EXAMINE: RESEARCHING YOUR NURSING EDUCATION

COLLECTING THE BASIC DATA
Welcome—or welcome back—to an education in nursing. Whether you are just coming out of high school, returning to student life after working for some years, or continuing on a current educational path, you are facing new challenges and changes. By choosing to pursue nursing, you have given yourself the chance to improve your future. And nursing needs you. The growing nursing shortage means that there are many opportunities for nursing students, including students of color and men.

This book helps you fulfill your potential as a nursing major by giving you keys—ideas, strategies, and skills—that can lead to success in school, on the job, and in life. Chapter 1 starts by looking at today’s nursing students—who they are and how they’ve changed—and at the connection between a nursing education and success. You will also discover how resources can help you and how teamwork plays a role in your success. To discover what a nurse is, and will be in the future, see Figure 1.1.

In this chapter, you will explore answers to the following questions:

- What are three ways to become an RN? 6
- Who are RNs today, and what challenges do students face? 10
- What is the role of diversity in nursing? 12
- How does an education in nursing promote success? 21
- Why do nurses need to study a variety of arts and sciences? 26
- What basics should you know as you begin nursing school? 29
- How can successful intelligence help you reach your goals? 36
“Nursing is the pivotal health care profession, highly valued for its specialized knowledge, skill, and caring in improving the health status of the public and ensuring safe, effective, quality care.

The profession mirrors the diverse population it serves and provides leadership to create positive changes in health policy and delivery systems.

Individuals choose nursing as a career, and remain in the profession, because of the opportunities for personal and professional growth, supportive work environments, and compensation commensurate with roles and responsibilities.”


REAL-LIFE QUESTIONS

What can I do to prepare myself for the future?

I started my nursing education in Tokyo, Japan, which is where I come from. For a short while, I worked in a hospital there, too. Although I liked the work, I realized that, though working one-on-one with patients can be very satisfying, I wanted to do more. There are many fields of study in the nursing profession, and I wasn’t sure what to choose until I took a course in community health. From this class I discovered that I might be able to use my education to affect entire populations of people. One day I hope to help improve community health in a developing country.

I started learning English a few years ago in order to work someday as a community health nurse in the developing world. Through studying English at an English school, I got a chance to go to the United States by winning a scholarship to Elmira College. I saw this as a great chance for me to both master English and deepen my knowledge of medicine and nursing. I was sure that studying in the United States would help me to achieve my life goals.

In this branch of nursing, I would be able to involve myself in many exciting issues. Maybe I could support public policy to better serve the health care needs of developing countries. One problem that needs addressing is how to plan and implement primary health care effectively. I am also interested in helping child survival in underprivileged countries and communities. I recently read a book about child survival. Just giving medicine or food doesn’t help much, unless we focus on the context of poverty and underdevelopment. Many children are suffering from hunger.
and disease, and they are less resistant to disease because of lack of adequate nutrition. I really want to deal with such kinds of problems and help to decrease infant and under-5 mortality rates.

Global programs like WHO's "Health for All by the Year 2000" are very intriguing to me. I also think about the possibilities of improving connections between Japan and developing countries to help more people who are suffering from health problems. I know these are big dreams, but I've heard that nursing care is moving out of the hospitals and into the community—including the international community.

**PRACTICAL ANSWERS**

**You are well on your way. Just continue down the path you have chosen.**

Nurses have always played a very active role in public health, liberally applying their commitment and expertise throughout the world. Public health focuses on health promotion and prevention and involves all members of the community. Therefore, it offers the most for your investment.

Indeed, nursing has been moving out of hospitals for many decades, more so in some countries than in others. In many developing nations, where resources are scant, public health and community nursing has long been the primary mode of health care. How can you best prepare for the future? There are four keys to developing a career in nursing, as well as other professions. Education, education, education is the number-one factor. So you are headed in the right direction.

