

Laboring for Relevance: Expectant and New Fatherhood

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The purpose of this study was to describe the experience of expectant and new fatherhood. The grounded theory method was used to gather data from 56 expectant and new fathers. Data were analyzed through the technique of constant comparative analysis. The essence of the experience of expectant and new fatherhood is laboring for relevance which consists of: (a) grappling with the reality of the pregnancy and child; (b) struggling for recognition as a parent from mate, coworkers, friends, family, baby, and society; and (c) plugging away at the role-making of involved fatherhood. Men were not recognized as parents but as helpmates or breadwinners which interfered with validation of the reality of the pregnancy or child. They felt excluded from the childbearing experience by their mates, health care providers, and society. Fathers found themselves without models to assist them in taking on the role of active and involved parent. The findings of this study promote greater understanding of the male experience of expectant and new parenthood and may serve as a beginning for the development of interventions to support and promote paternal behavior.

Although there is growing documentation of the experience of pregnancy and developmental tasks of the expectant mother (e.g., Lederman, 1984; Mercer, 1986; Rubin, 1984), there has been little systematic inquiry and documentation of the parallel male experience. Changing societal beliefs about gender roles and parenting responsibilities have prompted greater attention to the male who previously has been largely excluded from consideration in the reproductive and childrearing process.

Societal changes related to the impact and spread of the women's movement and economic changes necessitating wider employment of women outside the home have shifted breadwinning, parenting, and household responsibilities. Several authors have cited shared parenting as a requisite for the survival of our society (Chinn, 1979; Chodorow, 1978; Dinnerstein, 1976). At the same time more men have demanded greater involvement in and commitment to the family (Friedan, 1981; Levine, 1976; Pruett, 1987). Thus, there is a need to better understand the human experience of expectant and new fatherhood to promote the father's desired level of involvement in the reproductive and childrearing process and support him in his transition to parenthood.

Related Literature

Expectant and new fatherhood has rarely been explored as normative events or a developmental process. Deutscher's (1970) psychoanalytic work prompted him to conduct a clinical study of 10 young, middle-class couples making the transition to parenthood. Essential tasks of the first trimester were described as discriminating between sickness and pregnancy and shifting the pattern of nurturance and dependence within the couple relationship. This began the rehearsal aspect of pregnancy whereby parents explore their own and each other's sense of family and parenting style, in part by parenting each other. In the second trimester, the triadic family structure became more of a reality with palpation of fetal activity and giving the child a pet or formal name. Late pregnancy

brought greater distance between mates which was countered by increased planning and equipping for the child. By three months postbirth, fathers were trying to "rescue" their mates from their intense involvement with the child.

Gurwitt (1976) described a 23-year-old graduate student making the transition to parenthood while undergoing psychoanalysis. The pregnancy precipitated major reworking of the subject's past and present relationships with his father, mother, siblings, and wife, as well as his sense of self. These psychological struggles crescendoed during pregnancy and moved toward resolution post-birth.

The experience and concerns of men over the transition to parenthood were explored by Bittman and Zalk (1978). Data were derived from interviews of expectant fathers and health care professionals providing services to childbearing families, involvement in expectant and new parent groups, and descriptive survey questionnaires completed by expectant and new fathers. Issues of fatherhood included envy of the woman's procreative ability, the emotional response to the pregnancy and child, negotiation of parental roles, inadequacy in child care skills, and the burden of the breadwinner role.

May used a more diverse sample and longitudinal data collection to focus on the social psychological experience of expectant fatherhood (1980, 1982a, 1982b, 1982c). Her substantive theory, derived from using grounded theory methodology, describes how fathers establish their detachment or involvement during pregnancy in one of three styles: observer, expressive, or instrumental (May, 1980). May proposed three phases of father involvement in pregnancy as announcement, the moratorium, and the focusing phase (May, 1982a, 1982b). Another aspect of the study was an exploration of factors contributing to men's readiness for fatherhood which included the intention to have children, a sense of stability of the couple relationship, relative financial security, and sense of closure of childfree life (May, 1982c). However, there remained a

need for longitudinal data on expectant and new fatherhood as normative life events from a sufficiently broad sample to allow greater generalization of these findings. Therefore, the purpose of this study was to provide such information.

