on a voluntary basis. This marked the beginning of the Colony's public system of education. The first annual report of the education committee noted a total of ninety-five boys attending the grant schools. Eventually, the three teachers were replaced with Chinese Christians nominated by the committee in the hope that they would possess higher moral standards than those of their predecessors.

In 1852, the education committee was reorganized and

the Anglican bishop was appointed chairman. The bishop, aside from using the government schools to provide some form of general education and to produce interpreters for the consular service, also used the schools to prepare Chinese candidates for the Anglican ministry. The appointment of the bishop had increased the Christian and Anglican influence in the government schools. Typically, a school day included spending half a day on scripture study and half a day on both the Chinese classics and the English language.

From 1854-1859, the number of schools to receive government money increased from five to nineteen. There were eight schools in the central area of the Colony. The remaining schools, generally small and backward, were scattered among villages, making supervision a serious problem. The number of children attending schools increased from 102 to 873 boys and 64 girls, and the annual cost of education increased from 125 pounds to 1,200 pounds. Along with the increase in enrollment, proposals were submitted for the improvement of school buildings. Apprentice teachers were introduced, and assistant masters capable of teaching English were hired for the larger schools. An inspector was also appointed to conduct weekly inspection of all government schools. However, there remained no formal system of teacher training, and the moral and intellectual tone of the Chinese remained low.

In 1860, the education committee was reconstituted as

the board of education which remained under the chairmanship of the Anglican bishop. The number of government schools continued to increase, and the travelling involved to inspect these schools was so great that progress was hardly possible. Consequently, the situation within the government schools remained poor and inadequate. To improve the standard of education in the city, a number of government schools no more than single-room hovels were eliminated, and the pupils were pooled into a central school located in a large, specially designed building. For the first time, a trained European headmaster was hired to educate the students. The rationale given for this change was that by sacrificing the village schools, would result in one efficient school in the city. However, supervision over the outlying schools continued to be difficult, and progress in the state-aided schools was slow with irregular attendance. Most often children withdrew early to seek employment.

The board of education was abolished in 1864, thus freeing government schools from church influence. Once again, the missionary bodies relied on their own resources with little support from the government, which would not sanction the use of public funds to support sectarian education. At no cost to attend, the government schools continued to attract only children of the poorer class, while the Chinese private schools were preferred by the

well-to-do Chinese population. Those choosing private schools did so because of the fact that these schools were free from government interference and western influence. The general education system during this period included a collection of government schools, Chinese private schools, mission schools, separate schools for boys and for girls, and boarding schools. There was still no arrangement for the formal training of teachers. Routinely, the best pupils of the central school were secured as teachers. However, most of these students left school early to seek employment elsewhere, taking positions in California, Japan, and the Chinese treaty ports as well as with business companies in Hong Kong. By 1865, after years of preparation, experiment and struggle, the school system was beginning to improve and to finally emerge.¹

In 1868, the government assisted the villagers in providing their own schools and allowed them to appoint their own school masters. The government paid half of the teachers salaries and provided the buildings. After four years, it was determined that the assisted-school concept did not work out as hoped. In order to continue to receive government grants, the school masters often paid the parents and had the children be present in class only during times of inspection; otherwise, the schools might be left empty or even closed for days on end. The only salary

¹G.B. Endacott, A History of Hong Kong, pp. 133-143.

teachers received was that granted by the government. To motivate the teachers to become more efficient, a system of bonus payments based on the results of the annual inspection was introduced. For incentive, financial assistance was prorated based on the rating. At the same time, school inspection and government grants were extended to the missionary and other voluntary schools making elementary education available to more children. Most of the religious bodies applied for grant-in-aid for their schools; the few that did not were reluctant to go under secular control. The policies to qualify for a grant were several. A school was required to:

1. operate as an elementary school on a non-profit-making basis with an attendance of at least twenty pupils;
2. satisfy the inspection in school organization and discipline;
3. conduct secular instructions at least four hours a day;
4. appoint teachers, as long as the government was satisfied with their competency;
5. give a quarter of the grant money to the teachers as a personal payment.

For purposes of a grant, there were five classes of schools which offered Chinese education, Chinese education and English language, European education in Chinese,

European education in any European language, and European education of any European language and Chinese. Within the five classes each class had six standards of syllabi. The grant earned by each child was based on the class and standard he/she was in. The higher and more complex the classification the more grant money a child received. Grants were administered as a result of an annual examination conducted by the inspector of education. Because of the temptation of the schools to push the pupils into taking the higher standards to earn more grant money, the program had to be amended in 1879, stating that additional grants would be given to the lower standards. During this period, the missionary schools showed the greatest development, particularly when the grant was given on more acceptable conditions. These schools began to aim at standards above those of elementary education. It was at the governor's suggestion that the central school be changed to Victoria College to both keep up with the religious bodies which called their best schools colleges, and because the pupils were generally older than those in the district schools. The governor wanted to introduce examinations in the medium of English for appointments to government clerical and other minor posts. He also decided English should be taught in all government-maintained schools.

Recruitment of teachers from England was very costly, and in 1881 a normal school for the training of English-

speaking teachers was begun. Even more English in the schools was encouraged, and in 1887, the Cambridge Local Examinations were introduced. The following year, Victoria College was opened with 960 pupils and placed under a board of governors rather than the inspector. During this time, two government scholarships for the study of medicine, law or civil engineering in England were also created.

By the year 1890, there was a total of 112 schools with 7,170 students under the jurisdiction of the education department. There was a school within reach of every child. Most of the government and grant-in-aid schools were free. The central school and other middle-class schools as well as private schools charged fees. The Chinese continued to support their own vernacular schools in which the traditional Chinese education was given without government grant or inspection.

The growing stature of education during the first decades of the twentieth century was establishing of the University of Hong Kong and the passing of the education ordinance. The ordinance provided for the registration and supervision of most of the private schools, the first of its kind within the British Empire. Expenditures on education increased from 0.3 percent of government spending in 1853 to 3 percent in 1913. The school population increased from 19,500 in 1914 to 120,000 in 1940. There was progress in rural schooling and education for girls, although to some

extent, the old Chinese belief that "illiteracy in a woman is a virtue" remained.

Vernacular education and the development of technical education were the focus during the 1930s. Educators also felt that too much emphasis was placed on the English language and that more Chinese should be taught at the primary level. By 1939, some tentative steps were taken toward using Cantonese rather than English as the medium of instruction for subjects in some of the lower forms of the Anglo-Chinese schools. Unfortunately, other improvements planned for the system, including new Chinese primary schools and a new subsidy code for education, were thwarted by World War II.

When the war ended in 1945, school enrollment was fewer than fifty thousand students. School buildings lay in ruins, equipment had been destroyed, textbooks were almost nonexistent and the number of trained teachers was severely depleted. The process of rehabilitating the school system was laborious and difficult. The actual growth of the school system began in 1949, when the Chinese who had left Hong Kong during the war returned. Immigrants from China legally and illegally crossed the border in tens of thousands each day to escape the new People's Republic government. Hong Kong's population increased by about 50 percent during the 1950s; the school population increased more than threefold in 1963. Most schools were overcrowded

and it was estimated that only one-third of the children were in school. The 1970 census showed that 35 percent of the total population were under fifteen years of age. In more recent years, the arrival of refugees from the war zones of Vietnam, Cambodia, and Laos further required a major expansion of the educational system. With a predominantly young and rapidly growing population, a massive school building program was in dire need and the development of primary education and teacher training were the top priorities. In the 1950s, the government, voluntary bodies, businesses and individuals all contributed to widening educational opportunities. Extensive government building programs were launched, and at their peak, about 4,500 primary school facilities were being added each year.

Although the population continued to grow between the 1960s and 1970s, there was a reprieve for the educational authorities in the late sixties when the school-age population remained static. This decrease in enrollment provided the authorities the opportunity to consolidate and enhance the educational development, not only at the primary level but also at the secondary level. Increased subsidies to rural and urban vernacular schools, the establishment of technical, adult and higher education, the introduction of special programs for disabled and handicapped children, the planning for the Hong Kong Polytechnic, and the opening of the Chinese University of Hong Kong in 1963 were some of the

achievements during this period.

The early 1970s experienced further progress in the growth and maturation of the educational system. In 1971, primary education for the six to eleven-year age group was made universal. By 1979, nine years of free general education for all with sufficient places in senior secondary forms in the public sector for at least 40 percent of the fifteen-sixteen age group were provided. The curriculum development committee was appointed to design a balanced curriculum to meet the needs of the rapidly growing industrial and commercial society. Improved programs of teacher education were also introduced in the colleges of education. The initial training courses were restructured from one year to two years, and a third-year course in selected subjects was added. All major sectors of education were under constant review and revision. The main thrust from 1978 on had been in the fields of senior secondary and tertiary education.²

As of 1980, the age structure of the population had changed with a markedly lower proportion under fifteen years of age and a growing proportion of working age or those eligible for higher education. The redistribution of the population was also effected with the development of six new towns in the New Territories. These demographic changes

²A Perspective on Education In Hong Kong: Report By a Visiting Panel, (Hong Kong, Education Department, Nov. 1982).

have created awkward short-term problems of supply and demand in education, particularly in the over-provision of resources in areas of declining population and under-provision in developing areas. The solution to the problem somewhat affected the direction and pace of some of the educational developments in ways which were not always entirely consistent with the underlying objectives of the educational policies. Table III illustrates the increase in the government's expenditure on education between the years 1975 and 1984.

Table III

Government's Expenditure on Education

Year	Recurrent (\$mn)	Non-Recurrent (\$mn)	Total (\$mn)
75-76	1103.7	153.7	1257.4
76-77	1299.4	82.8	1382.2
77-78	1510.4	82.0	1592.4
78-79	1758.4	129.3	1887.7
79-80	2123.4	240.4	2363.8
80-81	2901.1	362.8	3263.9
81-82	3566.2	395.8	3962.0
82-83	3987.0	934.0	4921.0
83-84	4863.3	860.2	5723.5

Source: Information and Public Relations Section,
Hong Kong Education Department, Sept. 1984

The Educational System

Currently, there are about 1,400,000 children in the Hong Kong school system (some 27 percent of the total population) of nine years free and compulsory education up to the age of fifteen. The government expects to be able to provide subsidized schooling for about 62 percent of the fifteen-year-olds who wish to continue with their education. Although formal schooling begins at the primary level at age six, it is still permissible for a child to enroll in a primary school up to eight years of age and remain there to complete his/her primary course until the age of fourteen. It is also permissible for students to repeat one year, if necessary. As a result, a number of children in the twelve to fourteen age group are still in primary schools.

The schools are categorized according to the methods by which they are financed. The three main types of schools are government schools wholly operated by the government, aided schools run by voluntary bodies which receive financial assistance from the government, and private independent schools which receive no direct assistance from the government. In government and government-aided schools no tuition fees are charged at the primary and junior secondary levels, although a facilities fee may be required in some cases. Fees charged for senior secondary education are usually nominal and remission of fees for the needy is

common. Most private schools are run as profit-making institutions, thus, economic fees are charged at all levels. The tuition fees are, however, subject to the approval of the director of education. Other than the government-aided or assisted schools, over half of the grammar schools are private with the government "buying" about half of their places in Forms I-III.

The general school system encompasses two or three years of kindergarten education (Kindergarten 1-2 or 3), six years of primary education (Primary 1-6), three years of junior secondary education (Forms I-III), two years of senior secondary education (Forms IV-V), and one or two years of sixth-form education (Forms Lower VI - Upper VI). In addition there are schools for post-school education provided by the vocational schools, technical institutes and the Hong Kong Polytechnic. The televised educational programs comprising the five basic subjects (Chinese, English, mathematics, science and social studies) and closely following the syllabuses actually used in classrooms are designed for both primary and secondary school students. The programs are to supplement the work of the teachers. Higher education, special education, adult education, and continuing education are all part of the Hong Kong educational system. For non-Chinese students there are the English and special schools.

The English schools are those operated by the English

Schools Foundation for English-speaking children. Both the structure and curricula are based very closely on those of the state system in England and Wales. The courses offered are geared to the Certificate of Secondary Education Examination or to the London General Certificate of Education. Within these schools there is a wide range of extra-curricular activities. Although the majority of the students are from British expatriate families, other students of many nationalities, race, faith, tradition, and culture give the schools a truly international character. There are no formal entrance examinations but children are interviewed and usually given a test before admission to ensure that they have a sufficient command of English in order to benefit from the type of education offered. There are four secondary schools for English-speaking children in the public sector. The demand for these places is heavy and there is no guarantee of immediate admission.

The small number of special private schools provide education for overseas children temporarily residing in Hong Kong or having close affiliations with particular national systems of education such as Japanese, French, German, and North American. These schools also accommodate students whose parents prefer such education for their children and are willing to pay the relatively high tuition fees charged³

³Education Facilities for English Speaking Children, (Education Department, Hong Kong, Sept. 1984)

(See Table IV and Figure VI).

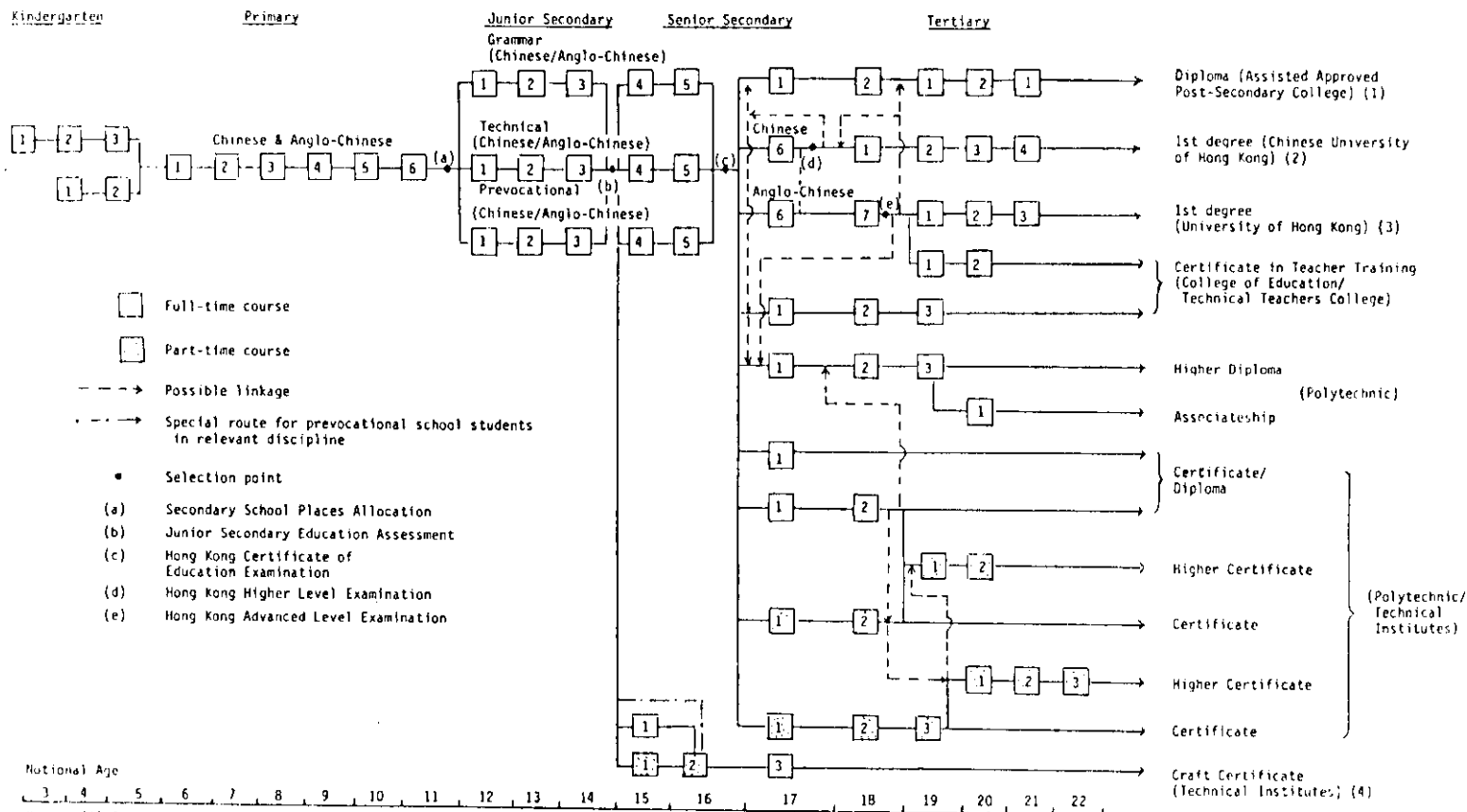
Table IV

	<u>1982</u>	<u>1983</u>	<u>1984</u>
<u>Kindergarten</u>			
Private	205,200	209,869	226,450
<u>Primary</u>			
Government and aided	476,384	480,678	480,074
Private	71,128	66,602	61,141
Sub-total	547,512	547,280	541,215
<u>Secondary</u>			
Government and aided	300,081	306,532	314,470
Assisted private	6,006	5,872	4,047
Other private	212,634	199,288	183,282
Sub-total	518,721	511,692	501,800
<u>Post-secondary</u>			
Government	4,038	4,724	4,834
Private	11,664	11,346	8,545
Sub-total	15,702	16,070	13,379
<u>Adult education</u>			
Government	17,061	20,822	21,004
Private	55,635	60,088	64,109
Sub-total	72,696	80,910	85,113
<u>Special education</u>			
Government and aided	11,666	10,622	9,475
Private	---	---	---
Sub-total	11,666	10,622	9,475
Total	1,371,497	1,376,443	1,377,432

Source: Hong Kong Information Services, 1985

Figure VI

The Hong Kong Education System (1981)



Notes: (1) In addition to the Assisted Approved Post-Secondary Colleges, there is the Hong Kong Shue Yan College which offers 4 year courses, the minimum entry requirement of which, in terms of the Post Secondary Colleges Regulations, is successful completion of Form V.
 (2) 1st degree in medicine requires 5 years of study.
 (3) B.A. (Bldg.) requires 4 years of study while B.A. (Arch.) and M.B.B.S. require 5 years of study.
 (4) Student with craft certificate may enrol in the Technician Course after the completion of a bridging course which lasts for a minimum of one year.