**Mentors and linkages** are the second and third keys. As an aspiring professional, you will need the support and advice of persons who are successful and well recognized in your field. They will share with you the wisdom of their experiences and guide you toward the achievement of your own goals. Good mentors will also assist you in connecting with individuals, organizations, and other resources essential to the development of your career.

To achieve your goals relating to international public health, pursue linkages through three major sectors:

- **School-to-school linkages.** Inquire at your university about institutional relationships with schools in other nations. Is this a route available to you to connect with nurses in their "sister" schools?
- **Health sector linkages.** Are your governmental health authorities able and willing to introduce you to nurses within your WHO region or with the WHO itself?
- **The world network of nurses associations.** This may be the best linkage of all. In this you are very fortunate. The Japanese Nurses Association (JNA) is the largest in the world, with connections through the International Council of Nurses to counterparts, such as the American Nurses Association, in 120 nations. The JNA is well known for its assistance to and work with other nations. The president of the JNA is a world leader in the profession.

**Focused expertise** is the fourth key to professional success. Define your specialty. What particular expertise do you want to develop and practice throughout your career? Focus! Then through education, mentors, and linkages make yourself one of the most informed, scholarly, and well-recognized authorities within your specialty. Be the best in your field.

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Margretta Madden Styles

The late Dr. Styles was the immediate past president of the International Council of Nurses in Geneva, Switzerland, at the time of this interview. A nurse scholar and leader, Styles was the recipient of seven honorary doctorates and, according to the American Nurses Association Hall of Fame, "Styles had a global impact on the profession."

Margretta Madden Styles
1930–2005
What Are Three Ways to Become an RN?

In the middle 1800s, Florence Nightingale founded formal nursing education. Nightingale’s work in the Crimean War, along with Mary Seacole, a black nurse from Jamaica, greatly affected views of health care and nursing. After making many reforms in how injured and sick British soldiers were treated, Nightingale set out to make major reforms in hospitals and nursing education. At that time, there were no formal training courses for nurses. So, along with reforms in the military system, Nightingale changed hospitals, was one of the first to keep biostatistics, instituted mandatory hand washing, and developed the first training of professional nurses. In the United States, the first nursing school associated with a university was opened in 1909 at the University of Minnesota. However, most nursing education was based in hospitals, rather than universities, until the end of World War II.

Today, there are three ways to become a registered nurse (RN): (1) by earning a bachelor’s degree in nursing (BSN), (2) by earning an associate’s degree in nursing (ADN), or (3) by obtaining a diploma. Becoming an RN means you attend a nursing program that makes you eligible to sit for the national licensing exam, or NCLEX-RN (see www.ncsbn.org for more on this exam in your state). It is passing that exam that makes you an RN—legally. In other words, you must have a license to work as an RN.

What are the advantages and disadvantages of each type of degree? This is a question that nurses have been debating since the formation of the ADN programs shortly after World War II. The advent of the community college system combined with a nursing shortage helped the ADN programs to come about. Following is a description of the three ways to become an RN.

BSN

Many professional organizations argue that nurses are better prepared to deal with the complexities of health care and to work in a variety of roles if they have a BSN. It takes at least four years to obtain this degree. Some places, such as the Veterans Administration, require that RNs have a BSN. Here is how the American Association of Colleges of Nursing (AACN) argues the point:

The BSN nurse is the only basic nursing graduate prepared to practice in all health care settings—critical care, ambulatory care, public health, and mental health—and thus has the greatest employment flexibility of any entry-level RN.