Method

Sample: The sample consisted of 56 expectant and recent first time fathers who were living with their mates. Subjects were recruited through obstetrical care providers, word of mouth, and media publicity. Twenty-eight subjects chose longitudinal participation and 28 comprised the cross-sectional group. Ages ranged from 20 to 41 years with mean and median ages of 30. Four subjects had been born and raised outside the country: one European, Two Hispanic, and one Asian. Four subjects were living with their mates but unmarried. Five experienced premarital conceptions. Couples' conceptions ranged from one month to ten years after marriage ($M = 3$ years). Subjects had from 11 to 21 years of formal education ($M = 16$ years). Four subjects were unemployed and 13 were students. A broad variety of occupations were represented and annual household incomes ranged from \$0 to \$90,000, with a mean of \$31,000 and a median of \$26,000. These figures are inflated since demographic data were gathered at the initial interview for longitudinal subjects when the majority enjoyed dual incomes.

Data Collection: Audiotaped interviews lasted from 0.5 to 2.5 hours and were conducted at a time and place convenient to the subjects, usually their homes. More than 180 interviews served as the database for this study and at least 13 fathers were interviewed at each data collection point. Men were invited to participate in the longitudinal group if their mates were in the first half of pregnancy and all subjects meeting this criterion chose longitudinal participation. These subjects were interviewed six to seven times over the perinatal period: (a) as soon after conception as possible; (b) after their mates felt fetal movement (20–24 weeks of gestation); (c) late pregnancy (36–40 weeks gestation); (d) as soon after birth as possible; (e) 6 weeks postbirth; (f) 6 months postbirth; and (g) 1 year postbirth. Fathers in the cross-sectional group were interviewed at only one of the above specified times.

Each interview opened with the broad question, "What can you tell me about your experience of being an expectant/new father?" As the study progressed, follow-up questions were focused on aspects of developing categories and included, "When was your baby real to you?", "Who do you want to be like as a father?", and "In what ways do people acknowledge that you are an expectant/new father?" Subjects spoke for 30 to 60 minutes in response to the initial broad question. Most stated the investigator was the only person with whom they had been able to share their experience and feelings. Procedures for the protection of human subjects were followed throughout the study.

Data Analysis: Grounded theory method (Glaser, 1978; Glaser & Strauss, 1967; Strauss, 1987) guided the concurrent data collection and analysis. Each phrase, line, paragraph, and statement in the transcribed interviews was reviewed to determine what concept the datum reflected and was then coded. Codes were compared to other codes within the same interview, across interviews with the

same informant, and across informants for comparison and verification. Similarities and differences were noted and related codes were clustered into categories. Through constant comparison core concepts were identified which most economically, consistently, and validly allowed classification of data into conceptually relevant categories. Identification of core categories redirected the purpose of analysis to verification of categories and elaboration of key concepts.