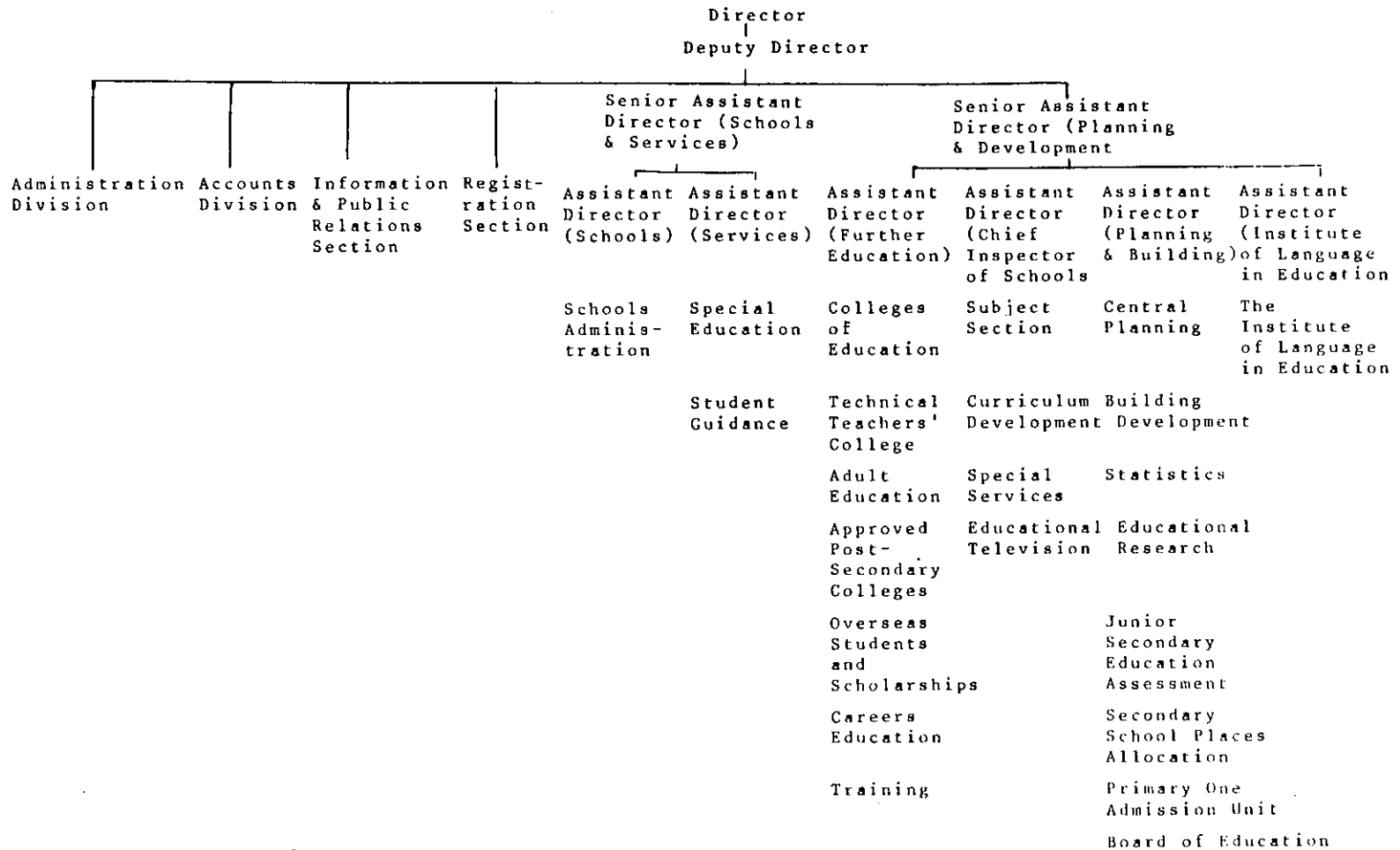
Source: The Hong Kong Education System, Hong Kong Government Publisher, June 1981.

Secondary Education

Administration. The Education Department is headed by the director of education and his deputy. Principally, the department is divided into two main sections: the schools and services section, and the planning and development section. Each is headed by a senior assistant director. These two sections form the two major functions of the education department and are further divided into six operation units, each headed by an assistant director whose responsibility is to organize and supervise the activities within his specific area of education. Other divisions within the education department include the accounts division headed by a chief treasury accountant an information and public relations section headed by a chief information officer and a registration section headed by a senior education officer who is mainly concerned with administering the education ordinance and education regulations in the registration of schools and teachers. The director, the deputy, and the two senior assistant directors are responsible for matters concerning the overall educational policy, comprehensive planning, and the general control and co-ordination of services. Figures VII-IX explain the functions and responsibilities of the different divisions.

Figure VII

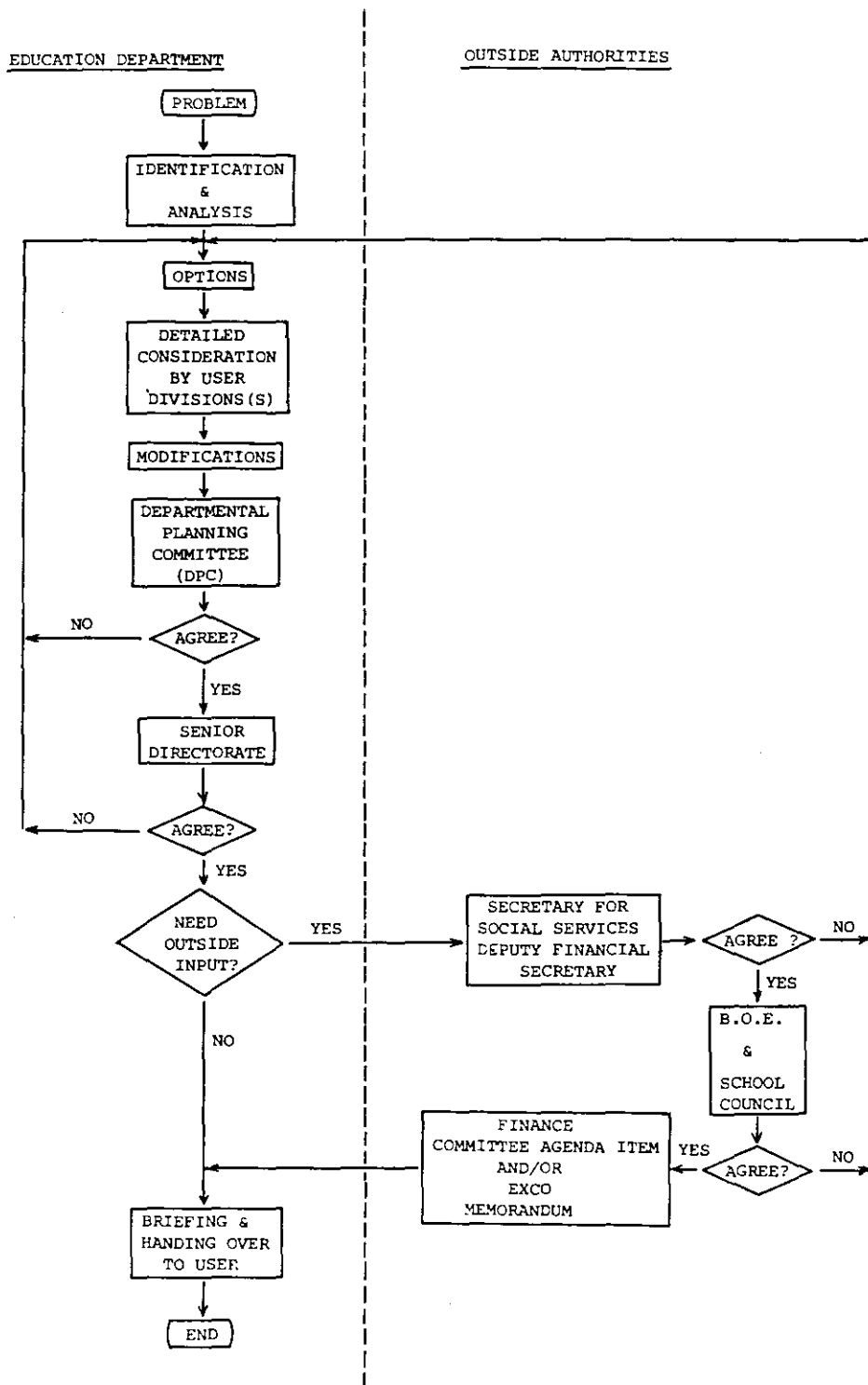
The Administration Organization of the Education Department



Source: Information and Public Relations Section

Figure VIII

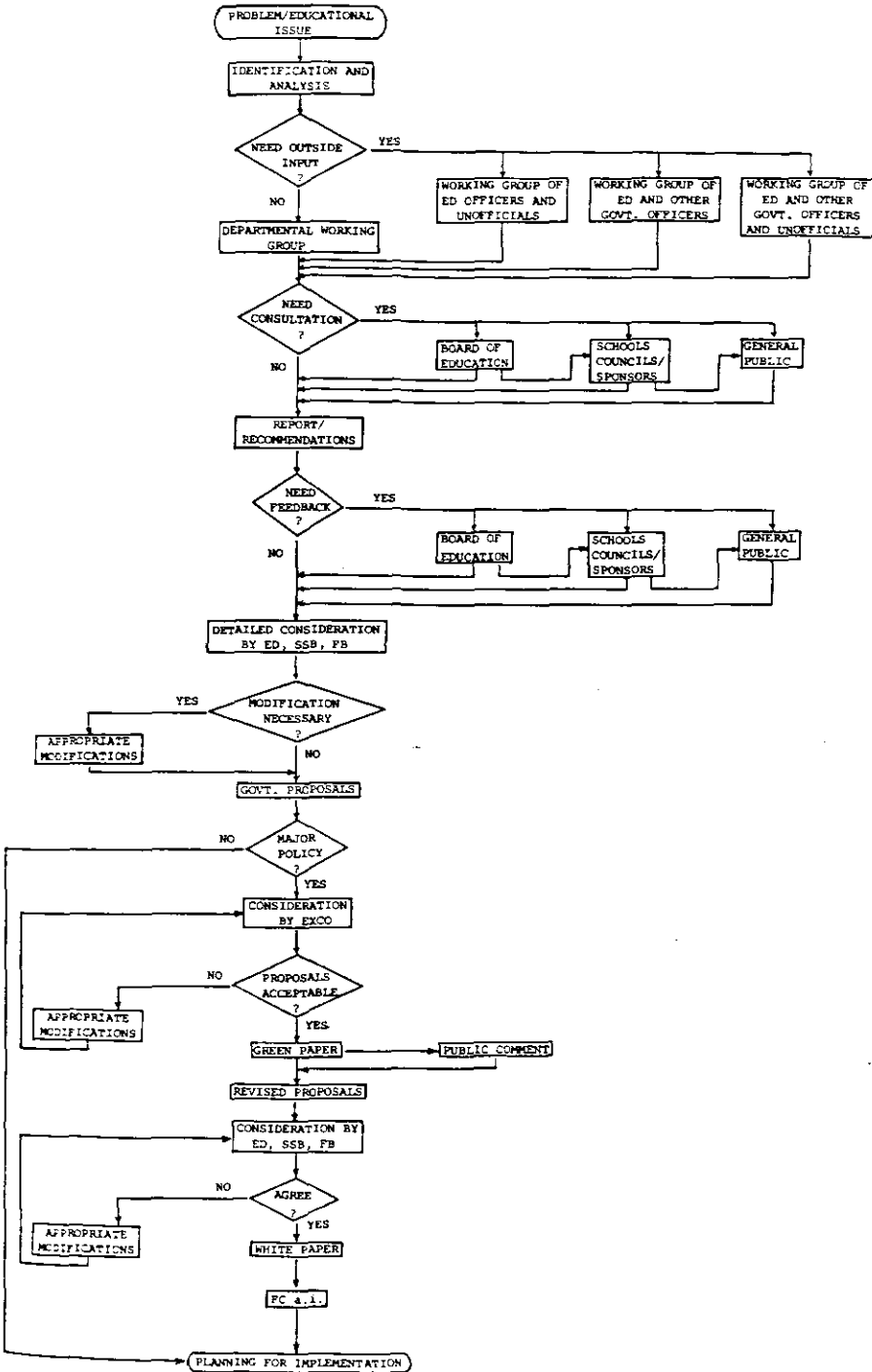
EDUCATION DEPARTMENT - Planning Process



Source: The Hong Kong Education System, p.217

Figure IX

Formulation of Policy in Education



Structure. There are four main types of secondary schools in Hong Kong which include Anglo-Chinese secondary schools, Chinese middle schools, secondary technical schools, and prevocational schools. Various other classifications are made according to criteria such as medium of instruction, method of financing, length of program, and examination results.

The Anglo-Chinese secondary schools offer a five year secondary course in a broad range of academic and cultural subjects leading to the Hong Kong Certificate of Education Examination (HKCEE) with the medium of instruction primarily in English. Students with suitable results in the HKCEE may enter a two year sixth-form course leading to the Hong Kong Advanced Level Examination for admission to the University of Hong Kong, which provides three year initial degree courses. Many of these students also sit for the United Kingdom General Certificate of Education Examination at both ordinary and advanced levels. In 1984, there were 323 Anglo-Chinese grammar day schools with an enrollment totalling 375,673 students.

Students of the Chinese middle schools also take a five year course leading to the HKCEE. Instruction is mainly in Chinese with English taught as a second language. A number of Chinese middle schools also offer a one year Middle 6 course leading to the Hong Kong Higher Level Examination for admission to the Chinese University of Hong

Kong, which provides four year initial degree courses. However, the Chinese middle schools are declining steadily in popularity. There were seventy-two Chinese middle schools with 40,742 students in 1982, but in 1984, the number dropped to fifty-four schools with an enrollment of 36,841 students, a reflection of the market value of English both for employment and for higher education.

Secondary technical schools prepare their students for the HKCEE but emphasis is placed on technical and commercial subjects. Suitable qualified candidates can continue their studies in Form VI at the technical institute, the Hong Kong Polytechnic, or the Technical Teachers' College. There are a total of twenty-one technical secondary schools with an enrollment of 21,571.

Prevocational schools are government-aided secondary schools offering three years of junior secondary education. The schools provide students with a general education and a wide range of technical skills upon which future vocational training may be based. The program is so designed that, after completion of Form III, a high proportion of prevocational students will enter approved craft apprenticeship programs with associated part-time day-release courses at technical institutes where credit units are earned. This form of technical training is welcomed most by the industries. The curriculum content of prevocational schools is made up of about 50 percent

technical subjects and 50 percent general education for Forms I to III. The technical content is then reduced to about 30 percent in Forms IV and V. Presently, there are twelve prevocational schools with places for 10,039. Furthermore, eleven more schools of this type are in the school building program to be completed in the next two or three years⁴ (See Tables V-VI and Figures X-XI).

⁴Hong Kong 1985, pp. 123-124.

Table V

Enrollments in Secondary Schools

Year (as at September)	Government	Aided	Private	Total
1965	13 484	34 381	117 777	165 642
1970	15 003	54 845	165 558	235 406
1975	19 073	88 910	251 213	359 196
1976	21 051	97 265	374 492	392 808
1977	23 875	108 234	288 526	420 635
1978	26 376	162 890	272 944	462 210
1979	26 999	170 954	265 845	463 798
1980	28 126	175 535	265 514	468 975
1981	27 266	169 653	226 492	433 411
1982	29 255	245 968	150 292	425 515
1983	34 649	249 695	136 323	420 667

Source: Structure of the Education Department, Information and Public Relations Section, 1984.

Table VI

Enrollment in Secondary Day Schools: By Grade & Type of Schools - 1984

I. General Education - Grammar, Technical/Prevocational

		F/M 1	F/M 2	F/M 3	F/M 4	F/M 5	Total
English	Aided	579	547	472	449	394	2441
	Private	107	99	119	103	98	526
	Sub-total	686	646	591	552	492	2967
Anglo-Chinese	Government	6349	6003	4782	5461	5486	28081
	Aided	49402	46661	39382	40993	39660	216098
	Private *	22321	21947	22839	20151	30456	117714
	(Bought Places)	(22049)	(21701)	(21752)	(2168)	(2094)	(69764)
Sub-total	78072	74611	67003	66605	75602	361893	
Chinese	Government	426	421	384	423	400	2054
	Aided	7175	6802	6294	4129	3986	28386
	Private *	1988	1935	2050	2209	2907	11089
	(Bought Places)	(1102)	(1024)	(957)	(420)	(424)	(3927)
Sub-total	9589	9158	8728	6761	7293	41529	
All Schools	Government	6775	6424	5166	5884	5886	30135
	Aided	57156	54010	46148	45571	44040	246925
	Private *	24416	23981	25008	22463	33461	129329
	(Bought Places)	(23151)	(22725)	(22709)	(2588)	(2518)	(73691)
Total	88347	84415	76322	73918	83387	406389	
II. Enrollment in Private Commercial Classes:							1730
III. Enrollment in All Secondary Day Schools:							408119

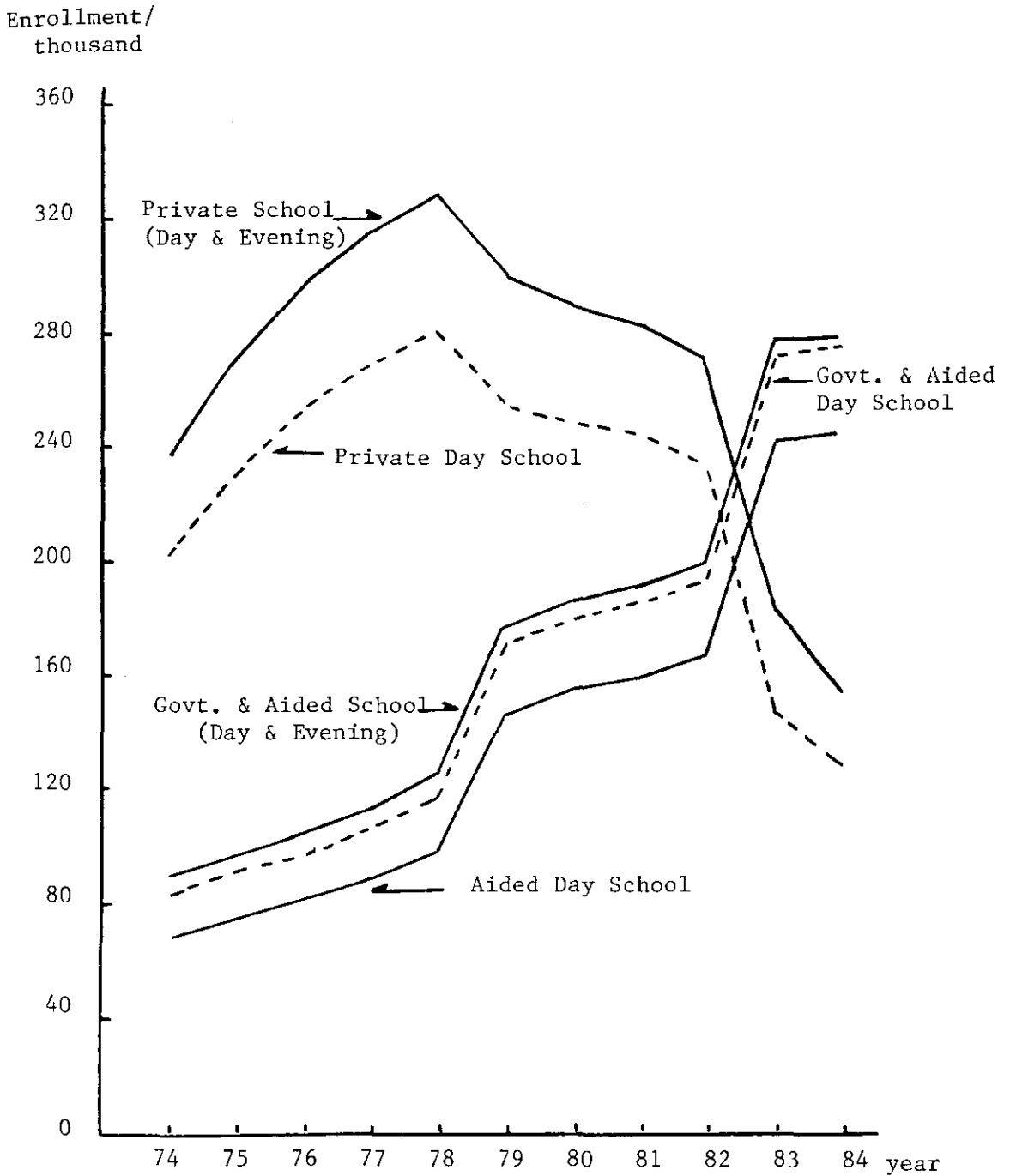
* Including Bought Places

Source: Half-Yearly Statistical Summary for March 1984,
Education Department, Hong Kong

Figure X

Enrollment in Secondary Schools (excluding Matriculation Course)