The BSN curriculum includes a broad spectrum of scientific, critical-thinking, humanistic, communication, and leadership skills, including specific courses on community health nursing not typically included in diploma or associate-degree tracks. These abilities are essential for today’s professional nurse who must be a skilled provider, designer, manager, and coordinator of care. Nurses must
make quick, sometimes life-and-death decisions; understand a patient’s treatment, symptoms, and danger signs; supervise other nursing personnel; coordinate care with other health providers; master advanced technology; guide patients through the maze of health resources in a community; and teach patients how to comply with treatment and adopt a healthy lifestyle.¹

Furthermore, research in 2003 from Linda Aiken, PhD, RN, of the University of Pennsylvania School of Nursing, showed that in hospitals with higher rates of BSN nurses, rather than ADN nurses, surgical patients had fewer deaths.² AACN also encourages programs that support two-year or associate-degree nurses in going back to school to earn a bachelor’s degree in nursing. AACN notes the following:³

Formal articulation agreements between ADN and BSN programs are making nursing education easier. Articulation helps avoid repeating course work.

- Thirty-two states have broad articulation agreements.
- Eight states mandate credit transfer between ADN and BSN programs.
- Eighteen states are developing or improving their agreements.

In 2004, according to the Bureau of Labor Statistics, there were 600 RN-to-BSN programs in the United States.⁴

- In 2004, there were 165 accelerated BSN programs. Accelerated BSN programs also are for those who have a bachelor’s or higher degree in another field. Programs last 12 to 18 months and provide the fastest route to a BSN for individuals who already hold a degree.⁵
- In 2004, there were 137 RN-to-MSN [Master's of Science in Nursing] programs. Accelerated master’s degree programs combine one year of an accelerated BSN program with two years of graduate study.⁶

ADN

The ADN degree takes two to three years. One advantage of community college programs is that they are often more easily accessible than university programs. An outstanding cardiac nurse, Judy Meyers, said, “If it wasn’t for community college I may never have become a nurse.” Judy lived in a small town in Idaho that was too far away from a university, but it did have a community college. Eventually Judy moved and earned her BSN and then a master’s degree in nursing. Today she is a professor of nursing with a PhD. Many excellent nurses have ADN degrees. Here is how the National Organization for Associate Degree Nursing (NOADN) argues the value of the degree:

Associate degree nursing (ADN) education provides a dynamic pathway for entry into registered nurse (RN) practice. It offers accessible, affordable, quality instruction to a diverse population. Initiated as a research project in response to societal needs, ADN education is continually evolving to reflect local community needs and current health care trends. ADN graduates are prepared to function in multiple health care settings, including community practice sites.
Graduates of ADN programs possess a core of nursing knowledge common to all nursing education routes. They have continuously demonstrated their competency for safe practice through NCLEX-RN pass rates. These nurses provide a stable workforce within the community. The majority of ADN graduates are adult learners who are already established as an integral part of the community in which they live. They exhibit a commitment to lifelong learning through continuing education offerings, certification credentialing, and continued formal education.7

Diploma

There are not as many diploma programs as there used to be, but they do exist. Diploma nurses focus on clinical skills in their training and for this reason graduate from their programs ready to go to work as RNs. The disadvantage is that nurses with diplomas have a difficult time advancing without a college degree. Diploma programs take two to three years to complete.

Additional Paths to Nursing Degrees

Other paths for obtaining nursing degrees are available as programs designed for those who already have their ADN and wish to obtain a BSN or MSN, and for those who have a bachelor’s degree in a non-nursing area.

RN to BSN

RN-to-BSN programs exist within most departments, schools, or colleges of nursing. Some are offered completely online, others via a video system, and many on campus. Basic college requirements must be met, but programs may transfer most of your credits from the ADN program you attended.

Accelerated Programs

If you already have a bachelor’s degree in another area, you can earn a BSN or an MSN. These programs are called accelerated, bridge, or fast-track options, and they incorporate previous education with nursing education. There is an increasing drive to offer programs via the Internet. Here is information from the AACN about accelerated programs:8

Program Basics

- Accelerated BSN programs offer the quickest route to become a registered nurse (RN) for adults who have already completed a bachelor’s or graduate degree in a non-nursing discipline.
- Fast-track baccalaureate programs take between 11 and 18 months to complete, including prerequisites.
- Fast-track master’s degree programs generally take about three years to complete.