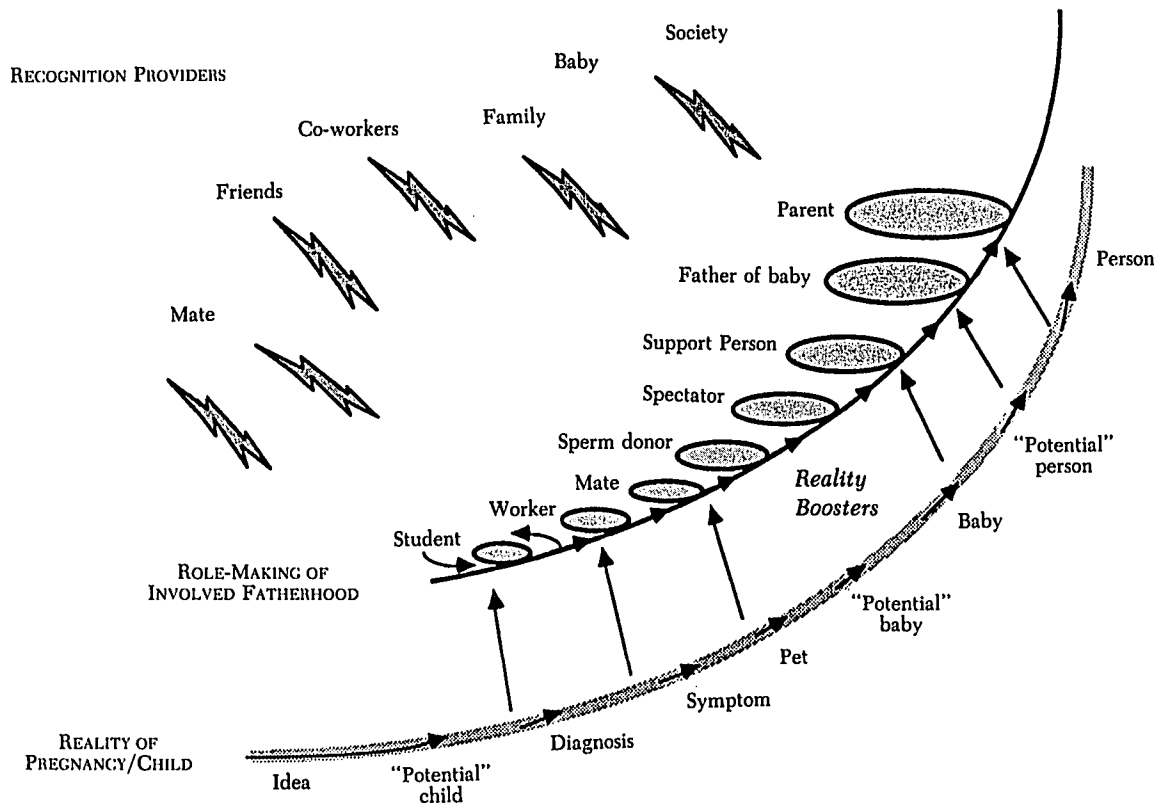
As the core categories became apparent, additional data were collected using more selective sampling on such variables as age, religion, ethnicity, education, and income. When no new categories were identified and no additional explanatory properties of categories emerged, categories were considered saturated. The investigator then sought to determine how the core concepts were related to one another by formulating propositions about relationships and attempting to verify them in the data. The core concepts were integrated into the substantive theory explained below, which provides a concise framework for understanding the phenomenon of expectant and new fatherhood.

Reliability and Validity Issues: Both reliability and validity were addressed using an approach advocated by Swanson-Kauffman (1986). To establish interrater reliability, two graduate students independently reviewed several transcripts to determine whether they could identify examples of the core categories. Construct validity was supported by reviewing categories with subjects as they were identified and developed, and by reviewing the developing theory with subjects as they completed participation in the study. Presentation of the theory to a group of expectant and new fathers who had not participated also supported its construct validity. Concurrent validity was addressed through comparison of these findings to those reported in the literature. Because the interviewer may be regarded as the major tool in this type of investigation, a consultant in this methodology reviewed select tapes and transcripts to provide feedback on the reliability and validity of the investigator as interviewer.

Findings

The essence of the experience of expectant and new fatherhood is laboring for relevance, which has both intra- and interpersonal aspects. The man labors to perceive the paternal role as relevant to his sense of self and his repertoire of roles. He labors to incorporate the paternal role into his self-identity as a salient and integrated component of his personhood, and to be seen as relevant to childbearing and childrearing by others. Laboring for relevance is a process consisting of three subprocesses: (a) grappling with the reality of the pregnancy and child, (b) struggling for recognition as a parent, from mate, co-workers, friends, family, baby, and society, and (c) plugging away at the role-making of involved fatherhood. Each subprocess is developmental in nature. The focal trajectory is the man's movement toward becoming an involved father. The driving force is the developing or unfolding reality of the child. These processes occur within the larger contextual environment of society and interpersonal interactions. Individuals within the father's environment, the recognition providers, act to promote or impede his evolution. The model of the substantive theory and interrela-

Figure 1. The Substantive Theory: Model of the Male Experience of Expectant and New Parenthood



tionships among the subprocesses are depicted in the accompanying Figure 1.