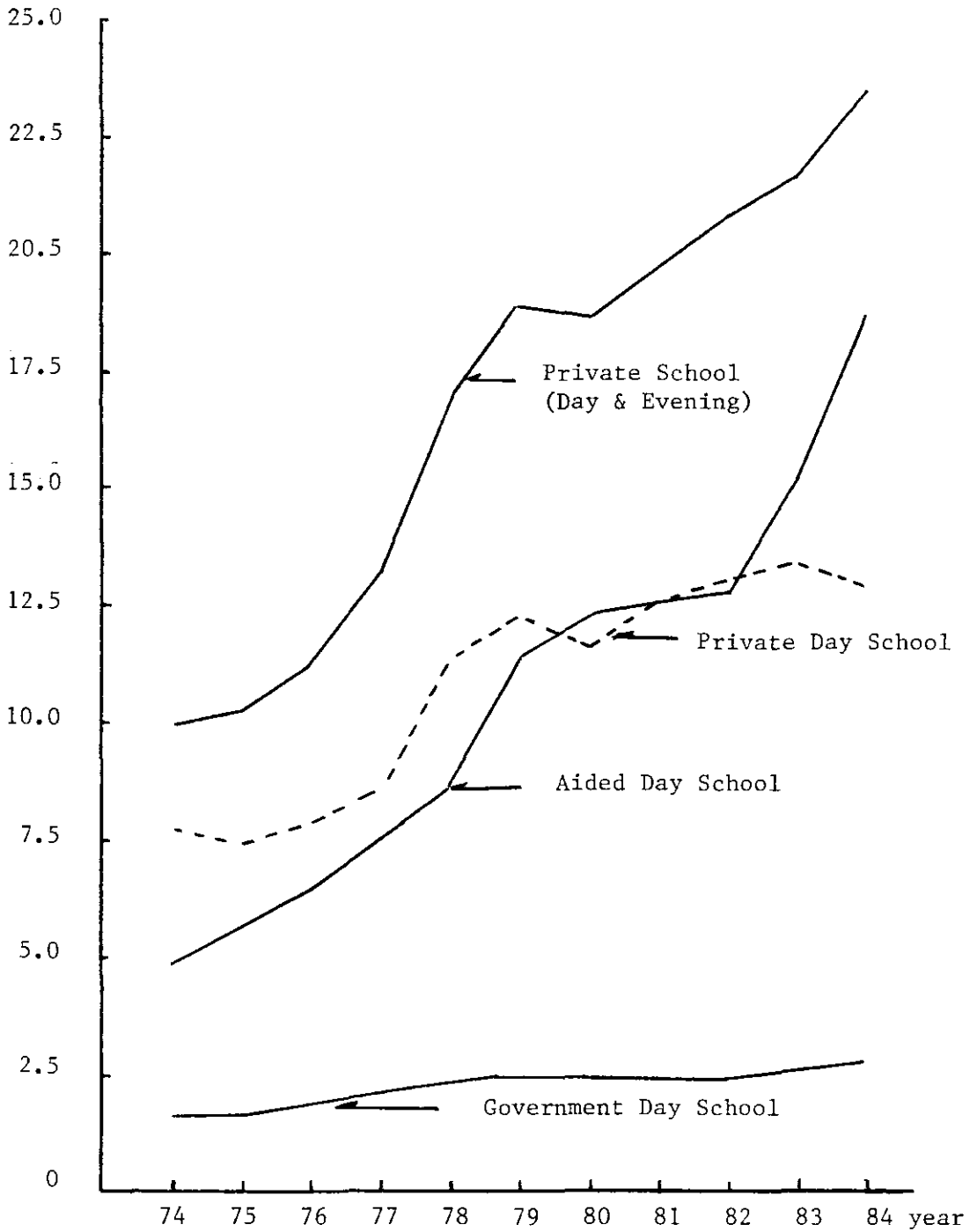
1974-1984



Source: Ibid.

Enrollment in Matriculation Course 1974 - 1984

Enrollment/thousand



Source: Ibid.

Allocation. It cannot be denied that some secondary schools are more popular than others. In order to be fair to everyone and to eliminate the pressures imposed on young children by the intense competition, the system of allocation is designed so that every child leaving primary school has an equal chance to enter popular schools. At the end of six years of primary education, students entering secondary education are allocated to government, government-aided and private secondary schools with "bought" places for the first three years of secondary education. The allocation system consists of four main features:

1. Internal Assessments. The internal assessment is the most important part of the allocation system. Scores on subjects except physical education and religious knowledge are collected at the end of Primary 5, at the end of the first term, and again toward the end of the second term of Primary 6. These scores are then normalized and standardized to decide in an order of merit by schools, which is used for allocating a student's junior secondary school place at the end of Primary 6.
2. The Academic Aptitude Test. Because different schools may have a different curriculum and the standard of marking or assessment may vary from school to school, all Primary 6 students

- participating in the allocation system have to sit for the Academic Aptitude Test (AAT) on verbal and numerical reasoning. The internal assessments in order of merit are based on the results of the test .
3. Regionalization. The educational territory is divided into a number of "school nets," based on the physical location of primary schools and not on students' home addresses. The rationale is that students who have gone to primary schools in a certain "school net" should not have difficulty attending secondary schools in the same "net." However, because of the uneven distribution of secondary schools, some of them have to serve more than one "net."
 4. Allocation by Band by Net. Another aim of the allocation system is to mix ability intake of secondary schools. The converted scores of all students in a "net" are placed into an order of merit. This order of merit is then divided into five bands based on parental preference. Students in band one are allocated junior secondary school places first, according to their parents' choices. When all band one students have been allocated, allocation of band two students will begin. The procedure will continue

until students of all five bands are allocated. Places allocated to a particular "net" are exclusively reserved for that "net."⁵

Role and Power of Examinations. Examinations are a form of evaluation, motivation and assessment of the individual as well as of the system. They are used to determine whether a student meets the minimum requirements to enter a particular new stage in his/her educational career and to establish a ranking order among students as a basis for allocating a small number of places among a large number of applicants possessing the minimum qualifications required. These three functions of examinations apply world-wide. But in Hong Kong the frequency, nature and crucial importance of examinations for educational and career chances are a major concern of students, teachers, parents and policy makers alike. For every 1,000 students who entered primary 1 in 1969, about 480 were admitted to Form III in 1976; 120 entered Form VI in 1979 and only 55 survived to Form VII in 1980. These figures are very low compared to those of the countries with which Hong Kong identifies socially and economically.

In the course of a student's school career, he/she may go through as many as eight sets of examinations other than

⁵Secondary School Places Allocation, (Hong Kong: Education Department, Sept. 1984)

the usual classroom assessments. These examinations are all significant in the opening or closing of options for the student not only in education but ultimately in life. In many cases children are interviewed and assessed before entering the kindergarten of their parents' choice; formal testing before being accepted to a preferred primary school is the norm. Toward the end of primary school, the internal assessment and academic aptitude testing of allocation determine in which secondary schools a student will be placed. The admission to Form VI or other advanced technical education alternatives depends solely on the result of the Hong Kong Certificate of Education Examination in which a student participates. Then in Form VI a student who wishes for a place at the Chinese University of Hong Kong sits for the Hong Kong Higher Level Examination. Finally, in Form VII there is the Hong Kong Advanced Level Examination whose main function is to establish entry qualifications to Hong Kong University. In addition many students also take the English General College Examination at the "O" and "A" levels.

The very frequency of examinations is in itself disconcerting. The examinations are structured in such a way that essentially they dominate the style and content of learning, particularly at the senior secondary level. Promotion from one level to the next is judged by classroom and public examination results. The overall performance of

the students during the school year has little effect on the grading system. Based on the allocation system, a large portion of the students in junior secondary education are provided for through "bought" places in private schools. These schools, gauging by the basic quality-criteria such as teacher qualifications and the scale and standard of physical facilities, are below that of the government and aided schools. Children who are not in the top "bands" are likely to wind up in "bought places" at private independent schools that are low on their parents' list of preferences. The full scope of the issue on how crucial examination results are in determining a student's future options can be illustrated as follows: A student's chance to be admitted to Hong Kong University strictly depends on his/her performance in the Hong Kong Advanced Level Examinations as against the performance of his/her competitors. Yet, their chances to perform well or even to have advanced to Form VII depends very much on the secondary schools they attended. Furthermore, the chances of having gone into schools that promise likely success are largely determined by how well they do in relation to their peers at the end of primary school. Even then, the opportunity to perform well will have varied markedly not only according to individual ability but also according to which primary schools they attend.

The power of the examinations can be demonstrated

further. Preparation for university examinations dominates post Form III education and has two major areas of impact. First, there is a premature streaming of students into "arts" versus "sciences" specialization. Students must choose one or the other in senior secondary schools because of Hong Kong University following the "A" level examination, which requires high scores in only three subjects. Little attention is paid to students English competency in a science major. Art students are cut off from taking too many science courses even though their ability in this area is quite high by Western standards. Secondly, because only a very small proportion of students are admitted to colleges or universities, the vast majority receive less than the full value of their education. Furthermore, it is virtually impossible to broaden the Form VI-VII curriculum to include subjects that are not to be covered for the examinations.⁶

According to one of the school principals interviewed, out of the six classes at Form IV in her school, only two classes are science majors and sometimes there is only one. Even though more students prefer to choose science as a major, due to the lack of facilities and shortage of science teachers, the students are not given the choice if they are not among the top 20 percent. One teacher commented that at age fifteen, most often a child is too young to know what

⁶A Perspective on Education in Hong Kong : Report by a Visiting Panel, pp. 31-37.

profession he/she wants to pursue. Because of parental and societal influence on the projected job market, the student may have chosen a major against his/her own interest. A wrong decision made at an early age will result in closing future options. The possibility of changing majors in the middle of the program is very small primarily because of the way the curriculum is arranged but also because the subject matter required by the "O" and "A" level examinations is fixed. Furthermore, because of the current course patterns, there is too much waste of effort and misdirection of talent. Under these circumstances students often feel trapped. Though there are no accurate statistics on the suicide rate among high school students, it does occur and is estimated that the rate is higher among high school students than college students. Some of the reasons for a high suicide rate may be the tremendous pressure of examinations, the undesirable results, and the failure to meet parental expectations. In summary, the importance of examinations cannot be underestimated nor can their impact on the educational system as a whole.

Curriculum and Instructional Methods. Among the four types of schools at the secondary level, the differences between public-sector grammar and technical schools have never been very great and are becoming less marked at the junior secondary level. In keeping with the objectives of

the education department, all children at the junior secondary level follow a broadly similar course comprising within flexible limits a balanced blend of academic, practical and cultural subjects. Many grammar schools are now including practical subjects such as art, design and home economics in their curricula wherever time and space permit. The senior secondary curriculum varies from school to school according to the needs and interests of pupils, the facilities available, and the regulations of the HKCEE. The education department issues a chart each year to assist secondary forms. The curriculum development committee is responsible for the development of the teaching syllabus in the form of guidelines consisting of objectives, pedagogical method and resources. All schools build their curricula along these guidelines. However, at the senior secondary level, the Hong Kong examination authority also publishes a syllabus consisting of a list of subject matter to be covered for the higher and advanced level examinations. The mere existence of the "teaching syllabus" and "exam syllabus" made the planning of individual curriculum difficult. In order to meet the objectives and requirements of both bodies, the syllabi to be covered became extremely long. As one teacher stated, "the syllabus is so long in order to prepare the students for the examinations, there is no time for creative teaching or learning." The approach is somewhat "force-fed," suggesting that more is better.

During "non-examination" years at the junior secondary level, the atmosphere seems fairly relaxed. However, among the examination preparatory forms, all is serious and students are seen taking notes, laboriously completing model answers and learning texts by rote. In other words, regardless of the aim of the education department or the efforts of the curriculum development committee, what students learn essentially evolves from the examinations.⁷ Students have little time for critical or analytical thinking. The ever-present pressures to do well at the examinations, force the lessons to be teacher-centered, and teaching aides consist of little more than chalk and a blackboard. Generally, a classroom holds about forty to forty-five students, who fill the entire room. Some of the rooms are so congested and the noise level so high that teachers resort to using microphones when delivering lessons. Because the students are desperate to obtain their qualifications and teachers are judged professionally in terms of their students results, discovery methods, team teaching and individualized instruction have little appeal to parents, students or teachers. The end result of such conditions is predictable: teacher-dominated instruction, rote learning, passive students, low creativity, limited reasoning and thinking ability, and strict discipline are common within the school setting. The following tables

⁷Ibid. pp. 51-58.

present the standard subjects with the appropriate time allocation, based on a forty-two-period week recommended by the education department (Tables VII-VIII and Figure XII-XIV).

Table VII

Junior Secondary School Curriculum

	Basic Model	Variation 1	For Secondary Technical Schools	
			Variation 2	Variation 3
Languages	13	14	13	12
Mathematics	5	5	5	5
Science	4	4	5	4
Social Studies	6	5	5	5
Chinese history	2	2	2	2
Practical (electives)	6	6	7	8
Physical education	2	2	2	2
Music	2	2	2	2
Ethical or Religious education or Careers guidance	2	2	2	2
Total	42	42	42	42

Source: The Hong Kong Education System, Hong Kong Government, 1981, p.254

TABLE VIII
Senior Secondary School Curriculum

Subject	Grammar		Technical	
	Form/ Middle IV	Form/ Middle V	Form/ Middle IV	Form/ Middle V
Chinese language	6 - 7	6 - 7	6 - 7	6 - 7
Chinese literature	3 - 4	3 - 4	3 - 4	3 - 4
English (Anglo-Chinese sch)	7 - 8	7 - 8	7 - 8	7 - 8
Language (Chinese Middle sch)	7 - 9	7 - 9	7 - 9	7 - 9
English literature *	2 - 3	2 - 3	-	-
Maths Mathematics	6	6	6	6
Additional Maths	3	3	3	3
Biology	4	4	4	4
Chemistry	4	4	4	4
Physics	4	4	4	4
Geography	4	4	4	4
Chinese history	3	3	3	3
History	4	4	4	4
E.P.A.	3 - 5	3 - 5	3 - 5	3 - 5
Economics	3 - 5	3 - 5	3 - 5	3 - 5
Art and Design	4	4	4	4
Design and Technology	6	6	10	10
Commercial subjects	11	11	11	11
Home economics	4	4	8	8
Music Exam. subject	4 - 5	4 - 5	4 - 5	4 - 5
Non-exam subject	1 - 2	1 - 2	1 - 2	1 - 2
Physical education	2	2	2	2
Ethical Religious education Exam subject	2 - 4	2 - 4	2 - 4	2 - 4
Non-exam subject	1 - 2	1 - 2	1 - 2	1 - 2

* English literature normally taught only to pupils with very high standard in English
Source: Ibid., p.256

Figure XIII

The Range of Subjects Currently Available
in the HKCE Examination

Subjects taken in Chinese only:

Chinese language	Chinese history
Chinese literature	Buddhist studies

Subjects taken in English only:

English language	French
English literature	Shorthand
	Typing

Subjects that may be taken either in Chinese or English:

Additional mathematics	History
Art	Home economics
Biblical knowledge	Mathematics
Biology	Metalwork
Chemistry	Music
Commerce	Needlework/Dress
Design and technology	Physics
Dressmaking	Pottery
Economic and public affairs	Practical electricity
Economics	Principles of accounts
Electronics and electricity	Technical drawing
Geography	Woodwork

Source: The Hong Kong Education System pp. 256-257.

Table XIV

The Range of Subjects Currently Available in
the Hong Kong Higher Level and
the Hong Kong Advanced Level Examinations

Higher Level

Biology
Chemistry
Chinese history
Chinese language, literature
Economics

Economics & public affairs
English language

Fine arts
General mathematics
Geography
Higher mathematics
History
Music
Physics
Religious studies

(All subjects in the Higher
Level examination are
taken either in Chinese
or in English)

Chinese language and literature may be taken in
Chinese only.

English language may be taken in English only.

Advanced Level

Applied mathematics
Biology
Chemistry
Chinese history
Chinese language,
literature
Economics
Economics & public
affairs
English literature
Geography
History
Other approved language
Physics
Principles of accounts
Psychology
Pure mathematics

All subjects in the
Advanced level
examination may be taken
in English)

Language. The two languages used in the mainstream of the school system are Chinese and English. Virtually all kindergarten classes use Chinese as the language of instruction. In the primary sector Chinese is used in the majority of the schools, and English is spoken as a second language. At the secondary level the two categories of schools, Anglo-Chinese and Chinese middle schools, were originally clearly differentiated by language medium as well as by course structure. The Anglo-Chinese schools used English as the language of instruction and the Chinese middle schools spoke Chinese. However, this distinction has become eroded with the expansion of secondary education. Teachers in most Anglo-Chinese schools now find it necessary to speak and write Chinese in varying degrees to supplement their teaching in the medium of English, particularly with the less able students and with lower grade levels. For some years, all newly established secondary schools have adopted English as their primary language of instruction, despite the learning difficulties experienced by some students when faced with the abrupt change from vernacular primary education to English-medium secondary education. The proportion of secondary students studying solely through the medium of Chinese has declined considerably since 1945 and is now approximately only 13 percent.

The language-teaching issue has received considerable attention. This has happened because of widespread concern

with the alleged downward spiral in language competence among Hong Kong students. The two principal issues in relation to languages in the Hong Kong education system include the quality of language teaching in all schools, and the use of English in Anglo-Chinese secondary schools. This has resulted in a dilemma for teachers and pupils alike.

Each language has its own images, proverbs, humor, and different thought-structures expressing various facets of civilization, and all reflect the soul and culture of a people. Thus, language has cultural and economic ramifications creating a demand for teachers with language competence which is rarely found in mass education systems. Because most of the teachers are raised and educated in Hong Kong, their knowledge of Western culture is often limited. They lack the personal experience needed to appreciate the full impact that language has on the culture. Although there are a number of agencies available for teachers to improve their grasp of the language, most of them are by no means fluent. Consequently, their teaching efficiency is handicapped regardless of their serious attempts to master the language. Proficient English-speaking teachers are in very short supply and the turnover among them is high. As more senior secondary places become available, this shortage will most likely increase.

As for the students within the school compound, many of those speaking Chinese find it almost impossible to

master English at the level of proficiency required for intricate thinking. Students spend a considerable portion of their junior secondary schooling mastering the basics of writing and speaking of the English language. They have to work harder and longer, and the time required for language instruction takes precedence over other curriculum areas. There is simply not enough time in the school day or year to cope with the language requirements or to cover the core subjects in as much depth as is done in other nations, such as the United States. Under these conditions emphasis is most often placed upon rote learning. When teaching subjects with a high language dependency, such as the discipline of history, the lessons tend to become instead exercises in English language instruction.

To further intensify the problem, the majority of students speak Cantonese but must write standard Chinese. All forms of Chinese use the same script with differences of style, grammar and lexicon. Cantonese, for example, has a number of characters which are unique to itself and a number of words which do not have corresponding characters. What is accepted as "proper" written Chinese is not acceptable when written in Cantonese. In 1982, the Institute of Language in Education was established to help modify this discrepancy and to raise the professional standards of the teaching of Chinese and English in the schools.

Teachers and Teacher Education. In March of 1980, the total number of teachers in the kindergarten, primary, secondary and post-secondary sectors was 39,507. Females account for 65 percent of the teaching force and are almost exclusively in the kindergarten and primary sector. Male teachers are slightly in the majority in the secondary sector and predominant in the post-secondary sector. The primary sector is staffed almost exclusively by non-graduate teachers, and the secondary sector has a small majority of university graduates. Only 26.5 percent of the total teaching force are university graduates.