Fast-Track Nursing Education

- Admission standards for accelerated programs are high with programs typically requiring a minimum of a 3.0 grade point average (GPA) and
a thorough prescreening process. Students enrolled in accelerated programs are encouraged not to work while in school given the rigor associated with completing degree requirements.

- Accelerated baccalaureate and master’s programs in nursing are appropriately geared to individuals who have already proven their ability to succeed at a senior college or university. Having already completed a bachelor’s degree, many second-degree students are attracted to the fast-track master’s program as the natural next step in their higher education.

- Graduates of accelerated programs are prized by nurse employers who value the many layers of skill and education these graduates bring to the workplace. Employers report that these graduates are more mature, possess strong clinical skills, and are quick studies on the job.

- AACN’s 2005 survey found that 7,829 students were enrolled in accelerated baccalaureate programs, up from 6,090 in 2004 and 4,794 students in 2003. The number of program graduates also increased with 3,769 graduates in 2005 as compared to 2,422 and 1,352 graduates in 2004 and 2003, respectively. In accelerated master’s degree nursing programs, 3,200 students were enrolled and 674 students graduated in 2005. By comparison, in 2004, there were 2,666 students enrolled and 542 graduates from these programs.

**Data on Enrollment in All Nursing Programs**

Students are enrolled in all three types of programs. The latest statistics from the National League for Nursing show the following:

- In 2005, 53% of nursing students were enrolled in ADN, 43% in BSN, and 4% in diploma programs.

- Full-time versus part-time students: In the 2004–2005 school year, 88.3% of BSN students were enrolled full-time and 11.7% part-time. For ADN students, 54.2% were enrolled full-time and 45.8% part-time.

- Applicants: In 2005, close to 350,000 students applied to nursing schools. Of those, 67% were considered qualified and 38% were accepted, 12% were placed on waiting lists, 17% were rejected, and 33% of total applicants were not considered qualified.

- Retention: After the first year of school, 72% of BSN students and 64% of ADN students remained in school.

- Ethnicity of students: From 2002 to 2003, the enrollment of minority nursing students decreased by 2%, indicating the critical need to recruit and retain students of color into nursing.

Percentage of students enrolled in colleges and in nursing schools by ethnicity:

<table>
<thead>
<tr>
<th></th>
<th>African American</th>
<th>Hispanic</th>
<th>Asian</th>
<th>American Indian</th>
</tr>
</thead>
<tbody>
<tr>
<td>College Nursing</td>
<td>12.3</td>
<td>10.5</td>
<td>6.0</td>
<td>1.0</td>
</tr>
<tr>
<td>Nursing</td>
<td>12.6</td>
<td>5.3</td>
<td>5.6</td>
<td>0.9</td>
</tr>
</tbody>
</table>
• Age of students: In 2005, 72% of BSN students were under 25 years old, whereas in the ADN program 28.5% were under 25 years old.

• Tuition and required fees: In the 2004–2005 school year, full-time nursing students in a public college or university BSN program paid close to $5,000 per year. In a private school, they paid under $20,000. Full-time ADN students in public programs paid around $2,500 per year.

Who Are RNs Today, and What Challenges Do Students Face?

To get an idea of who is going into nursing, review these facts from the AACN:

• Nurses comprise the largest single component of hospital staff, are the primary providers of hospital patient care, and deliver most of the nation’s long-term care.

• Although often working collaboratively, nursing does not “assist” medicine or other fields. Nursing operates independent of, not auxiliary to, medicine and other disciplines. Nurses’ roles range from direct patient care to case management, establishing nursing practice standards, developing quality assurance procedures, and directing complex nursing care systems.

• With more than four times as many RNs in the United States as physicians, nursing delivers an extended array of health care services, including primary and preventive care by advanced, independent nurse practitioners in such clinical areas as pediatrics, family health, women’s health, and gerontological care. Nursing’s scope also includes care by certified nurse-midwives and nurse anesthetists, as well as care in cardiac, oncology, neonatal, neurological, and obstetric/gynecological nursing and other advanced clinical specialties.