Grappling with the Reality of the Pregnancy and Child: Grappling with the reality of the pregnancy and child is central to the father's experience. The unfolding reality of the child serves as the stimulus for taking on the identity of father. The child becomes progressively more real from conception through the first months postpartum. The child is not "really" real to the father until sometime after birth. The experience of the child is indirect or second hand until he meets the child face to face at birth. Various experiences serve as catalysts to the developing reality of the pregnancy and child. These are termed "reality boosters" and are listed below:

- The "theoretical" pregnancy*
- Changes in the mother's behavior and body*
- The "official" diagnosis of pregnancy*
- Hearing the baby's heartbeat*
- Seeing the baby on ultrasound*
- Feeling the baby move*
- Telling others about the pregnancy*
- Giving the baby a nickname*
- Nesting*
- Seeing and holding the baby at birth*
- Telling others about the baby*
- Baby entering the home environment*
- Assuming responsibility for the baby's care*
- Getting to know the baby as a person*

Initially, the pregnancy and child are an idea in the

minds of the mother and father. Preconception and early in pregnancy their thoughts and discussion are of the "potential child." The father envisions a child who is mobile, interactive, and capable, a child of 4 to 6 as opposed to a fetus or newborn. The "theoretical pregnancy" spurs the father to begin thinking more seriously about the potential child and becoming a parent. The following excerpts exemplify the early stages of the reality of the pregnancy and child.

It's more in my head. I know that she's pregnant, but there's nothing to feel yet. (9 weeks gestation)

My experience is that there is this child that is supposedly happening. All we have is this test that is pretty reliable. . . . Although I was ecstatic when she showed me the test, I don't see anything happening yet. It's all from her, and I feel like I probably won't get on board. . . until I hear it from the doctor. (7 weeks gestation)

Virtually all subjects had experience with home pregnancy tests. Despite their reliability these men awaited the official diagnosis of pregnancy by a health care provider as real confirmation of the pregnancy. The child then became a diagnosis. About the same time men began to observe changes in their mates' behavior and, later, their bodies. Initially, the nausea and fatigue were perceived as symptoms of illness and bodily changes as merely "getting fat."

It didn't feel real. Where is this big belly? Where is this kid at?

So you stopped having periods. What's that? That doesn't impact me whatsoever. (18 weeks gestation)

Eventually, with the official diagnosis and the mother's enlarged breasts and thickening waist, these cues were recognized as symptoms of pregnancy.

Hearing the baby's heartbeat provides additional validation of the pregnancy.

It's so weak at first. I heard my wife's heartbeat which was slower. With the baby's, there's a syncopation. And that's when it started really being real. (22 weeks gestation)

One of the most powerful catalysts to the developing reality is seeing the baby on ultrasound. The view of the fetus within the womb confirms the reality of a developing child. Seeing a miniature person dispels ideas that the woman is merely ill or gaining weight.

You see that ultrasound and there is this little baby and there were these little feet going back and forth really fast and flipping and flopping in there. You know, then I was a believer. (18 weeks gestation)

The father can begin a more direct relationship with the child when he can begin to feel the baby move within his mate. He feels the new life within her abdomen and often begins to interact and "play games" with the child. It is standard by this point to have a nickname for the child. The child within the mother is recognized as a "potential baby."

It's nice now . . . actually making contact with the baby. . . You can push on its foot and it will push back. . . So it's already pretty well been accepted as a member of the family and . . . has its pet names and it's talked about as being another person. (37 weeks gestation)

Accumulating equipment and supplies for the baby and preparing the baby's space in the home also reinforce the reality of the child. These nesting tasks may be the first opportunity the father has to do something directly for the baby rather than his pregnant mate. He may be involved in rearranging the living space or moving the family to larger accommodations. All fathers were involved in acquiring and assembling baby furniture or painting the baby's room. In addition to providing a more active role for the father, nesting provides additional reminders of the child, thereby boosting reality.

It's become more real. . . the fact that we're going out and buying baby furniture and baby clothes and the fact that [my wife] is visibly pregnant. Before . . . I knew she was pregnant because she was sick. . . but still it was more theoretical from my point of view and now it's become much more real. (38 weeks gestation)

For all fathers, the child was not "really" real until after birth when they had the opportunity to meet and interact with the infant face-to-face. Seeing the infant emerge from his mate's body through vaginal or cesarean birth was a powerful experience for each father. Birth proved that this infant had been the growth within the mother's abdomen. Fathers then sought physical similarities to validate the child was theirs.