The education ordinance requires that any person who teaches in a school has to be a registered teacher or a permitted teacher. Those who are qualified to become registered teachers include graduates with a university degree followed by three years of teaching experience and non-graduates with successful completion of a recognized course in teacher-training. Graduates holding the Hong Kong Certificate of Education, individuals with ten years of approved teaching experience and/or college graduates entering teaching without previous teaching experience are all classified as permitted teachers. Registered teachers are free to apply for teaching posts in any school registered under the ordinance and can move from one registered school to another. A permitted teacher is hired only when no suitable registered teacher is available for

employment. Government schools are exempt from the ordinance, as are teachers from registration. In general, the minimum qualifications required for employment would qualify them for registration if they were employed in the non-government sector.

The role of the teacher is of great importance in Hong Kong more than in the United States. This is because the provision of facilities such as libraries and laboratories is somewhat limited, causing Hong Kong students to be more directly dependent upon their teachers. Thus, the influence of the teachers on their students is particularly strong. In order to serve in such a responsible role teachers must possess a very solid and comprehensive teacher education.

Training courses for teachers are provided at the graduate level by the two universities. Non-graduate teachers are trained in the three colleges of education and in the Hong Kong Technical Teachers College. Beginning in 1978, a three-year standard initial training course and a two-year course for entrants with specified advanced level qualifications were established. Inservice as well as regular courses of refresher training were introduced for teachers who had already completed a course of basic training but who needed to update their knowledge and understanding of modern teaching methods. The three general colleges of education also provide initial training of two-year part-time in-service courses to eligible permitted

teachers, two-year full-time courses to students with only appropriate advanced-level qualifications, and three-year full-time courses for students with specified qualifications below this level. All courses are taught in either English or Chinese and are structured to cover a broad spectrum of activities and to provide students with a deep knowledge and understanding of the subjects studied. In addition to the part-time and full-time initial training courses, the colleges of education also offer the advanced course in teacher education, a one-year full-time specialist course. This course is intended to enhance and update a student's general competence as a teacher.

Many questions are raised regarding such issues as whether teachers have an adequate voice in curriculum development, in the management of the schools and in sufficient opportunities to influence the managerial practices of the school system as a whole. Also of concern is whether or not teachers are generally given enough freedom within the schools to pursue their own teaching styles and/or to explore various learning opportunities which might help them to make the best use of their individual talents and creativity. Responses from teachers indicate frustration on their part. Many teachers, who have successfully absorbed the creative teaching technique on which their training is based and have shown considerable potential for further development, are often unable to

resist a pervasive pressure which exists in some schools to teach in a mechanical, unimaginative style. Furthermore, newly qualified teachers are rarely given the support they need from senior staff members. Rather, they are expected to conform to the norms of the school and to adjust their attitudes to fit the work environment, however much at variance they may be from the technique and attitudes absorbed throughout their training. Even though a change of attitude has developed slowly as new ideas are introduced into the system, such as the activity approach, teaching styles remain uncreative, and many schools are unreceptive. To further complicate the problem, the government operates only a very small portion of the schools. Because the great majority of both primary and secondary schools are private, there is no one system of educational innovation which ensures the initiation of alternatives. Rather, most new ideas are disseminated to the schools in stages or not at all among some of the private schools.

Described above is a situation inevitable for a number of reasons: namely, large classes, long syllabi, pressure from examinations, poor teacher/student ratios, inferior resource materials, and a conservative school system. Furthermore, there is a lack of effective professional management within the schools. Little attention is paid on the part of the schools to the development of a curriculum or to the role of senior

teachers, which in many cases is limited to managerial details. The pressure on teachers to conform is particularly strong in the private sector where economic considerations sometimes override conflicting educational principles. In Table IX the number of teachers and their respective qualifications is examined.

Table IX

Number of Teachers in day schools and colleges classified
by qualification as at March 1980

M = Male

F = Female

* Private non-profit schools receiving
per caput grant, and assisted schools

Types of Teacher	Secondary Schools												Grand Total	
	Govt.		Grant		Subsidized		Private* NPM		Private Independent		Total			
	M	F	M	F	M	F	M	F	M	F	M	F		
University graduates or equivalent														
Trained	325	215	136	224	975	698	202	146	248	153	1886	1436	2118	1715
Untrained	44	33	157	158	922	766	547	396	1388	776	3058	2131	3428	2518
Non-graduates graduates														
Trained	305	312	105	217	890	1128	324	648	128	254	1752	2559	6072	14105
Untrained	1	-	-	4	141	58	221	214	822	1008	1185	1284	1487	7099
Total	675	560	398	603	2928	2650	1294	1406	2586	2191	7881	7410	13105	25437

Source: Hong Kong Education System, p.220

Learning Environment. Learning conditions for children and working conditions for staff both at school and at home are hardly satisfactory. Most of the schools are spartan with classes of forty to forty-five students filling the entire room. Classrooms are sometimes noisy and distracting, yet, discipline and obedience are expected from all students. Textbooks are dull and learning resources limited, and homework sometimes requiring four to five hours per day is assigned. The rationale given for assigning large amounts of homework, other than to fulfill the demands of the ever present examinations, is to keep the students busy in an attempt to control delinquency. Laboratory equipment and sports facilities are often inadequate, especially in the private sector. The value of resource centers and libraries, both self-learning aides, is not widely appreciated by either the teachers or the students. On the contrary there appears to be a lack of understanding among both groups regarding the potential and significant importance of these two mediums.

Most of the people of Hong Kong live in high-rise buildings with restricted living space. It is common for a middle class family consisting of eight persons spread over three generations to live within a floor area of only 400 square feet. Students do their homework in the midst of all distractions, including radio and television. Because space in which students can study is so limited, publicly funded

study rooms have been designated in selected areas. However, these rooms are not sufficient, and where they are available, teachers and students complain because the operating hours are not long enough nor are rooms conveniently located for the great majority of students.⁸ students often study past midnight when the other members of their families are asleep. They may even resort to doing their work sitting on stairways or under street lamps. Despite the poor learning environment for many students, both in the schools and at home, they strive hard toward an education. Not only do the traditional Chinese people revere education, but the students of Hong Kong also perceive it as a way to ensure social mobility, power, and prestige.

Student Guidance. In the past the department of education believed that the regular teachers in the classroom were able by the nature of their work and their close relationship with the students to provide informal guidance on a wide range of matters. The value of this guidance and the need to maximize the opportunities for its development were stressed in teacher education. A counseling service for students was provided by professional social workers in both primary and secondary schools. In 1978, the student guidance section was formally set up in

⁸A Perspective on Education In Hong Kong p.51

the education department to provide school children with educational, vocational, and personal guidance as part of an overall objective to reduce or prevent anti-social or delinquent behavior.

In secondary schools counseling services are becoming available through the help of professional social workers. Presently the ratio is one social worker to approximately every 4,000 students or four schools. The objectives of the guidance section are to help students whose academic, social and emotional development is in jeopardy, to assist children to make the maximum use of their educational opportunity, to help students develop their potential, and to prepare them for responsible adult living. At present there is an acute shortage of social workers available to do this work. Therefore, all secondary schools are encouraged to provide career guidance for their students by nominating a member of the staff as career master/mistress and ensuring that he/she has sufficient time and resources to carry out the task at hand. The Hong Kong Association of Career Masters assists in the coordination of career guidance programs, and the career education center provides information to students, parents and the general public.⁹

In spite of the intentions of the guidance service to provide career counseling, one of the principals commented:

⁹Career Education Hong Kong Government Publisher, 1984

"Unfortunately in Hong Kong, students don't follow a vocation. They follow what comes their way. The students have not the spirit or motivation to pursue their interests. If they are accepted into the college of education, they go there. If they are accepted into nursing, they will take up nursing. They accept whatever is available because they cannot afford to wait. There is simply not much choice. Places are the critical problem for higher education and not finance. Very often even if the students have the money and the ability, they cannot get into any of the colleges or universities. If the families can afford it, they would send their children abroad for further study."

When the choice of careers for the Hong Kong secondary school student is so limited, it appears that career counseling may be somewhat limited in what it can provide for the student's future.

The section of the department of education which assists students who want to study overseas, provides them with information and advice on educational establishments in English-speaking countries, including Britain, Australia, Canada and the United States. At present, the number of students studying in the United States is fewer than in years past. Instead, more students have decided to complete their education in Canada and Australia because of the lower tuition rates and because of employment policy in the United States, which states that foreign students are not permitted to work while in school (See Table X).

Table X

Students Leaving Hong Kong for Overseas Studies

<u>Country</u>	<u>1979-80</u>	<u>1980-81</u>	<u>1981-82</u>	<u>1982-83</u>	<u>1983-84</u>
Britain	4,255	4,134	4,276	5,547	5,394
United States	2,765	2,012	3,264	2,088	2,049
Canada	3,589	4,803	4,752	3,946	3,284
Australia	155	404	987	757	428

Source: Hong Kong 1985. Hong Kong Government Publishers, p.331

In summary, Chapter IV has dealt with the general climate, the present situation related to the demand and availability of secondary and higher education, the dilemma of the language issue, the curriculum design and instructional methods. All these factors will have much impact on Hong Kong students studying in the United States particularly in the field of nursing. Chapter V will discuss the implications of secondary education in Hong Kong toward nursing education in the United States.

Chapter V

THE IMPLICATIONS OF SECONDARY EDUCATION IN HONG KONG FOR NURSING EDUCATION IN THE UNITED STATES

Choice Of and Admission To Nursing Programs

In contrast to previous nursing practice when the majority of nurses worked within the hospitals, a career in nursing today offers limitless opportunities for those interested in providing health services for people of all ages in a variety of settings throughout the world. Unlike many other occupational groups, nursing offers a multiplicity of career choices, each of which has its own special educational requirements, opportunities, salary scale, and personal satisfactions. Nurses may be therapists who provide direct nursing care services to people in hospitals, nursing homes, and other extended-care facilities, as well as clinics, industry, schools, doctors' offices, and private homes. Nurses also serve in the army, navy, and air force and are employed by the federal government in such organizations as the United States Public Health Service, the World Health Organization, the Veterans Education Administration, the Red Cross, and other philanthropic foundations. Graduate education in nursing further offers a variety of other career opportunities in the fields of administration, education, supervision,

consultation and research.

When a prospective student does decide to enter the field of nursing, what criteria does he or she use to determine where to go or what program to choose? Perhaps it would be less confusing if nursing, as with many other professions such as medicine, dentistry and law, had one major avenue to educational preparation. However, the development of nursing as a profession in the United States has resulted in three major educational routes. All of these routes prepare graduates to complete the National Council Licensure Examination for registered nursing. This circumstance has offered various alternatives and opportunities to the prospective student. As explained in Chapter I, although the various programs produce comparable graduates, the programs are far from identical. The amount of time required to complete the various programs differs: two-years for the associate degree, three-years for the diploma program, and four-years for the baccalaureate degree. There are also differences in the philosophy of each program, course objectives, course curricula, and career paths.

Choosing a Nursing Program. Nursing education in the United States is not free, and student nurses often finance their own education or apply for scholarships. One of the major factors these students must consider is the type of

degree they will obtain and where to obtain the desired degree. As of 1984, there were approximately 1,447 colleges and universities in the United States, both privately and publicly funded, which offer 1,490 basic nursing programs. Before deciding between a baccalaureate degree and a non-baccalaureate degree, students need to clarify their career goals. If a student prefers patient contact and is content to function as a general duty nurse without much opportunity for professional advancement, he/she would choose the diploma program and would learn through the practical application of knowledge. However, the number of diploma schools is declining gradually and is also losing its popularity. In the academic year 1982-1983, seven diploma programs closed. It is predicted that by the end of the century diploma schools will be non-existent.

To an individual whose time and finances are critical, the associate degree may be more suitable. Not only is it a two-year program providing graduates with technical nursing competence, but is usually offered by community and junior colleges with a more manageable tuition. In the event of the ANA proposal, which states that by 1990 the minimum preparation for entry into professional nursing practice would be the baccalaureate degree, there is an increasing number of associate degree graduates returning to school for the degree-completion programs.

The baccalaureate degree programs are designed to

prepare a professional practitioner who will be capable of planning, providing, and evaluating nursing care for individuals, families, and communities. A baccalaureate degree is often required for a position beyond staff nurse, such as supervisory or management, community agencies in occupational health, school health, public health, and special population groups in the home and in health care facilities. These graduates also have the educational background necessary for graduate study. Due to the changing health care needs in this country and the advent of new programs such as Diagnosis Related Groups (DRG's) and cost containment measures, patients are leaving the hospitals "quicker and sicker." This fact increases the pressure on hospital nurses, creating more demand for community services and the expertise of baccalaureate degree nurses. Presently, many hospitals, especially within the major medical centers, hire only nurses with the baccalaureate degree. More young men and women are choosing the baccalaureate degree program rather than the other two programs. In 1984, the National League of Nursing identified 391 basic baccalaureate degree of nursing programs in the United States.

Once students have decided which nursing program they will pursue, the next step is to choose the school itself. Many issues are considered by the prospective student. These include the best nursing program in terms of quality,

philosophy, goals, curriculum, faculty qualifications, student/faculty ratio in the classroom and clinical area, available research skills, library resources, accessibility of clinical and support facilities, the size and characteristics of the student body, and the academic calendar plan.

The academic year in the United States nursing schools lasts from eight to ten months and is divided into a variety of terms such as semesters, trimesters, and/or quarters. Individual institutions list the calendar, plan and expenses according to their own schedules. A student must note whether or not charges are for an academic year, a term, or on a course-to-course basis.

Tuition fees and housing accommodations are affected by whether or not the institution is publicly or privately operated. Though tuition fees and accommodation expenses differ from college to college, generally, private institutions charge higher fees than public ones. In addition the location and size of the school may make a difference. The prospective student may prefer the atmosphere and the personal attention received in the smaller school in contrast to the larger school. In terms of location, the Chinese student from Hong Kong may be attracted to the quiet college town setting or may prefer the busy urban environment. Having lived in a tropical climate for most of their lives, Chinese students find the

thought of sub-zero weather and the possibility of immobilizing snow a great influence in the choice of a particular school. Another important aspect considered by the Chinese student is the accreditation of the baccalaureate program. There are two officially acknowledged accrediting bodies which evaluate current nursing programs. They are the boards of nursing operating at the state level and the National League of Nursing (NLN) operating nationwide. Each state's board of nursing regulates and sets certain standards for nursing programs. All nursing schools must be accredited by their state board in order to operate. The NLN establishes criteria for the quality of nursing education among the various programs in the United States. This accreditation means that the school has attained a nationally accepted level of quality in educating its students. It is a voluntary choice rather than a mandatory procedure, and the majority of reputable schools choose to participate in the accreditation process. Occasionally, schools of nursing are denied accreditation or reaccreditation, and some have accreditation pending. It is important for a student to be aware of the standing of the school he/she plans to attend because this fact alone may influence any future plans for graduate study. Initial consideration of the options available will assure the correct choice and reduce any possible doubts or regrets in the future (See Appendix D for a list of nursing programs

available).

Admission Requirements. Admission requirements in the United States vary from school to school and from program to program. Similar to all other programs offered by junior, community colleges, senior colleges and universities, the minimum entry requirements for all nursing programs (for Hong Kong students) generally include the completion of Lower Form-VI and a Test of English as a Foreign Language (TOEFL) score of at least 500. Nearly all the nursing programs, whether it be a diploma, associate or baccalaureate degree, require a composite score of 18 or above on the American College Test (ACT) and a score of 850 or above on the Scholastic Aptitude Test (SAT). All these tests are given in Hong Kong at regular intervals. In addition the applicant must have at least a grade point average of 2.5 out of a 4.0 scale (a "C" grade or better) and rank in the upper half (or top third) of the class. High school and/or college transcripts, a certificate of good physical and mental health, letters of recommendation and personal interviews are also required.

Other academically-oriented admission requirements for both the diploma and associate degree programs are very similar. Most schools require three to four years of English, two years of mathematics, and certain prerequisite courses, such as a full credit of chemistry, and/or anatomy

and physiology, or biology taken within four years before the beginning of the nursing program. Some schools also require the student to pass a mathematic competency examination as well as complete the National League for Nursing Pre-Entrance and Guidance Examination with a passing score of 40 or more. The examinations are designed to measure the applicant's scholastic abilities in areas essential for achievement in a nursing program.

In the baccalaureate programs nursing is an upper division major. Students have to fulfill one of the following criteria before they are accepted. These criteria include: completion of two years of supportive courses in liberal arts and science courses in a college or university before transferring to the upper division nursing major, completion of two or more years of study at an accredited university or college, fulfilling liberal arts and science requirements, and graduation from the diploma and/or associate degree program in nursing after fulfilling the liberal arts and science requirements.

After a gradual increase in annual enrollment in the nursing programs, from 1978 and on, there has been a drastic drop in enrollment in some private baccalaureate degree nursing programs and community colleges. The American Association of Colleges of Nursing (AACN) reported among a group of nearly three hundred AACN member schools, that full-time freshman enrollments fell 10.7 percent in the

academic year 1986-87 and 8.5 percent in the fall of 1985 in the BSN schools.¹ It was also noted that the academic credentials of students applying to nursing schools are apparently on the decline, according to both national testing experts and the deans and directors of the various schools. The downtrend documented in September of 1986 by College Board officials revealed the 1986 average SAT scores of students intending to enter nursing programs were under 786 points, while students considering nursing careers in 1977 had a composite SAT score of 824.

One of the contributing factors included the fact that nursing remains a female oriented profession at a time when more opportunities are open to women in the job market. The result is the fact that less women are attracted to nursing. Another factor is the decline in the number of high school graduates.

Studying in the United States

To move from one city to another within the same country requires a large adjustment, not only to the new environment, but also to the people and their customs. To relocate to a different country with an entirely new set of cultural practices in daily life, tradition, language, and

¹"BSN Enrollments are Falling at a Faster Rate; AACN Finds Biggest Losses in Generic Students," American Journal of Nursing April 1987, pp.529-542

customs is even more dramatic. Whether an individual has come to the United States as a student or has immigrated into the United States with his/her family, there remains a tremendous adjustment. The trauma of having to leave family, friends, and a life which is familiar and secure to come to an environment that is strange, lonely, and uncertain cannot be underestimated.

Many Chinese from Hong Kong look forward to a life studying abroad, regarding it as an opportunity for further education and adventure. They hope to learn more about other cultures, acquire new knowledge and skills, meet new people, and experience a new lifestyle. Yet, the challenges of a new location can be very stressful. Even after months of preparation, both psychologically and physically, newly arrived students from Hong Kong often find themselves engulfed in a host of unfamiliar mixed emotions. Their feelings and impressions include excitement at the start of a new adventure, fear of the unknown, sadness for what they have left behind, and loneliness for friendships they have yet to establish. The life of immigrants and foreign students is wrought with difficulties changing from an "old" to a "new" way of life. Consequently, socialization for foreign students in American schools and the process of "Americanization" become for some a "vast psychic

repression".² On the one hand they must reject their own family traditions and learn to embrace values of the dominant culture. On the other hand life is often very difficult and lonely. Therefore, being well-prepared for the inevitable in advance helps to reduce anxiety and relieve stress that accompanies a major change. However, in the way of research, little have been done on the adaptations and adjustments on Chinese students studying in the United States.

Characteristics of Students from Hong Kong. Hong Kong students are most often first generation Hong Kong residents, meaning that the majority of their parents came from the mainland approximately the same time the communist party took over. In many cases the parents of these students arrived in Hong Kong with little or nothing. Through self-sacrifice and hard work, they gave their children an education -- an opportunity many of them were denied. Although Chinese students from Hong Kong have been brought up in a British colony, they have retained many of their traditions and ways of life. One significant social behavior which has great influence on daily life is the matter of "face." "Face" is the perception of one's own

²Andrew Greeley, Why Can't They Be Like Us? America's White Ethnic Groups (New York: E.P. Dutton, 1975)

worth as perceived by significant others.³ "Face" can be gained, lost, saved, or threatened, and almost all Hong Kong Chinese are aware of its importance. Situational harmony, and avoidance of conflict and confrontation are the mechanisms used to preserve the concept of "face," which governs much of the behavior in interpersonal relationships. It often requires restraint, reservation, and non-assertiveness, especially toward those in power and authority. Individuals caught in questionable situations often choose to remain quiet or simply nod their head to indicate they do not want to cause any embarrassment. For example, within the school setting, if a teacher should ask a Chinese student the question, "Is this clear?" the student who has high respect for the teacher may answer "Yes," meaning, "I don't want to cause any embarrassment." In fact, the student does not wish to be impolite by answering "No, it is not clear," which would imply that the teacher is either confused or unable to communicate or both. It is a matter of saving the teacher's "face." Another example of this behavior on the part of an individual involves saying what he/she really thinks. He/she takes the risk of being wrong and causing embarrassment to oneself or others thus, losing "face." Because the Chinese are so sensitive about losing "face," this concept within the educational system

³Thomas, Murray; Postlethwaite, T. ed. School in East Asia New York: Pergamon Press, 1983, p. 272

affects the status and operational efficiency of the teachers, motivates disciplinary problems among students, and helps or hinders decision-making on educational policies. Another behavior used to preserve harmony is the avoidance of direct confrontation. A direct confrontation forces a showdown in which one individual or the other must lose face or self-esteem. One of the techniques practiced by the more traditional Chinese to avoid confrontation is the act of blaming themselves for mistakes, when in fact the mistake may be someone else's. The correct behavior, therefore, is for the other to deny the accusation. However, after having lived in the United States for a period of time, the Chinese soon learn to avoid using this technique because they discover that, indeed, they may have become scapegoats by virtue of their own admittance. Thus, to maintain situational harmony and have consideration for other people's feelings and to avoid conflict, students from Hong Kong are not encouraged to ask questions or to speak out in class. These students are often viewed as shy, reserved, tight-lipped, unimaginative or lacking creativity. Such behavior is very different from that of American students. As Huda pointed out, in the United States the dominant Anglo-Saxon society stresses independence and autonomy. These value orientations often produce cultural shock and acculturational difficulty for many Chinese students attending American universities because their

traditional way of good manners and willingness to acquiesce are seriously challenged.⁴

Another behavioral characteristic of students from Hong Kong relates to the manner in which a student may respond to praise or positive reinforcement. If the praise is directed toward the individual or toward a member of his/her family, the individual may respond by answering, "No, I did not do this very well," or "No, my family has not influenced me, it is you, teacher." Praise of self or of members of one's own family is considered in poor taste. The accepted behavior on the part of the one offering the praise is to ignore and deny the answer. Most often this behavior may be mistakenly interpreted as being passive, lacking self-esteem, or belittling one's own family members.

In relation to the expression of feelings some traditional Chinese feel it is not always helpful to directly express negative feelings. Such expressions not only are unproductive, but in fact, can damage relationships among individuals who must continue to interact with each other. Moreover, anger is seldom expressed. Respect for authority, inconspicuousness, obedience to parents, self-control, humility, praise of others, and self-blame are some of the behavioral characteristics common among the students from Hong Kong.

⁴Abu-Saad Huda, "Asian Nursing Students in the United States," Journal of Nursing Education 21, No. 7, (September 1982) p. 11

Furthermore, the wishes and needs of the family are tremendously important to the student. The Chinese student, similar to students in other European families, has been born and brought up within an extensive family network. His/her achievements and failures are shared by all of the family members. If a student performs poorly academically, he/she would feel shame and a sense of failure within the whole family. In turn the parents would blame themselves. The family encourages the individual to learn patterns of self-control and hardship. Most often, as a result, the students are highly motivated, often industrious, single-minded, and hard-working. They are more concerned with passing exams and achieving academically than evaluating information.

Academic Standing. One of the factors which has caused most concern among educators, students and parents alike is academic adjustment or how the Hong Kong student will fit into the United States school curriculum. According to observations such as the one from Newsweek on Campus and interview responses over the years, overall, students from Hong Kong perform very well academically. It may be due to the fact that the students are accustomed to a much more vigorous standard in the schools in Hong Kong and the high value placed in education. Within the field of nursing education, if students have a background including

four years of science courses taken in secondary school, they have little difficulty mastering the sciences required in the nursing program. However, it is not the same for those students majoring in arts. Although some schools do offer a limited number of science courses to art students, Hong Kong secondary schools are not required to offer any. When students apply to nursing schools, they must fulfill the prerequisites mandatory at individual colleges before acceptance into the nursing program.

Not only do many students find they lack the necessary science courses, but they also discover they may be weak in other areas. Based on the Hong Kong secondary school curriculum, English literature is commonly offered to students with high standards in English, therefore, most students are exposed to little or no English literature at all. Similarly, all students in Hong Kong except those from the English schools study Chinese history and world history with special emphasis on European history. Consequently, they have a very limited, basic knowledge of American history. The lack of exposure to English literature and American history and to some extent the social sciences, does handicap any achievements made in the area of liberal arts, which is considered to be essential in a well-rounded nursing curriculum. Therefore, students from Hong Kong generally have to work harder and longer on these subjects.

Differences within the School setting

One of the first impressions most startling to the newly-arrived students from Hong Kong is likely to be the concept of vastness and space. Driving distances are largely incomparable in the United States to those in Hong Kong. Regardless of the time of day in Hong Kong, rural or urban, the streets are almost always filled with people.

Space and vastness are also experienced by students in regards to the campus grounds. The acres of green lawn, flower beds, football fields, tennis courts, health centers, and recreation rooms are a rarity in Hong Kong. The unlimited learning resources on United States campuses are very welcome. No longer do the students have to study in crowded and noisy rooms or search for a place in which to study. To occupy a single room or even to share a room with another student in the dormitory is a luxury by Chinese standards. One of the things Chinese students feel comfortable with is the large student body within a classroom, while their counterpart, the United States high school graduates, might feel lost in such a large crowd. Listening through lectures via microphones and taking copious notes during a lecture are certainly not new or strange to the students from Hong Kong.

Once again, the vastness of America requires adjustment. Transportation may present a major problem, as

distance between one destination and another most often is not accessible by walking or public transportation. Owning an automobile is almost a necessity.

Communication Style. Both the Yao and Wong studies on Chinese students found that the English language is the one personal adjustment problem most frequently mentioned by the students.⁵ Generally, the emphasis on learning English at the secondary and university levels is placed on grammar and reading skills rather than on communication skills. Most students do possess good basic knowledge in the area of grammar and mechanically-learned vocabulary, and their reading knowledge of English is quite good. However, because of the lack of classroom participation, they often leave school with little practice or confidence in speaking the English language. Both of these aspects may be apparent among Hong Kong students within the United States school system.

It is of interest to note that Huda also found the language problems top the list of difficulties among Asian nursing students. She found the students had difficulties in expressing their knowledge to clinical instructors, in communicating with doctors, in communicating with patients

⁵Esther Lee Yao, Who Are the Chinese Americans, (ERIC Document Reproduction Service, ED154082, September 1978) p.16; Paul Wong, A Survey by Dr. Paul Wong of Chinese Immigrant Youths in San Francisco (ERIC Document Reproduction Service, ED110563, December 1970) p.18

and in applying theory to practice. The students felt that some of the faculty were not cognizant of the fact that English is not the Chinese students' first language. Many faculty tend to consciously or unconsciously compare Chinese students with American students based on the command of English. Often times Chinese nursing students did not do well on their oral examinations not necessarily because of insufficient knowledge but because of unsatisfactory verbal language performance. Some faculty members appeared impatient and intimidating while working with Chinese nursing students, the unspoken expectation being that Chinese students should be able to proceed at the same pace as other students, or they should not have come to the United States for further studies.⁶

Moreover, the physical speech habits established in childhood are not easily changed. Awareness and acceptance of the Chinese variety of spoken English by educators and fellow students is necessary. It is essential that educators recognize that pronunciation difficulties can be a major issue and may impede mutual comprehension. For example, the Chinese have difficulty in sounding the English letters L and N. Words such as low/no and lot/not are pronounced the same. The Chinese also have difficulty in deciphering the difference between the letters L and R , V

⁶Huda, "Asian Nursing Students in the United States," p.12

and W , sh and ch and th. "Row, row, row your boat" becomes "low, low, low your boat," "velly nice" instead of "very nice," and "with" sounds like "wits." The mispronunciation makes comprehension almost impossible at times. Furthermore, Cantonese dialect has no gender and tense differentiation. In terms of communication, this probably is the most difficult and confusing for both Chinese and Americans alike.⁷ Lack of language confidence and competence contribute to low self-esteem and internal locus of control.

At present, the University of Hong Kong is considering increasing entry-level criteria in English and Chinese language proficiency to provide incentive to students to give the study of languages more serious consideration. A proposal by the University Senate recommends that from 1989, advanced-level students seeking admission to the University must score grade D or above in English, instead of grade E, as it is now. The proposal is based upon about half of the university's first year students who have only a grade E use of the English language are in serious need of remedial English courses.

In addition to pronunciation difficulties, some British English expressions may also cause confusion to Chinese students in America in the same way they would to an English person living in the United States. Such

⁷Living in Hong Kong pp. 12-18

expressions are: "the person is moving into a flat, which is accessible by a lift at the back of the block." Translated into American English the sentence would read: "the person is moving into an apartment which is accessible by an elevator at the back of the building." "The post" means "mail," and "Cable" and "Wireless" is equivalent to the Western Union. Footpaths and pavements are sidewalks, lorries are trucks, dual carriageway is a two way street, and trolleys are carts. Garages repair cars, and one parks one's vehicle in a car park. The Royal Observatory is the Weather Bureau. Suspenders is the name for a ladies' garter belt, but the men hold their pants up with braces. Car hood is the bonnet and the trunk is the boot. The British expression of "knock me up", means one wants to be awakened in the morning or called upon in general. In addition Chinese idioms have also been added to the British English. For example, children get enjoyment from the playgrounds, thus, refer to them as pleasure grounds. Ingrained ways of expressing oneself such as these mentioned above take time and practice to change.

Climate of Learning. The way in which a student in Hong Kong must struggle all through schooling is quite different from the American educational system. In the United States the secondary school is open and available to all children of a neighborhood or attendance area of a

school district. Most of the secondary schools provide a comprehensive program of educational opportunities with a diverse curriculum from which students are able to choose any course that will fulfill their needs as well as elective courses to meet their interests. However, even in the United States secondary school system, access to the top academic track is limited. Nevertheless, in Hong Kong this fact was revealed by teachers and principals interviewed by the writer. They confirmed that after fulfilling the requirements established by the teaching syllabus and the exam syllabus, little room is left for electives.

In terms of higher education there exists much competition for admission to top ranking institutions in America. However, there are many other higher education facilities so that qualified students generally do not have to fight their way. As long as a student's academic standing is high or adequate, the colleges and universities may even recruit them. Even for those students who are less capable academically, it is still possible for them to gain access to some kind of college or university, especially a junior or community college. At present, out of every fifteen students wanting to attend the universities in Hong Kong, only one is accepted. Therefore, when a student from Hong Kong is able to gain admittance into an American university it is quite a compliment.

Moreover, Chinese traditions of respect for authority

and for academic learning contribute to the formal attitude of learning. The student from Hong Kong has been accustomed to a formal classroom atmosphere, textbook learning, memorizing details, and a teacher who is a remote figure of authority. This tradition makes it difficult for students and their parents to adapt to the much freer, less-pressured system they must accustom themselves to in the United States. The shy, tight-lipped, passive student from Hong Kong appears to have very different characteristics from those of many American students, among them the spirit of individualism, self-reliance, self-initiative, self-determination, and equality.

There are other customs which the newly-arrived student from Hong Kong finds strange. For example, the method used for grading students achievements differs between the two systems. The standard achieved in each subject on the Hong Kong Certificate of Education Examination is recorded as one of eight grades of which a grade of A is the highest and a grade of H the lowest. An average candidate must achieve a grade of E or above to pass the "A" level, and a grade of C or above to pass the "O" level of the General College Entrance examinations conducted by the British examination board.⁸ However, in the United

⁸Hong Kong Certificate of Education Examination: Regulations and Syllabuses-1986 (Hong Kong Examinations Authority, 1984), p.7; Hong Kong Advanced Level Examination: Regulations and Syllabuses-1986 (Hong Kong Examinations Authority, 1984), p.5.

states the grade point average is most often used. The way in which American schools separate the different levels by means of "freshman, sophomore, junior and senior" is unique and new to the students from Hong Kong also. Systems such as these do take time to understand and interpret.

Because students in Hong Kong are not in the habit of utilizing learning resources such as libraries and laboratories, they often fail to utilize the resources there. The complex system of retrieving information from the libraries may be very intimidating to someone who is not familiar with the system. Accurate information in advance of the differences can be helpful to reduce anxiety, frustration and bewilderment.

Life Outside of the Classroom

Different life styles or living habits are sources of conflicts. For example, Chinese celebrate a vacation by getting together, Americans celebrate by going away. Going out occasionally to have a drink in the evening for relaxation is common among females American college students. However, for most Chinese female students, this is unknown. Drinking, smoking, and going out late at night are seen as misbehavior for females in traditional Chinese societies where these standards are more typical of early twentieth century standards for American women.

When establishing friendships, the Chinese tend to be more guarded and slow. Many of the students interviewed, indicated that they had experienced difficulties in establishing close relationships with their American peers because of language barriers and cultural differences. They also demonstrated a reluctance to get close to peers for fear of being rejected and hurt. This fear may also reflect the distance created between a Chinese individual and others.

Sung states that male-female relationships often pose some difficulties. Sexual attractiveness is expressed subtly according to Chinese customs. For Chinese female students, the openness which white, black and Hispanic female students exhibit when discussing boys and sex is extremely embarrassing. To the Chinese, physical intimacy and love are private matters. Kissing and hugging a friend in public is considered to be inappropriate. It is no easier for the Chinese male students. The pressure to succeed in school and parental opposition to dating are often intense. Consequently, dating is often an unfamiliar concept and sexual attractiveness is underplayed. In addition the open, free lifestyle of Americans is not readily accepted or adjusted to by the traditional Chinese whose values and morality, instilled in them at home and at school, are resistant to change or modification.

An observation made by Sung on the different

importance placed on sports by the Chinese and the Americans has great impact on their behavior. "Games" are the big events in American schools. Track stars, football quarterbacks, baseball pitchers are the heroes and American idols. In the traditional Chinese way of thinking, development of the mental faculties is more important than development of physique. Chinese heroes and heroines tend to be well educated persons but without regard to physical excellence. In the minds of many Chinese sports are viewed as frivolous play and a waste of time and energy.⁹ However, in order to gain acceptance, Chinese students have to learn to behave as their peers.

Other than the different life styles and living habits, there are other Chinese customs which differ from that of the American. In regard to the way a person's name is written, the Chinese characteristically place the first character with the surname and follow with their given name, usually consisting of two characters. Some Chinese also acquire a Christian name, for instance the name Margaret. Thus, Ng Ho Yee would be a member of the Ng family. Her friends would call her Ho Yee, and she may also be known as Margaret Ng. Also, it is not unusual for women to continue to be addressed by their maiden name even after they are married.

⁹Betty Lee Sung, Transplanted Chinese Children (Administration for Children, Youth, and Families (DHEW), Washington, D.C., June 1980) p. 94

When an individual refers to one's age, it is customary to add a year to a child's age on Chinese New Year. Thus, at his first birthday, he would be considered two years old. The custom of adding a year to a child's age may still be observed in Hong Kong as well as among some immigrants in the United States. However, for official purposes such as schooling, the Western age is accepted, unless the birth date is not specified, then the Chinese way of calculating age may still be used.

Another difference between Chinese and American customs involves kin terminologies. At times it is difficult for Westerners to comprehend Chinese logic when referring to people around them, whether they are relatives, friends or strangers. For those individuals close in age to their parents, they are addressed as uncle or aunt, and those of the same generation and older are referred to as big-brother or big-sister. The address is based on respect accorded to older people.

In Hong Kong, there are not many roads, urban or rural, that are without a curve or a bend, thus, the Chinese must become accustomed to driving on American roads. Single dwelling housing are only for the upper economic class in Hong Kong, and grass and trees are not a common sight nor are large backyards or patios. The unlimited hot and cold water supplies found in almost all households, private and public facilities, are another luxury. Planning for meals

more than one day at a time and not having to go to the market for fresh meat and vegetables everyday or even twice a day are some of the unfamiliar customs. Also, because of a history of inadequate sanitation in China, the Chinese have always boiled their drinking water. As a result, many Chinese people still prefer to drink hot water or cooled boiled water.

Similar unsanitary conditions when organic fertilizer was used made raw vegetables generally unacceptable to the Chinese from overseas. They believed uncooked vegetables would cause illness. As a result, eating raw vegetables had not been a regular part of the dietary pattern. Even today, tossed salad is not usually included in their diet. However, potatoes and macaroni salad are acceptable because the ingredients are usually cooked. In addition, in most Chinese foods beef is cooked until the blood is no longer apparent. They do not serve rare or medium rare beef. Because milk and milk products have been scarce in the Asian countries, a taste for them was never developed. Thus, the Chinese tend to dislike foods containing milk or milk-products, particularly in dishes with cheese and creamed foods when the milk or cream flavor is not disguised.

After the initial excitement of a new environment, students from Hong Kong enter a stage of greater self-awareness and greater awareness of one's own culture. The core of their former identity is challenged. Some may go

through periods of doubt at various times which may even develop into depression and panic. Some, on the other hand, may adjust satisfactorily and fit into their new life with reasonable ease and enjoyment. But for those who do have difficulties in settling down it may be helpful to realize that they are not alone and that during periods of change any of the above feelings are common.

Cultural Variations in the Health Care Field

Behavior and response to health care are greatly influenced by one's socio-cultural background. Each individual enters the health care system with culturally bound definitions of health and illness and brings with him/her distinct practices for the prevention and treatment of illness. There is a wide range of ideas on the what constitutes "good health" and "illness." One learns from one's own cultural and ethnic background how to be healthy, how to recognize illness, and how to be ill.

It is difficult to formulate a definition of "health" that makes sense without the use of some form of medical jargon. It is also challenging to define "health" in terms that a lay person can understand. "Health," as defined by the World Health Organization is a "state of complete physical, mental, and social well-being and not merely the

absence of disease."¹⁰ The Dorlan's Medical Dictionary defines "health" as "a state of optimal physical, mental, and social well-being," and Webster's New World Dictionary of the American Language defines "health" as being free from disease, pain or defect. Other responses from lay people might include being able to do what one wants to do, physical and psychological well-being, and a state of wellness with no physical or mental illness.¹¹ In conclusion it becomes clear that there is no one definition alone that describes what health really is.