I guess my first response was it could have been anyone's. I mean, it was just a baby. It really didn't have much to do with me. . . We were looking at the baby and. . . the features . . . what looked like what. . . Unfortunately he got my nose and [my wife's] toes and it would have been much better if it had been reversed. . . It took awhile before I felt it was my baby. (postbirth)

Another significant reality boost occurs when the baby enters the father's home environment and he assumes some responsibility for the child's care. One father said reality hit when he realized this was not a "hospital loaner baby" but was there to stay permanently as a family member. The developing reality is not complete until the child is perceived as a unique human being—a functional, capable, independent, responsive and interactive person—complete with imperfections. The child became a person sometime within the first year of life.

Struggling for Recognition as a Parent: The reality of the child develops in the larger interactive context of the recognition providers. These are key members of the environment whose attitudes, actions, and interactions promote or impede the evolving father person. Societal beliefs about gender roles are evidenced through these persons. Men tend not to be perceived as parents in their own right by their mates, co-workers, friends, or family. They are viewed as helpmates or breadwinners. This lack of recognition and accompanying feelings of exclusion interfere with validation of the developing reality of the pregnancy and child, as well as taking on the new role of parent.

Subjects eagerly anticipated coparenting their children with their mates. They found it very upsetting that their mates were recognized as the "leading ladies" while they were relegated to the expendable position of "stagehand." The pervasive message was that the father's role is to support the pregnant woman and new mother.

It's always in reference to how [my wife] is doing, and I feel like I have resigned myself more to just responding to what they are asking and that is to say how [she] is doing as opposed to me and how I am doing. . . I really tried to initially go out . . . and open myself up and really share . . . but, so much of the response is, 'You've just got to stick it out. This is her time.' There is no validation of the feelings. There is no recognition. I don't feel like I should deny my feelings and deny what's going on for me. The message is clear . . . 'You need to focus on her.' I just haven't found anybody that [sic] is real understanding, like 'What is the experience like for you?' (37 weeks gestation)

The mother plays a critical role; she can bring her mate into the spotlight or keep him in the wings. The most promoting mothers seemed to share the fathers' view that gestation, parturition, and lactation were privileges rather than burdens. These mothers brought their mates into the experience by frequently and openly sharing their physical sensations and emotional responses. They also actively encouraged their mates to share the experience of becoming and being a father. One subject said his wife would sit him down and "pull" his experience out of him, for which he was very grateful. He believed she recognized they were both becoming parents, the only difference being that she was incubating and would give birth to the child. In these situations the investigator had a clear sense of *their* conception, *their* pregnancy, and *their* child as

opposed to *their* conception, *her* pregnancy, and *her* child. The mother can also mitigate exclusion of the father by others by including the father in the pregnancy and parenting experiences and actively demonstrating her recognition of him as a key player. The promoting and truly sharing mothers were few.

Fathers felt certain that health care providers viewed only mother and/or child as their client. Fathers believed their presence at prenatal or pediatric visits were perceived as cute or novel. If fathers were addressed at all, they were placed in a supportive role to their mates. They were rarely recognized or treated as parents themselves.

Family, friends, and co-workers also served as important recognition providers. Their comments and actions could provide powerful reinforcement of the reality of the pregnancy and child, or the man as a father. Often, though, these persons provided recognition of the father only as a worker or support person to his mate, rather than as a parent in his own right.

The baby was also a key recognition provider. The ability of the infant to communicate recognition of the father as a special person was powerfully supportive. Many fathers commented about their infants turning to their voice, "as if she recognizes me." As their babies grew, fathers commented on the squeals and smiles with which they were greeted. The infants had a powerful ability to help their fathers feel special, important, and competent as parents.

Plugging Away at the Role-making of Involved Fatherhood: The focal process is the man's movement toward becoming an involved parent. The developing reality of the pregnancy and child is the driving force behind paternal evolution. This process occurs within an environment of recognition providers who can catalyze or impede development through creation of a supporting or nonsupporting environment. Fathers found themselves without good models to assist them in taking on the role of active and involved parent which they strongly desired. One father clearly captured the predominant feeling.