On the other hand what determines illness? How do people know when they are ill? As with "health," the word "illness" can be subjected to extensive analysis. Illness can be viewed through signs, symptoms, reduced capacities to role performance and/or a feeling of being unwell experienced by an individual. Signs consist of directly observable events such as fevers, palpable masses, visible lesions, measurements of blood pressure, and results of laboratory analyses. Symptoms on the other hand, are not always directly observable. They become known through verbalization by the patient. Symptoms can include changes in feeling states.¹² Furthermore, illness is learned. What

¹⁰Spector, Cultural Diversity in Health and Illness p. 4

¹¹Ibid. p. 5

¹²Gartly Jaco, Patients, Physicians, and Illness 3rd ed. (New York: The Free Press, 1979)

is considered to be an obvious and fearful illness in one society may not be regarded as an illness by those in another society. For example, skin diseases and injuries to the skin occur frequently among the Kuba of Sumatra. They do not find such conditions abnormal. Similarly, hookworm was regarded as a normal condition in areas of North Africa at the beginning of the century. And in contemporary United States dental caries are not generally defined as "illness" because no matter how pathological in medical terms, this condition does not interrupt the normal rhythm of life. Consequently, the tendency of the cultural group is to view it as a normal state and not a disease.¹³

Cultural Practices on Health Care. Unlike Hong Kong where 98 percent of the population are Chinese, America is a nation of great cultural diversity. Although all segments of the population share certain common elements in life patterns and basic beliefs, there are significant differences in subcultural attitudes, values, interests, goals, and dialects. In addition to cultural beliefs religious beliefs sometimes play a significant role in health care practices. There are a variety of patient responses to care and treatment influenced by religious convictions (See Figure XV).

¹³Samuel Bloom, The Doctor and His Patient (New York: The Free Press, 1965)

Figure XV

Unusual Practices in Patient Care

Religion	Food/drug prohibitions	Patient care restrictions and rituals
1. Catholic	May refuse meat on Fridays Exemptions given from fasting and other required abstinences	Rituals mandatory at birth and death Burial of amputated limbs
2. Christian Scientist	Rejects alcohol, coffee, and tobacco Refuses drug treatment Accepts only legally mandatory vaccines	Degrees of medical treatment may be acceptable to patient (contact a Christian Science Practitioner or nurse) Psychotherapy and hypnotism are distinctly prohibited
3. Episcopalian	May practice fast before Holy Communion	Mandatory birth ritual
4. Greek Orthodox	May adhere to prescribed fasting periods even though patients are exempt	Rites may be requested prior to medical procedures or early in a terminal situation
5. Jehovah's Witnesses	Rules out blood transfusions based on the biblical command "to abstain from blood"	May insist on undergoing bloodless surgery and/or signing a legal waiver form "Refusal to Permit Blood Transfusions" No birth/death rituals
6. Judaic	Insistence on kosher dietary laws by Orthodox Prohibitions on pork, shellfish and the mixture of meat and dairy products in same meal—observed in varying degree by Conservative and Reform individuals	Attitudes vary on the time, place and ceremonial requirements for the circumcision procedure Extreme religious observance may interfere in the performance of surgery in the 24-hour period following Friday sunset Immediate burial required Orthodox objections to autopsy and cremation
7. Lutheran	—	Special rite for the sick but death ritual is voluntary
8. Methodist	—	Request for Communion may be made by patient in crisis situation
9. Mormon	Rejects alcohol, tobacco, and hot beverages Practices restraints on meat consumption	Religious adherents have faith in "laying-on-of-hands" healing but also rely on medical treatment Administration of the sacrament may be requested on Sundays
10. Pentecostal	Rejects alcohol, tobacco, "blood-filled" food, and sometimes pork	Use of prayer to hasten or assist in healing No resistance to medical treatment or practices
11. Seventh Day Adventist	Refuses any narcotic or stimulant (including alcoholic and caffeine beverages) May abstain from meat	Acceptance of medical treatment but believers also have faith in prayer, oil anointments, and divine healing

Source: Howard S. Routor, The Nurses Almanac, 2nd ed.

According to the 1980 census, the population of the United States was 226,504,825: 83.2 percent caucasian, 11.7 percent blacks, 6.4 percent of Spanish descent, 1.5 percent Asian and Pacific Islanders, 0.6 percent American Indian, Eskimos and Aleut, and 3 percent consists of other races.¹⁴ Between 1972 and 1981, more than ten million immigrants were legally admitted to the United States, coming from all over the world, with the largest numbers from Mexico and other Latin American countries as well as from Southeast Asia. In 1978 alone, over 88,000 people immigrated from Vietnam. In addition to the people who have arrived here legally there are those residing in the United States as undocumented workers or illegal aliens. It is difficult to document exactly just how many people are living in the United States illegally, however, it is estimated that the number is somewhere between two and twelve million.

An individual's state of health and behavior during illness may have roots in his/her traditional belief system. Therefore, the cultural definition of health and the means by which it is preserved varies from people to people. The traditional belief system of the Chinese concerning the concept of illness and wellness was presented in Chapter III. In the next section of this chapter, the various

¹⁴United States Department of Commerce, Bureau of the Census, United States Summary: General Population Characteristics (Washington, D.C.: Government Printing Office, 1980)

definitions about health and health care practices of other cultural groups living in the United States will be briefly described.

Health and illness within the black-American community has its origin in Africa. The majority of blacks came to America as slaves from the west coast of Africa. Today, there are a number of blacks who have voluntarily immigrated to the United States. They come not only from African countries but also the West Indian islands, the Dominican Republic, Haiti, and Jamaica. For the Africans, not unlike the Chinese, that life is a process rather than a state. An individual's nature is perceived in terms of an energy force rather than matter. All things, whether living or dead, are believed to influence each other. Therefore, people have the power to influence their own destinies as well as the destinies of others through the use of behavior. When individuals are in good health, they are in harmony with nature, and illness is then a state of disharmony. Disharmony, or illness, is primarily attributed to demons and evil spirits. Therefore, the goal of treatment is to remove these demons from the body of the ill person. Some of the methods employed traditionally include the use of herbs, roots and voodoo. The practice of voodoo involves a large number of rituals and procedures such as sacrifice and the drinking of blood which are integral parts of all the

voodoo ceremonies.¹⁵ There are some who believe that certain individuals possess the power to heal and to help others.

Health and illness behavior in the Hispanic-American community also differs somewhat from common practice among the American population. The majority of Hispanic-Americans (the Chicanos) have their origins in Mexico and Puerto Rico, while the rest of the population is from Spain, Cuba, and Central and South America.

According to some Chicanos, the meaning of health is the result of "good luck," and an individual may lose his/her good health if that luck changes.¹⁶ Others describe health as a reward for good behavior, a gift from God. Prayer, the wearing of religious medals or amulets, and keeping relics in the home is believed to ward off illness. As in the black community herbs and spices have traditionally been used widely to maintain health and prevent illness. Currently, religious rituals, prayer, and folk remedies continue to be the primary approach to dealing with the health care system.

The concept of health care within the white ethnic communities primarily consisting of immigrants and

¹⁵Robert Tallant, Voodoo in New Orleans 7th printing (New York: Collier, 1946), p. 25.

¹⁶Susan Welch; John Comer; and Michael Steinman, "Some Social and Attitudinal Correlates of Health Care among Mexican Americans," Journal of Health and Social Behavior 14 (September 1973), p. 205

descendants from Europe, is varied. The 1980 census included the statistics for eleven different ethnic groups. Based on ancestry, the census revealed the following:

English	50 million	German	49 million
Irish	40 million	Afro-American	21 million
French	13 million	Italian	12 million
Scottish	10 million	Polish	8 million
Mexican	8 million	American Indian	7 million
Dutch	6 million ¹⁷		

Although the majority of the white ethnic groups have their origins in Europe, their health care is not always the same. For example, Italians often present a full account of their symptoms and expect immediate treatment or cure. Very often, caring for a sick relative is done in their home with all of the members of his/her family sharing the responsibilities. Those of German and Polish descent often perceive illness as the absence of well-being, of pain, malfunction of the body organs, and consequently, of a lack of freedom of choice to do what one wants to do. Many of these individuals believe diseases are caused by germs and that illness is related to stress.¹⁸ For members of these ethnic groups maintaining good health consists of dressing properly according to season, having a well-balanced diet, exercising regularly, keeping clean, and making an effort to worry less and to work hard. Similar to practices in other

¹⁷U. S. Department of Commerce, Bureau of the Census. 1980 Census of Population - Ancestry Groups.

¹⁸Spector, Cultural Diversity in health and Illness pp. 201-213.

cultures, those of German and Polish background often utilize folk medicine and self-prescribed treatment before seeking professional help.¹⁹

As society is changing, the milieu in which one practices health care is also changing. In the United States the preparation of health care workers involves organizing their education around a perspective of illness rather than the study of the concept of health. There is a trend toward "medicalizing" everything. With few exceptions health care providers adhere rigidly to the Western system of health care delivery. And with few exceptions, they do not publicly sanction any methods of prevention or healing other than those that are "scientifically proved." The only type of healers that are sanctioned are those that have been educated and certified according to requirements of that particular culture. Nursing is a profession that has been strongly influenced by the medical community, thus, it has traditionally been based upon the medical model.

Nursing Practice and Nursing Process

Health care is the nation's third largest industry, employing more than six-million people, including 400,000 physicians, 150,000 dentists, 150,000 pharmacists, 980,000 registered nurses, 500,000 practical nurses and, 1,000,000

¹⁹Ibid. pp. 201-214.

nurses aides, orderlies and attendants.²⁰

In the United States those who provide health care in the 1980s and 1990s are and will be faced with a changing system of health care delivery. No longer are the patients willing to "receive" care, rather they want the opportunity to participate in care-related decisions and to understand the rationale for their care. No longer can the health care providers dictate the treatment, for now there is a collaboration between the patients and health care providers to determine treatment plans. However, though modern medicine has transcended all other forms of healing in technological skills and scientific understanding, it is not easy to alter attitudes, beliefs, and prejudices that may for so long have been a part of the tradition of many cultural groups.

Nurses are the central figure in providing health care. How they administer a health plan is as important as the details of that plan. The practice of nursing has developed from a task-oriented vocation to a goal-directed profession. Nurses are increasingly becoming aware of the cultural differences that exist between groups and are beginning to realize that these differences must be considered when providing health care. In order to effectively and holistically meet patient needs, it has

²⁰George Henderson; Martha Primeaus, Transcultural Health Care (Mento Park, CA.: Addison-Wesley Publishing Co., 1981), p.4.

become necessary to train the nursing students in both technical knowledge as well as the socio-cultural aspects of each group. Nursing students must develop a sensitivity to personal and fundamental values regarding health and illness. It is not enough just to be familiar with the "hows" and scientific "whys." Consequently, nursing educators are constantly faced with the question of how they as educators can most effectively expose their students to cultural diversity. Not only do students, and later practitioners, need to be acquainted with the issues of health care delivery as perceived by Asians, blacks, whites, Hispanics, and Native Americans, they also must be aware of religious and ethnic differences. In order to prepare nursing students to best meet the challenges among each group and complexities of nursing care that they face in practice each day, the nursing process is introduced very early in their training.

Nursing Process. In general process is a method of doing something that generally involves a number of steps in order to bring about an intended result. In particular the nursing process is the act of applying scientific problem-solving to nursing care.²¹ It is used to identify patient problems, to systematically plan and implement nursing care,

²¹C.J. Parker; and L.J. Rubin, Curriculum Design and the Application of Knowledge (Chicago: Rand McNally and Co., 1966).

and to evaluate the result of that care. There are four steps involved in implementing the nursing process, and they are divided as follows:

1. assessment
2. planning
3. implementation
4. evaluation²²

Before a nurse can plan the necessary care for each patient, he/she must first identify and define each patient's problem by means of a nursing diagnosis.

As defined by Gordon, a nursing diagnosis is the actual or potential health problem which a nurse, by virtue of his/her education and experience, is capable and licensed to treat.²³ The difference between a medical and a nursing diagnosis is reflected in the differing goals. A medical diagnosis focuses on pathology, treatment, and cure of disease. On the other hand, a nursing diagnosis focuses on the individual's response to illness, and/or other factors that adversely affect, or have the potential to affect the attainment or maintenance of optimal wellness. For example, the condition of quadriplegia is a medical diagnosis. However, a potential development of pressure ulcers due to the paralysis will be a nursing diagnosis.

The assessment of illness or wellness based on the

²²Kaplan; Abraham, The Conduct of Inquiry: Methodology for Behavioral Science (San Francisco: Chandler Publishing Co., 1964), p. 127.

²³M. Gordon, "Nursing Diagnosis and the Diagnostic Process." American Journal of Nursing 76, 1976, p. 1298.

nursing diagnosis helps to determine whether or not a problem exists, whether there is a potential problem, and/or if the problem may be permanent. After the patient's needs are identified and the diagnosis made, the nurse must establish priorities by deciding which problems are most urgent. It is then that immediate, intermediate, and long-term goals are defined, which must be mutually acceptable to the patient, his/her nurse, and the patient's family. All are to become active participants in the planning of health care. The mutually decided upon plan takes much into consideration, including the patient's physical, psychological, emotional, and spiritual well-being, and his/her social, cultural, economic, and rehabilitative needs. Once nursing intervention has been determined and planning completed, implementation begins. Implementation is the actual giving of nursing care. Evaluation is the final step in the nursing process and operates as a feedback mechanism for judging the quality and improvement of nursing care. A comparison is made of the actual care given and the outcome of that care to the objectives originally decided upon in the health care plan. Nursing process, therefore, is continuous throughout the course of treatment. Thus, the practice of nursing has progressed from simply providing care for patients, to working with the patients, and helping them to care for themselves. Inherent in this process is involving patients in their own care and allowing

them to make informed decisions about their treatment.

The nursing process in Hong Kong continues to be part of a system requiring discipline and obedience with strict training regulations governing student nurses. Nursing care is primarily described in functional terms, and nursing education in Hong Kong is learned at most levels by practicing repetition. Nurses implicitly accept all that they are taught and seldom question the wisdom of what they have learned. For a nurse to be involved in scientific research is most uncommon in Hong Kong, and in nursing practice verbal and physical communication with patients is kept to a minimum. Before any nursing care is given or operative procedures performed, little is explained to the patient. Moreover, prognoses are rarely told to patients, and any questions about the treatment are referred to the attending physician(s). Generally, the focus is on the patient's condition rather than on his/hers or the family's needs. In terms of nursing records nursing records do not have the same importance, but remain factual. Furthermore, nursing in Hong Kong is service-oriented. During any quiet moments on the ward, nurses are required to prepare dressing packs or to undertake ward administrative duties.

Students from Hong Kong bring with them cultural attitudes toward health, health care and illness. Some students often express conflict in their attitudes, unable to decide whether or not to practice their traditions or

adopt the more contemporary ones they are learning in the American nursing schools. They also find the delivery of health care in the United States to be in contrast to the socialization process in Hong Kong. Due to the large population and overcrowding in Hong Kong, there is a great demand for medical care. Some of the observations made by the writer include the close placement of beds in government hospitals and the common practice of adding camp-beds to the already crowded wards to accommodate the overflow. Privacy under these conditions is nonexistent. In addition the lack of facilities, high patient loads, outdated equipment, and strict regulations on visiting hours also exist. On the other hand patients' rights, informed consent and litigations against health care providers so common in the United States are rare in Hong Kong. It is also difficult for the Chinese students to comprehend the kind of medicine practiced in the United States where physicians and health care providers have to justify and defend the treatment they deliver. Often looked upon as wasteful, the practice is also time consuming and subjects patients to unnecessary and often unpleasant procedures and tests.

For Hong Kong students, the decision and preparation to study nursing abroad is no easy task. This chapter has described briefly some of the adjustments required of Chinese students after deciding to study nursing in the United States. The adjustments these students must make

within the school setting, in their everyday life, and in the health care system require a great deal of energy, motivation, commitment, and adaptability. To be aware of some of the different cultural and societal backgrounds will help to create mutual understanding among educators, peers, counselors and health professionals. In turn nursing students will develop greater cultural sensitivity and be better able to treat people of varied ethnic backgrounds.

CHAPTER VI

CONCLUSION

Although an agreement has been signed between the British and Chinese governments to make Hong Kong a special administrative region when the lease expires in 1997, many residents of Hong Kong are relocating and settling in more desirable locations such as the United States, or sending their children abroad to continue their education. Nursing education is one of the specialized fields of study in which many residents are interested.

The purpose of this research is to attempt to explore the implications of secondary education in Hong Kong, in terms of its relevancy to nursing education and the nursing profession in the United States. As Chinese students come to the United States upon completion of secondary education, how they are compared to high school graduates in the United States is important. Some of the concerns of these students which have been addressed here include the following: (1) are the students from Hong Kong psychologically and socially equipped with the necessary educational and social skills to enter nursing programs in the United States; and (2) what are some of the educational and societal difficulties, if any, that these students have to overcome. It has been the goal of this research to attempt to provide answers to some

of these questions.

Summary

In terms of methodology, several types were utilized, such as the area study, the verstehen approach, unstructured interviews, and documentary and personal experience. As a student and a nursing professional both in Hong Kong and more recently, in the United States, the writer has taken a participant observation approach throughout her research. The rationale behind the above methodological choices includes lending support and possible verification at the findings. By means of triangulation, the validity and reliability of the analyses can be examined.

In Chapter I, the historical development of nursing both in the United States and in Hong Kong was briefly described. The writer attempted to illustrate how nursing education has evolved, along with the changing needs of each society. Advances in science and medical technology have created more demands, as well as higher expectations on nursing skills and knowledge. In turn, these changes have caused the practice of nursing to shift from a vocational status to a professional status. Technological advances have also been responsible for moving nursing education out of the hospital setting and into the academic area. In the United States, a variety of nursing programs have developed

in order to accommodate the increasing health care demands of the American people, as well as to meet the educational objectives of the nursing profession. The existence of the many different programs has caused much confusion, frustration, and debate among nurses and nursing educators.

Despite the tremendous progress in nursing practice and nursing education, the profession of nursing remains a female-dominated profession. The nurse has created an impression as someone who is a comforter and care giver. Many people continue to perceive the nurse as a woman who wears a white uniform and white cap, and holding a lamp in her hand; the image of Florence Nightingale so common a century ago.

In Chapter III a profile of the Colony of Hong Kong was presented. The Island of Hong Kong was ceded to Britain by China, and its surrounding areas were leased in 1898 for a period of ninety-nine years. The island's geographic location and early history have contributed to its tremendous economic growth since the end of World War II. The large Chinese population has influenced the formation of Hong Kong society, with its own set of beliefs and practices concerning the concepts of religion, family, health concepts, and political attitudes. Inherent in these beliefs is a combination of Chinese tradition, mixed with a hint of Western ideas. Administration under British rule has created the "present" orientation; a concept by which

has encouraged the residents of Hong Kong to seldom make long-range goals. The rapid increase in the Chinese population, with a high percentage of youth, has led to the many reforms which have taken place in the educational system. Uncertainty about Hong Kong's political future has prompted many residents to leave Hong Kong and settle in other parts of the world. Finally, great efforts have been made by both governments, and the Hong Kong people to maintain its stability and prosperity in a very complex society.

Chapter IV discusses the structure of the educational system both historically and in its present form. The religious orders have contributed greatly to the education of the Hong Kong population, from the time the Colony was formed up until the present day. Some of the best schools have been established, and rapid expansion of the educational system has occurred in Hong Kong since the end of World War II. Other areas of growth include increased subsidies to rural and urban vernacular schools, the establishment of technical and vocational education, adult and higher education, the introduction of special programs for disabled and handicapped children, the establishment of the Hong Kong Polytechnic, the Chinese University of Hong Kong, and teacher colleges.

The educational system in Hong Kong is considered to be a centralized system of education. The Director of

Education has an overall control of the administration, as well as planning and development. Large classes, long syllabi, pressure from examination, poor teacher/student ratios, inferior resource materials, and a conservative school system are unfortunately, some of the characteristics of the Hong Kong educational system. The coexistence of two languages within the educational system -- English and Chinese -- further erodes the efficiency of the system.

In the final chapter considerations and guidelines chosen by prospective students when they decide on the nursing program best suited for them was discussed. Accordingly, the admission requirements vary from school to school and from program and program, and students must be familiarized with the respective requirements in order to process the admission applications, and gain entry without undue delay or disappointment.

In addition, the numerous adjustments and adaptations a student from Hong Kong has to make while studying in the United States were covered. There are distinct differences between the two cultures both within the school setting and in daily life. The concept of saving "face" governs much of his/her behavior in interpersonal relationships, responses to authority and praises, and in expression of feelings. The highly structured and conservative educational system causes the students from Hong Kong to appear to be passive, and lacking in imagination and creativity. Language

difficulties, in general, create a challenge in the necessary transition and adjustment. Consequently, the students usually have to work harder and longer hours.

Contrary to the "Asian situational orientation" to which the students from Hong Kong have been accustomed, they have had to reshape their thinking to accommodate the concept of "individualism" which is important among American people.

Most importantly, the cultural variations in the health care field require much understanding. Cultural beliefs and attitudes toward illness and health affect both the behavior of the patient and the health care provider. Health care providers need to acknowledge the patient's cultural practices when suggesting scientifically-based health measures that are not in conflict with his/her folk medicine beliefs. With an emphasis on the awareness of cultural preferences and differences, educational nursing programs will be better able and more effective in teaching nursing students how to provide proper nursing care.

Suggestions for Future Research

In this exploratory and descriptive case study, several areas could be the subject for further analysis.

For example:

1. To what degree these findings can be translated in

terms of other ethnic groups from Asian countries, such as Vietnam, Thailand and Indonesia;

2. What are some implications of the stresses, strains, and anxieties undergone by these students in the educational system of the United States;
3. To what degree organizations have taken an active role intramurally and extramurally to help facilitate these foreign students in the acculturation of the educational norms within the American universities;
4. What programs and resources from the country of origin aim to relieve the strains of marginality and anomie if any among these students;
5. An examination of academic performance of Asian students who come from English speaking countries versus students who are from non-English speaking nations;
6. A comparative study of attitudes, beliefs and methods, of Chinese American Nurses born in the United States versus Chinese nurses born in Hong Kong;
7. What adjustments are to be made of Chinese Americans from the United States if they were to practice nursing in Hong Kong. Would the findings be similar or different. If so, to what extent?

This exploratory descriptive case study, though limited, represents a somewhat crucial encounter; because the nursing students whether from Hong Kong or from the

United States will some day hopefully become involved with one of the most profound and learned professions humanity has ever envisioned; a profession that comes to grips with the study of a human being at his/her most human moment.

It is hoped that nursing students from Hong Kong and the United States will enter that select group of men and women who enjoy the privileges and bear the burdens of the health care profession. Being professionals, whether as teachers, practitioners, or researchers, they have an opportunity to care for the patient in the broadest possible biological, sociological and psychological and moral perspectives.

Health care, therefore, becomes not just episodic; rather, it is the caring for the patient through the panorama of life and death and every moment in between. Thus, it becomes more meaningful, for it is part of the best traditions of the liberal arts and the humanities. Health care practice under these conditions permits the nurse, be it in the United States, Hong Kong, and in the world over, to heal the mind and body, embracing a holistic treatment approach.

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APPENDIX A

APPENDIX A

JOINT DECLARATION

OF THE GOVERNMENT OF THE UNITED KINGDOM OF

GREAT BRITAIN AND NORTHERN IRELAND

AND

THE GOVERNMENT OF THE PEOPLE'S REPUBLIC OF CHINA

ON THE QUESTION OF HONG KONG

The Government of the United Kingdom of Great Britain and Northern Ireland and the Government of the People's Republic of China have reviewed with satisfaction the friendly relations existing between the two Governments and peoples in recent years and agreed that a proper negotiated settlement of the question of Hong Kong, which is left over from the past, is conducive to the maintenance of the prosperity and stability of Hong Kong and to the further strengthening and development of the relations between the two countries on a new basis. To this end, they have, after talks between the delegations of the two Governments, agreed to declare as follows:

1. The Government of the People's Republic of China declares that to recover the Hong Kong area (including Hong Kong Island, Kowloon and the New Territories, hereinafter referred to as Hong Kong) is the common

aspiration of the entire Chinese people, and that it has decided to resume the exercise of sovereignty over Hong Kong with effect from 1 July 1997.

2. The Government of the United Kingdom declares that it will restore Hong Kong to the People's Republic of China with effect from 1 July 1997.

3. The Government of the People's Republic of China declares that the basic policies of the People's Republic of China regarding Hong Kong are as follows:

(1) Upholding national unity and territorial integrity and taking account of the history of Hong Kong and its realities, the People's Republic of China has decided to establish, in accordance with the provisions of Article 31 of the Constitution of the People's Republic of China, a Hong Kong Special Administrative Region upon resuming the exercise of sovereignty over Hong Kong.

(2) The Hong Kong Special Administrative Region will directly under the authority of the Central People's Republic of China. The Hong Kong Special administrative Region will enjoy a high degree of autonomy, except in foreign and defence affairs which are the responsibilities of the Central People's Government.

- (3) The Hong Kong Special Administrative Region will be vested with executive, legislative and independent judicial power, including that of final adjudication. The laws currently in force in Hong Kong will remain basically unchanged.
- (4) The Government of the Hong Kong Special Administrative Region will be composed of local inhabitants. The chief executive will be appointed by the Central People's Government on the basis of the results of elections or consultations to be held locally. Principal officials will be nominated by the chief executive of the Hong Kong Special administrative Region for appointment by the Central People's Government. Chinese and foreign nationals previously working in the public and police services in the government departments of Hong Kong may remain in employment. British and other foreign nationals may also be employed to serve as advisers or hold certain public posts in government departments of the Hong Kong Special administrative Region.
- (5) The current social and economic systems in Hong Kong will remain unchanged, and so will the life-style. Rights and freedoms, including those of the person, of speech, of the press, of assembly, of association, of travel, of movement,

of correspondence, of strike, of choice of occupation, of academic research and of religious belief will be ensured by law in the Hong Kong Special Administrative Region. Private property, ownership of enterprises, legitimate right of inheritance and foreign investments will be protected by law.

- (6) The Hong Kong Special Administrative Region will retain the status of a free port and a separate customs territory.
- (7) The Hong Kong Special Administrative Region will retain the status of an international financial centre, and its markets for foreign exchange, gold, securities and futures will continue. There will be free flow of capital. The Hong Kong dollar will continue to circulate and remain freely convertible.
- (8) The Hong Kong Special Administrative Region will have independent finances. The Central People's Government will not levy taxes on the Hong Kong Special Administrative Region.
- (9) The Hong Kong Special Administrative Region may establish mutually beneficial economic relations with the United Kingdom and other countries, whose economic interests in Hong Kong will be given due regard.

(10) Using the name of "Hong Kong, China", the Hong Kong Special Administrative Region may on its own maintain and develop economic and cultural relations and conclude relevant agreements with states, regions and relevant international organizations.

The Government of Hong Kong Special administrative Region may on its own issue travel documents for entry into and exit from Hong Kong.

(11) The maintenance of public order in the Hong Kong Special Administrative Region will be the responsibility of the Government of the Hong Kong Special Administrative Region.

(12) The above-stated basic policies of the People's Republic of China regarding Hong Kong and the elaboration of them in Annex I to this Joint Declaration will be stipulated in a Basic Law of the Hong Kong Special Administrative Region of the People's Republic of China, by the National People's Congress of the People's Republic of China, and they will remain unchanged for 50 years.

4. The Government of the United Kingdom and the Government of the People's Republic of China declare that, during the transitional period between the date

of the entry into force of this Joint Declaration and 30 June 1997, the Government of the United Kingdom will be responsible for the administration of Hong Kong with the object of maintaining and preserving its economic prosperity and social stability; and that the Government of the People's Republic of China will give its cooperation in this connection.

5. The Government of the United Kingdom and the Government of the People's Republic of China declare that, in order to ensure a smooth transfer of government in 1997, and with a view to the effective implementation of this Joint Declaration, a Sino-British Joint Liaison Group will be set up when this Joint Declaration enters into force; and that it will be established and will function in accordance with the provisions of Annex II to this Joint Declaration.
6. The Government of the United Kingdom and the Government of the People's Republic of China declare that land leases in Hong Kong and other related matters will be dealt with in accordance with the provisions of Annex III to this Joint Declaration.
7. The Government of the United Kingdom and the Government of the People's Republic of China agree to

implement the preceding declarations and the Annexes to this Joint Declaration.

8. This Joint Declaration is subject to ratification and shall enter into force on the date of the exchange of instruments of ratification, which shall take place in Beijing before 30 June 1985. This Joint Declaration and its Annexes shall be equally binding.

Done in duplicate at Beijing on 19 December 1984 in the English and Chinese languages, both texts being equally authentic

For the
Government of the
United Kingdom
Government of the
Great Britain and
Northern Ireland

For the
Government of the
People's Republic of China

Margaret Thatcher

Zhao Ziyang

Hong Kong 1985, (Hong Kong: Hong Kong Government Publications Center, 1985), pp. 1-3

APPENDIX B

APPENDIX B**NURSING ORGANIZATIONS**

Information on the different kinds of nursing programs, career opportunities, and lists of schools which are state approved and/or accredited by the National League for nursing may be obtained from the following organizations.

The American Nurses' Association
2420 Pershing Road
Kansas City, Missouri 64108

The National League for Nursing
10 Columbus Circle
New York, N.Y. 10019

Alabama State Nurses' Association
229 Professional Center
Montgomery, Alabama 36104

Alaska Nurses' Association
Room 11, 523 W. 8th Street
Anchorage, Alaska 99501

Arizona State Nurses' Association
4525 N. 12th Street
Phoenix, Arizona 85014

Arkansas State Nurses' Association
117 S. Cedar
Little Rock, Arkansas 72205

California Nurses' Association
790 Market Street
San Francisco, California 94102

Colorado Nurses' Association
5453 E. Evans Place
Denver, Colorado 80222

Connecticut Nurses' Association
84 W. Avon Road
Hartford, Connecticut 06001

Delaware Nurses' Association
Room 201, 1003 Delaware Avenue
Wilmington, Delaware 19806

District of Columbia Nurses' Association
Suite 136
3000 Connecticut Avenue N.W.
Washington D.C. 20008

Florida Nurses' Association
Box 6985
Orlando, Florida 32803

Georgia State Nurses' Association
269 10th Street N.E.
Atlanta, Georgia 30309

Guam Nurses' Association
P.O.Box 3134
Agana, Guam 96910

Hawaii Nurses' Association
510 S. Beretania Street
Honolulu, Hawaii 96813

Idaho Nurses' Association
910 N. Curtis Road
Boise, Idaho 83704

Illinois Nurses' Association
6 N. Michigan Avenue
Chicago, Illinois 60602

Indiana State Nurses' Association
Suite 53
3231 N. Meridian Street
Indianapolis, Indiana 46208

Iowa Nurses' Association
810 Walnut Street
Des Moines, Iowa 50309

Kansas State Nurses' Association
820 Quincy Street
Topeka, Kansas 66612

Kentucky Nurses' Association
P.O. Box 8342, Station E.
1400 S. 1st Street
Louisville, Kentucky 40208

Louisiana State Nurses' Association
639 S. Rendon
New Orleans, Louisiana 70019

Maine State Nurses' Association
83 Western Avenue
Augusta, Maine 04330

Maryland Nurses' Association
2315-17 St. Paul Street
Baltimore, Maryland 21218

Massachusetts Nurses' Association
20 Ashburton Place
Boston, Massachusetts 02108

Michigan Nurses' Association
120 Sparton Avenue E.
Lansing, Michigan 48823

Minnesota Nurses Association
Room N-377, 1821 University Avenue
St. Paul, Minnesota 55104

Mississippi Nurses' Association
Suite 100
135 Bounds Street
Jackson, Mississippi 39206

Missouri Nurses' Association
Box 325, 206 E. Dunklin
Jefferson City, Missouri 65101

Montana Nurses' Association
1716 Ninth Avenue
Helena, Montana 59601

Nebraska Nurses' Association
Suite 26
10730 Pacific Street
Omaha, Nebraska 68114

Nevada State Nurses' Association
Room 1, 1450 E. 2nd Street
Reno, Nevada 89502

New Hampshire Nurses' Association
5 S. State Street
Concord, New Hampshire 03301

New Jersey State Nurses' Association
Room 201, 60 S. Fullerton Avenue
Montclair, New Jersey 07042

New Mexico Nurses' Association
303 Washington S.E.
Albuquerque, New Mexico 87108

New York State Nurses' Association
Executive Park East, Stuyvesant Plaza
Albany, New York 12203

North Carolina State Nurses' Association
P.o. Box 12025
Raleigh, North Carolina 27605

North Dakota State Nurses' Association
219 N. 7th Street
Bismarck, North Dakota 58501

Ohio Nurses' Association
4000 E. Main Street, P.O. Box 13169
Columbus, Ohio 43213

Oklahoma State Nurses' Association
Room 153, 4400 N. Lincoln Blvd.
Oklahoma City, Oklahoma 73501

Oregon Nurses' Association
620 Southwest Fifth Avenue, Room 804
Portland, Oregon 97204

Pennsylvania Nurses' Association
2515 N. Front Street
Harrisburg, Pennsylvania 17110

College of Professional Nurses of Puerto Rico
Arregoitia & Salaman Street, E. Roosevelt
Hato Rey, Puerto Rico 00918

Rhode Island State Nurses' Association
134 Francis Street
Providence, Rhode Island 01903

South Carolina Nurses' Association
1821 Gadsden Street
Columbia, South Carolina 29201

South Dakota Nurses' Association
Suite 700
100 North Phillips
Sioux Falls, South Dakota 57105

Tennessee Nurses' Association
Room 400, 1720 West End Building.
Nashville, Tennessee 37203

Texas Nurses Association
Suite 219
4920 N. Interregional
Austin, Texas 78751

Utah State Nurses' Association
1058 E. 9th S.
Salt Lake City, Utah 84105

Vermont State Nurses' Association
72 Hungerford Terrace
Burlington, Vermont 05401

Virgin Island Nurses' Association
Box 2866, Charlotte Amalie
St. Thomas, Virgin Island 00801

Virginia Nurses' Association
312 W. Grace Street
Richmond, Virginia 23220

Washington State Nurses' Association
1117 Second Avenue, Room 200
Seattle, Washington 98101

West Virginia Nurses' Association
47 Capital City Building.
Charleston, West Virginia 25301

Wisconsin Nurses' Association
Room 6012, 161 W. Wisconsin Ave.
Milwaukee, Wisconsin 53203

Wyoming Nurses Association
Seminole Dam Route
Sinclair, Wyoming 82334

Source: Searight, Your Career in Nursing. pp.182-186

APPENDIX C

APPENDIX C

STATE BOARDS OF REGISTERED NURSING

Alabama Board of Nursing
State of Alabama
500 Eastern Blvd.
Montgomery, Alabama 36130
(205)832-5747

Alaska Board of Nursing
Division of Occupational Licensing
142 E. Third Ave.
Anchorage, Alaska 99501
(907)274-5714

Arizona Board of Nursing
State Occupational and Licensing Building
1645 W. Jefferson, Room 254
Phoenix, Arizona 85007
(602)255-5092

Arkansas Board of Nursing
Westmark Building
4120 W. Markham, Suite 308
Little Rock, Arkansas 72205
(501)371-2751

California Board of Registered Nursing
1020 North Street
Sacramento, California 95814
(916)322-3350

Colorado Board of Nursing
115 State Services Building
1525 Sherman
Denver, Colorado 80203
(303)839-2871

Connecticut Board of Nursing
79 Elm St., Room 101
Hartford, Connecticut 06115
(203)566-3716

Delaware Board of Nursing
Jessie Cooper Memorial Building, Room 234
Dover, Delaware 19901
(302)678-4752

District of Columbia Nurse Examiners Board
614 H St., NW, Room 109
Washington, D.C. 20001
(202)629-4543

Florida Board of Nursing
111 E. Coast Line Dr., Suite 504
Jacksonville, Florida 32202
(904)725-6-76

Georgia Board of Nursing
166 Pryor St., SW
Atlanta, Georgia 30303
(404)656-3900

Guam Board of Nursing Examiners
Department of Public Health and Social Services
Government of Guam
P.O.Box 2816
Agana, Guam 96910

Hawaii Board of Nursing
P.O. Box 3469
Honolulu, Hawaii 96801
(808)548-7471

Idaho Board of Nursing
413 W. Idaho St., Room 203
Boise, Idaho 83702
(208)384-3110

Illinois Board of Nursing
Department of Registration and Education
55 E. Jackson Blvd.
Chicago, Illinois 60604
(312)341-9810

(For licensing information only:)
Department of Registration and Education
320 W. Washington St.
Springfield, Illinois 62786
(217)782-6144

Indiana Board of Nurses' Registration & Nursing Education
700 N. High School Road
Indianapolis, Indiana 46224
(317)633-5787 or 633-5705

Iowa Board of Nursing
State Office Building
300 Fourth St.
Des Moines, Iowa 50319
(515)281-3255

Kansas Board of Nursing
503 Kansas Ave., Suite 330
P.O. Box 1098
Topeka, Kansas 66601
(913)862-9320

Kentucky Board of Nursing Education & Nurse Registration
4010 Dupont Circle, Suite 430
Louisville, Kentucky 40207
(503)897-5143

Louisiana Board of Nursing
907 Pere Marquette Building
150 Baronne St.
New Orleans, Louisiana 70112
(504)568-5464

Maine Board of Nursing
295 Water St.
Augusta, Maine 04330
(207)289-2921

Maryland Board of Nursing
201 W. Preston St.
Baltimore, Maryland 21201
(301)383-2085

Massachusetts Board of Registered Nurses
1509 Leverett Saltonstall Building
100 Cambridge St.
Boston, Massachusetts 02202
(617)727-3060

Michigan Board of Nursing
Department of Licensing and Registration
P.O. Box 30018
Lansing, Michigan 48909
(517)373-1600

Minnesota Board of Nursing
717 Delaware Street, SE
Minneapolis, Minnesota 55414
(612)296-5493

Mississippi Board of Nursing
135 Bounds Street, Suite 101
Jackson, Mississippi 39206
(601)354-7349

Missouri Board of Nursing
Division of Professional Registration
P.O. Box 656
Jefferson City, Missouri 65102
(314)751-2334

Montana Board of Nursing
Department of Professional and Occupational Licensing
Lalonde Building
Helena, Montana 59601
(406)449-7373

Nebraska Board of Nursing
State House Station
P.O. Box 95065
Lincoln, Nebraska 68509
(402)471-2001

Nevada Board of Nursing
1135 Terminal Way, Room 209
Reno, Nevada 89502
(702)786-2778

New Hampshire Board of Nursing Ed. & Nurse Registration
105 Loudon Road
Concord, New Hampshire 03301
(603)271-2323

New Jersey Board of Nursing
1100 Raymond Blvd., Room 319
Newark, New Jersey 07102
(201)648-2691

New Mexico Board of Nursing
2340 Menaul, NE, Suite 112
Albuquerque, New Mexico 87107
(505)482-3026

New York Board of Nursing
State Education Department
Cultural Education Center, Room 3013
Albany, New York 12230
(518)474-4843, (518)474-3844, (518)474-3845

North Carolina Board of Nursing
P.O. Box 2129
Raleigh, North Carolina 27602
(919)828-0740

North Dakota Board of Nursing
418 E. Rosser
Bismark, North Dakota 58505
(701)224-2974