I feel like . . . I'm just crawling through the mud. . . . There is nothing clear. . . . I'm groping. (7 months postbirth)

Most subjects perceived their own fathers as distanced and disengaged from their families as breadwinners. Though family of origin was a powerful force in their gender role socialization, most men wanted to enact parenthood differently. Turner (1962) coined the term role-making for this process of creating a new role to differentiate it from role taking or assuming more clearly defined roles. Role-making has a quality of blazing new trails.

Few men had had the opportunity to learn infant care-taking skills prior to parenthood. Men came to fatherhood with impoverished behavioral repertoires for parenting.

Not having time with him I felt a lot of frustration when I had to spend time with him. I just felt like I was incapable and I couldn't cope. That was the worst feeling that I ever had in my whole life, that I couldn't take care of my son when I had to spend time with him because I didn't know what to do. (7 weeks postbirth)

Role-making of involved fatherhood is an ongoing process of development and evolution as the man incorpo-

rates successive roles into his person. Before conception the man may have a primary identity of student or worker. American society still holds the occupational role as most salient for the male, a formidable force to move beyond. With formation and commitment to a couple relationship, the man incorporates the role of mate or husband. With conception he becomes a sperm donor and is recognized for his virility. Most frequently he is then relegated to the role of spectator as he observes the pregnancy from the sidelines. He also assumes the role of support person to his pregnant mate. With the birth of the child the man is recognized as father of the baby, analogous to sperm donor, but the product is now a child. This may be as far as the man goes in his development. The power of the recognition providers often impedes progress beyond this stage.

Actualization of involved fatherhood is achieved when the child is integrated as part of the father, the parental role being incorporated into the multiple role identity of the man. The child becomes a part of the "me" of the father, and parent becomes a salient and integral piece of the father's sense of self. However, not all men reach this developmental stage. It necessitates great commitment and perseverance on their part. Many who reach it cannot maintain the effort and return to a preceding stage such as worker, mate, or spectator. The ability to enact the role of involved father is strongly influenced by the supporting or non-supporting environment created by the recognition providers. The rewards of involved fatherhood seemed worth the effort.

It's a big thing with both of us. As soon as I get home I . . . play with him. . . . I really enjoy him. . . . He may not have come at the best possible time. . . . but he has made my life a lot fuller and richer and I hope that I can do the same for him. It's . . . the most important job I have ever had, being a father. I hope I don't blow it. (7 weeks postbirth)

Discussion

This study proposes a theory of expectant and new fatherhood. Through longitudinal data collection, the developmental nature of the experience and relationships among the core concepts became evident.

The mother's role in promoting paternal behavior and controlling the degree to which pregnancy is shared reinforced Deutscher's (1970) concept of the alliance of pregnancy. Communication and emotional sharing of the childbearing experience within the couple relationship is important to the recognition of the father. The experiences of expectant and new fathers described by Deutscher (1970) and Gurwitt (1976) were substantiated by these data. The exclusion and lack of recognition of the father as a parent reinforce May's (1982a) concept of the father as observer.

Men in this investigation wanted to be involved parents, but they did not believe they had the knowledge, skills, or support to do so. They felt alone in their experience and without resources to enact the parental role as they ideally would have chosen. Their motivation was impressive. Viewing the experience of expectant and new fatherhood through their eyes provided insight into the myriad of obstacles impeding their role enactment. Data indicated not malicious or purposeful exclusion, but societal benign

neglect. Despite a general perception of blurring of gender roles in our society, the delineation of parental role expectations is still along very traditional lines.

Nurses are the primary providers of childbirth and parent education programs and have many opportunities to interact with expanding families in a variety of settings. This substantive theory should lead to reconsideration of how providers perceive and interact with fathers. Through a better understanding of the father's experience nurses could act as key recognition providers as well as reinforcers of the reality of the pregnancy and child. Nursing therapeutics for the promotion of involved fatherhood are essential to ensure opportunities for fathers to learn child care and parenting skills.

Additional study is needed to determine the validity of the developing theory. Subjects were limited to those men who were both biological and social fathers, living with their mates and children. For this group of men this new knowledge can serve as a beginning for the development of interventions to support and promote males as they labor for relevance in their parental roles.

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