Ohio Board of Nursing Education and Registration
180 E. Board St., Suite 1130
Columbus, Ohio 43215
(614)466-3947

Oklahoma Board of Nursing
Northgate Complex, Suite 400
4001 N. Lincoln Blvd.
Oklahoma City, Oklahoma 73105
(405)521-2363

Oregon State Board of Nursing
P.O. Box 231
Portland, Oregon 07207
(503)229-5653

Pennsylvania Board of Nurse Examiners
P.O. Box 2649
Harrisburg, Pennsylvania 17120
(707)783-3628

Rhode Island Board of Nurse Registration & Nursing Education
Health Department Building
104 Davis St.
Providence, Rhode Island 02908
(401)227-2827

South Carolina Board of Nursing
177 St. Julian Place, Suite 102
Columbia, South Carolina 29204
(803)758-2611

South Dakota Board of Nursing
304 S. Phillips Ave., Suite 205
Sioux Falls, South Dakota 57102
(605)334-1243

Tennessee Board of Nursing
Department of Public Health
State Office Building
Ben Allen Road
Nashville, Tennessee 37216
(615)741-7256

Texas Board of Nurse Examiners
510 S. Congress, Suite 216
Austin, Texas 78704
(512)451-0201

Utah Board of Nursing
Department of Registration
303 E. Fourth, South
Salt Lake City, Utah 84111
(801)533-5718

Vermont Board of Nursing
Boarding of Nursing
Division of Registration and Licensing
10 Baldwin Street
Montpelier, Vermont 05602
(802)828-2384

Virginia Board of Nursing
Seaboard Building, Suite 453
Richmond, Virginia 23230
(804)786-5513

Virgin Islands Board of Nurse Examiners
P.O.Box 1442
Charlotte Amalie
St. Thomas, Virgin Islands 00801
(809)774-1321, ext. 254

Washington Board of Nursing
Division of Professional Licensing
P.O. Box 9649
Olympia, Washington 98504
(206)753-3726

West Virginia Board of Examiners for Registered Nurse
Embleton Building, Suite 309
933 Quarrier Street
Charleston, West Virginia 25301
(304)348-3596 or 348-3572

Wisconsin Board of Nursing
Department of Regulation and Licensing
1400 E. Washington Avenue, Room 252
Madison, Wisconsin 53702
(608)266-3735

Wyoming Board of Nursing
Hathaway Building
2300 Capitol Avenue
Cheyenne, Wyoming 82002
(307)777-7601

Source: Akemi Hiraki; Pamela Kees Parlocha, Returning to School: The RN to BSN Handbook, (Boston: Little Brown and Co., 1983), pp.149-155

APPENDIX D

APPENDIX D

BSN Programs in the United States

Alabama

*Auburn University
Auburn, Alabama 36830

*Auburn University
Montgomery, Alabama 36117

*Jacksonville State University
Jacksonville, Alabama 36265

*Mobile College,
P.O. Box 13220
Mobile, Alabama 36613

*Samford University
800 Lakeshore Drive
Birmingham, Alabama 35209

*Troy State University
Troy, Alabama 36082

*Tuskegee Institute
Tuskegee, Alabama 36088

*University of Alabama, Birmingham
University Station
Birmingham, Alabama 35294

*University of Alabama, Huntsville
P.O. Box 1247
Huntsville, Alabama 35807

*University of Alabama, Tuscaloosa
Capstone College of Nursing
P.O. Box 958
University, Alabama 35486

University of North Alabama
Florence, Alabama 35632

*Accredited by NLN
^RN-only program

*University of South Alabama
Building 2000
Bay Front Road
Mobile, Alabama 36688

Alaska

*University of Alaska, Anchorage
3221 Providence Drive
Anchorage, Alaska 99508

Arizona

*Arizona State University
Tempe, Arizona 85281

^Northern Arizona University
P.O. Box 15035
Flagstaff, Arizona 86001

*University of Arizona
Tucson, Arizona 85721

Arkansas

*Arkansas State University
Box E
State University, Arkansas 72467

Arkansas Technical University
Russellville, Arkansas 72801

Harding College
Searcy, arkansas 72143

*Harding University
Searcy, Arkansas 72143

Henderson State University
Arkadelphia, Arkansas 71923

*University of Arkansas
4301 W. Markham
Little Rock, Arkansas 72201

*University of Arkansas at Pine Bluff
Pine Bluff, Arkansas 71601

*University of Central Arkansas
Conway, Arkansas 72032

California

*Azusa Pacific College
Highway 66 at Citrus Avenue
Azusa, California 91702

*Biola College
13800 Biola Avenue
La Mirada, California 90638

^California Lutheran College
60 W. Olsen Road
Thousand Oaks, California 91360

California Pacific University
920 Morena Blvd.
San Diego, California 92110

*California State College, Bakersfield
9001 Stockdale Highway
Bakersfield, California 93309

*^California State College, San Bernardino
5500 State College Parkway
San Bernardino, California 92407

^California State College, Stanislaus
800 Monte Vista Avenue
Turlock, California 95380

*California State University, Chico
First and Normal Streets
Chico, California 95929

*California State University, Fresno
Shaw and Cedar Avenues
Fresno, California 93740

^California State University, Fullerton
800 N. State College Blvd.
Fullerton, California 92634

*California State University, Hayward
25800 Hillary Street
Hayward, California 94542

*California State University, Long Beach
1250 Bellflower Blvd.
Long Beach, California 90840

*California State University, Los Angeles
5151 State University Drive
Los Angeles, California 90032

*California State University, Sacramento
6000 "J" Street
Sacramento, California 95819

*^California State University, Sonoma
1801 E. Cotati Avenue
Rohnert Park, California 94928

California Statewide Nursing Program (External Degree)
Consortium of California State Colleges and Universities
1250 Bellflower Blvd.
Long Beach, California 90840

*^Holy Names College
3500 Mountain Blvd.
Oakland, California 94619

*Humboldt State University
Arcata, California 95521

*Loma Linda University
Loma Linda, California 92350

*Mount St. Mary's College
12001 Chalon Road
Los Angeles, California 90049

Pepperdine University
8035 S. Vermont Avenue
Los Angeles, California 90044

*Point Loma College
3900 Lomaland Drive
San Diego, California 92106

*San Diego State University
5300 Campanile Drive
San Diego, California 92182

*San Francisco State University
1600 Holloway Avenue
San Francisco, California 94132

*San Jose State University
125 S. Seventh Street
San Jose, California 95192

*University of California, Los Angeles
UCLA Center for Health Sciences
405 Hilgard Avenue
Los Angeles, California 90024

*^University of California, San Francisco
N-319-Y
San Francisco, California 94143

*^University of San Diego, Alcala Park
San Diego, California 92110

University of San Francisco
Golden Gate and Parker Avenues
San Francisco, California 94117

Colorado

*Loretto Heights College
3001 S. Federal Blvd.
Denver, Colorado 80236

^Mesa College
Box 2647
Grand Junction, Colorado 81501

*^Metropolitan State College
1106 Eleventh Street
Denver, Colorado 80204

*University of Colorado
4200 E. Ninth Avenue
Denver, Colorado 80220

*^University of Denver
University Park
Denver, Colorado 80208

*University of Northern Colorado
Greeley, Colorado 80639

*^University of Southern Colorado
2200 N. Bonforte Blvd
Pueblo, Colorado 81001

Connecticut

*Fairfield University
North Benson Road
Fairfield, Connecticut 06430

St. Joseph College
1678 Asylum Avenue
West Hartford, Connecticut 06117

*Southern Connecticut State College
New Haven, Connecticut 06515

*University of Bridgeport
75 Linden Avenue
Bridgeport, Connecticut 06602

*University of Connecticut
Storrs, Connecticut 06268

^University of Hartford
200 Bloomfield Avenue
West Hartford, Connecticut 06117

*Western Connecticut State College
Danbury, Connecticut 06810

Delaware

*University of Delaware
Newark, Delaware 19711

District of Columbia

*American University
Nebraska and Massachusetts Avenues, NW
Washington, E.C. 20016

*Catholic University
620 Michigan Avenue, NE
Washington, D.C. 20064

*Georgetown University
3700 Reservoir Road, NW
Washington, D.C. 20007

*Howard University
2400 Sixth Street, NW
Washington, D.C. 20059

*University of the District of Columbia
4200 Connecticut Avenue, NW
Building 38, Room 101
Washington, D.C. 20008

Florida

*Barry College
11300 N.E. Second Avenue
Miami Shores, Florida 33161

Bethune-Cookman College
Nursing Program
640 Second Avenue
Daytona Beach, Florida 32014

*Florida Agricultural and Mechanical University
Tallahassee, Florida 32307

Florida International University
Tamiami Trail
Miami, Florida 33199

^Florida Southern College
Lakeland, Florida 33802

*Florida State University
Tallahassee, Florida 32306

Pensacola Christian College
125 Saint John Street
Pensacola, Florida 32503

University of Central Florida
Box 25000
Orlando, Florida 32816

*University of Florida
Gainesville, Florida 32611

*University of Miami
Coral Gables, Florida 33124

^University of North Florida
FAMU-UNF-UF Joint Nursing Program
P.O. Box 17074
Jacksonville, Florida 32216

*University of South Florida
Tampa, Florida 33620

^University of West Florida
FAMU-UWF-FSU Joint Nursing Program
Gamma College
Pensacola, Florida 32504

Georgia

Albany State College
504 College Drive
Albany, Georgia 31705

Armstrong State College
11935 Abercorn Street
Savannah, Georgia 31406

*Emory University
Nell Hodgson Woodruff School of Nursing
Atlanta, Georgia 30322

Georgia College
Milledgeville, Georgia 31061

^Georgia Southwestern College
Americus, Georgia 31709

*Georgia State University
Atlanta, Georgia 30303

Hall School of nursing at Brenau College
Gainesville, Georgia 30501

*Medical College of Georgia
Augusta, Georgia 30912

*Valdosta State College
Valdosta, Georgia 31601

Hawaii

*University of Hawaii
2528 The Mall
Honolulu, Hawaii 96822

Idaho

^*Boise State University
Boise, Idaho 83725

*Idaho State University
Box 8101
Pocatello, Idaho 83201

^Lewis-Clark State College
Eighth Avenue at Sixth
Lewiston, Idaho 83501

Illinois

Aurora College
347 S. Gladstone
Aurora, Illinois 60507

*Bradley university
150 W. Bradley Avenue
Peoria, Illinois 61625

*Chicago State University
Ninety-Fifth Street at King Drive
Chicago, Illinois 60628

*DePaul University
2323 N. Seminary Avenue
Chicago, Illinois 60614

*Elmhurst College
190 prospect
Elmhurst, Illinois 60126

^Governors State University
Stuenkel Road
Park Forest South, Illinois 60466

^Illinois Benedictine College
5700 College Road
Lisle, Illinois 60532

*Illinois Wesleyan University
Bloomington, Illinois 61701

*Lewis University
Route 53
Romeoville, Illinois 60441

*Loyola University of Chicago
6525 N. Sheridan Road
Chicago, Illinois 60626

MacMurray College
Jacksonville, Illinois 62650

*^McKendree College
Lebanon, Illinois 62254

*Millikin University
1184 W. Main
Decatur, Illinois 62522

*Northern Illinois University
DeKalb, Illinois 60115

*North Park College
5125 N. Spaulding Avenue
Chicago, Illinois 60625

*Northwestern University Medical School
303 E. Chicago Avenue
Chicago, Illinois 60611

*Olivet Nazarene College
Kankakee, Illinois 60901

*Rush University
600 S. Paulina Street
Chicago, Illinois 60612

*Saint Xavier College
3700 W. 103rd Street
Chicago, Illinois 60655

*^Sangamon State University
Shepherd Road
Springfield, Illinois 62708

*Southern Illinois University
Edwardsville, Illinois 62026

*University of Illinois
845 S. Damen Avenue
Chicago, Illinois 60612

University of Illinois
1115 1/2 W. oregon
Urbana, illinois 61801

Indiana

*Ball State University
Muncie, Indiana 47306

*DePauw University (at Greencastle)
Greencastle, Indiana 46135

DePauw university
Indianapolis, Indiana 46202

*Goshen College
Goshen, Indiana 46526

^Indiana Central University
Indianapolis, Indiana 46227

*Indiana State University
Terre Haute, Indiana 47809

*Indiana University (at Indianapolis)
1100 W. Michigan Street
Indianapolis, Indiana 46202

Indiana University
South Bend, Indiana 46615

*^Indiana University-Purdue University
Fort Wayne, Indiana 46805

Marian College
Indianapolis, Indiana 46222

*Marian College
Marian, Indiana 46952

*^Purdue University
W. Lafayette, Indiana 47907

*^Purdue University/Calumet
Hammond, Indiana 46323

*Saint Mary's College
Notre Dame, Indiana 46556

*University of Evansville
Evansville, Indiana 47702

*Valparaiso University
Valparaiso, Indiana 46383

Iowa

^Briar Cliff College
3303 Rebecca Street
Sioux City, Iowa 51104

^Coe College
1220 First Avenue, NE
Cedar Rapids, Iowa 52402

*Graceland College
Lamoni, Iowa 50140

*Grand View College
1200 Grandview Avenue
Des Moines, Iowa 50316

*Iowa Wesleyan College
Mount Pleasant, Iowa 52641

*Luther College
Decorah, Iowa 52101

*Marycrest College
1607 W. Twelfth Street
Davenport, Iowa 52804

Morningside College
Sioux City, Iowa 51106

*Mount Mercy College
1330 Elmhurst Drive, NE
Cedar Rapids, Iowa 52402

*^University of Dubuque
2050 University Avenue
Dubuque, Iowa 52001

^Upper Iowa University
Fayette, Iowa 52142

*The University of Iowa
Iowa City, Iowa 52242

Kansas

*Fort Hays State University
Hays, Kansas 67601

*Marymount College of Kansas
East iron and Marymount Roads
Salina, Kansas 67401

*Mid-American Nazarene College
Box 1776
Olathe, Kansas 66061

*Pittsburg State University
Pittsburg, Kansas 66762

^St. Mary College
4100 S. Fourth Street Trafficway
Leavenworth, Kansas 66048

*St. Mary of the Plains College
1121 S. Clifton Street
Wichita, Kansas 67218

*University of Kansas
Rainbow Blvd. at Thirty-ninth Street
Kansas City, Kansas 66103

*Washburn university of Topeka
1700 College Street
Topeka, Kansas 66621

*Wichita State University
1845 Fairmount Avenue
Wichita, Kansas 67208

Kentucky

^Bellarmine College
Newbury Road
Louisville, Kentucky 40205

*Berea College
Berea, Kentucky 40404

Eastern Kentucky University
Richmond, Kentucky 40475

*Murray State University
Murray, Kentucky 42071

^Northern Kentucky University
Highland heights, Kentucky 41076

*Spalding College
Louisville, Kentucky 40203

*^University of Kentucky
Lexington, Kentucky 40536

^University of Louisville
2211 S. Brook Street
Louisville, Kentucky 40292

*^Western Kentucky University
Bowling Green, Kentucky 42101

Louisiana

*Dillard University
2601 Gentilly Blvd.
New Orleans, Louisiana 70122

*Louisiana State university
Medical Center
420 S. Prieur Street
New Orleans, Louisiana 70112

^Loyola University
6363 St. Charles Avenue
New Orleans, Louisiana 70118

McNeese State University
Lake Charles, Louisiana 70609

*Northeast Louisiana University
Monroe, Louisiana 71209

*Northwestern State University of Louisiana
Natchitoches, Louisiana 71457

*Southeastern Louisiana University
Box 781
University Station
Hammond, Louisiana 70402

University of Southwestern Louisiana
Lafayette, Louisiana 70504

Maine

*St. Joseph's College
North Windham, Maine 04062

*University of Southern Maine
96 Falmouth Street
Portland, Maine 04103

Maryland

^College of Notre Dame of Maryland
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^Anna Maria College
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Chestnut Hill, Massachusetts 02167

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*Fitchburg State College
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Fitchburg, Massachusetts 01420

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Boston, Massachusetts 02115

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300 Fenway
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Old Westport Road
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*University of Lowell
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Lowell, Massachusetts 01854

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*Grand Valley State College
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Sault Sainte Marie, Michigan 49783

*Madonna College
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*Mercy College of Detroit
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*Michigan State University
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*Nazareth College
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*Northern Michigan University
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*Oakland University
Rochester, Michigan 48063

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*Winona State University
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*Delta State University
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^Northwest Missouri State University
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*Montana State University
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Kearney, Nebraska 68847

*Midland Lutheran College
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*Duke University
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Greenville, North Carolina 27834

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Pittsburgh Pennsylvania 15213

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Allentown, Pennsylvania 18104

*College Misericordia
Dallas, Pennsylvania 18612

*Duquesne University
Pittsburgh, Pennsylvania 15219

East Stroudsburg State College
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Gwynedd, Pennsylvania 19437

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Millersville, Pennsylvania 17551

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Our Lady of Angels College
Aston, Pennsylvania 19014

*Pennsylvania State University
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*^Slippery Rock State College
Slippery Rock, Pennsylvania 16057

Temple University
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Philadelphia, Pennsylvania 19122

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College of Allied Health Sciences
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*University of Pennsylvania
Philadelphia, Pennsylvania 19104

*University of Pittsburgh
Pittsburgh, Pennsylvania 15261

*Villanova University
Villanova, Pennsylvania 19085

*West Chester State College
West Chester, Pennsylvania 19380

*Widener College
Chester, Pennsylvania 19013

*Wilkes College
Wilkes-Barre, Pennsylvania 18766

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Spartanburg, South Carolina 29303

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Rock Hill, South Carolina 29733

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Sioux Falls, South Dakota 57197

*Mount Marty College
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Yankton, South Dakota 57078

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Brookings South Dakota 57007

Tennessee

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Clarksville, Tennessee 37040

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*^Memphis State University
Memphis, Tennessee 38152

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Lynchburg College
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*^Marymount College
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*Medical College of Virginia
Virginia Commonwealth University
Richmond, Virginia 23298

*Old Dominion University
Norfolk, Virginia 23508

*Radford College
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^Roanoke College
Salem, Virginia 24153

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*University of Washington
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Source: Hiraki, Returning to School: The RN to BSN Handbook, pp. 115-146

APPENDIX E

CONSENT FORM

Project Title: A Descriptive and Exploratory Case Study of Secondary Education in the British Colony of Hong Kong 1960-1980: Implications for Entrance into Nursing Education in the United States.

I _____ (volunteer),
state that I am over 18 years of age and that I wish to participate in a program of research being conducted by Sylvia Lee Huie (investigator).

Risks and discomforts involved in this research are minimal. However, the potential benefits would be to provide a deeper understanding on the part of the educators and students in both United States and Hong Kong on nursing education in United States during the adjustment and transition period.

I acknowledge that Sylvia Lee Huie has fully explained to me the risks involved and the need for the research; has informed me that I may withdraw from participation at any time without prejudice; has offered to answer any inquires which I may make concerning the procedures to be followed; and has informed me that I will be given a copy of this consent form.

I freely and voluntarily consent to my participation in the research project.

(Signature of Investigator)

(Signature of Volunteer)

(Date)

APPROVAL SHEET

The dissertation submitted by Sylvia Lee Huie has been read and approved by the following committee:

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The final copies have been examined by the director of the dissertation and the signature which appears below verifies the fact that any necessary changes have been incorporated and that the dissertation is now given final approval by the Committee with reference to content and form.

The dissertation is therefore accepted in partial fulfillment of the requirements for the degree of Doctor of Philosophy.

November 23, 1987
Date

Steven I. Miller
Director's Signature