The National Survey of Registered Nurses is one of the most important sources for statistical data on RNs. The survey is published every four years. Following are interesting statistics about nursing:

• There are 2.9 million RNs in the United States.

• The average salary for a full-time RN was $57,784. The average for a nurse working in a hospital in 2007 was $60,970 (Bureau of Labor Statistics, www.bls.gov/oes, May 17, 2007).

• Degrees held by RNs:

<table>
<thead>
<tr>
<th>Degree</th>
<th>Percentage</th>
</tr>
</thead>
<tbody>
<tr>
<td>BSN</td>
<td>34.2%</td>
</tr>
<tr>
<td>ADN</td>
<td>33.7%</td>
</tr>
<tr>
<td>Diploma</td>
<td>17.5%</td>
</tr>
<tr>
<td>Master’s or doctoral degree</td>
<td>13.0%</td>
</tr>
</tbody>
</table>
• Employment settings and percentage of RNs working in them:

<table>
<thead>
<tr>
<th>Employment Setting</th>
<th>Percentage</th>
</tr>
</thead>
<tbody>
<tr>
<td>Hospitals</td>
<td>56.2%</td>
</tr>
<tr>
<td>Community or public health</td>
<td>15.0%</td>
</tr>
<tr>
<td>Ambulatory health</td>
<td>11.5%</td>
</tr>
<tr>
<td>Nursing education</td>
<td>2.6%</td>
</tr>
<tr>
<td>Nursing homes/extended care facilities</td>
<td>6.3%</td>
</tr>
<tr>
<td>Other, including occupational health, insurance claims/benefits, long-term care, and prison or jail</td>
<td>8.5%</td>
</tr>
</tbody>
</table>

• Type of position and annual average earnings (MSN is a master’s in nursing): 12

<table>
<thead>
<tr>
<th>Nursing Position</th>
<th>ADN</th>
<th>BSN</th>
<th>MSN</th>
<th>Doctorate</th>
</tr>
</thead>
<tbody>
<tr>
<td>Administrator or assistant</td>
<td>$60,442</td>
<td>$68,696</td>
<td>$92,831</td>
<td>$97,275</td>
</tr>
<tr>
<td>Nurse practitioner</td>
<td>—</td>
<td>—</td>
<td>$71,265</td>
<td>—</td>
</tr>
<tr>
<td>Staff nurse</td>
<td>$51,477</td>
<td>$54,003</td>
<td>$59,436</td>
<td>—</td>
</tr>
</tbody>
</table>

• Distribution of RNs employed in hospitals by dominant function: 13

<table>
<thead>
<tr>
<th>Dominant Function</th>
<th>Percentage</th>
</tr>
</thead>
<tbody>
<tr>
<td>Direct patient care</td>
<td>59.1%</td>
</tr>
<tr>
<td>Critical care</td>
<td>16.2%</td>
</tr>
<tr>
<td>Emergency department</td>
<td>7.8%</td>
</tr>
<tr>
<td>Administration</td>
<td>5.2%</td>
</tr>
<tr>
<td>Teaching</td>
<td>2.6%</td>
</tr>
<tr>
<td>Consultation</td>
<td>1.5%</td>
</tr>
<tr>
<td>Research</td>
<td>0.8%</td>
</tr>
<tr>
<td>Patient coordinator</td>
<td>5.7%</td>
</tr>
<tr>
<td>Other</td>
<td>1.0%</td>
</tr>
</tbody>
</table>

**Student Life: Facts and Challenges**

• Nursing students comprise more than half of all students in the health professions.

• More women enrolled in college than men earn associate, bachelor’s, and master’s degrees. In addition, the number of women receiving all types of degrees (not just nursing) has increased at a faster rate than for men. Between 2002 and 2003, 58% of bachelor’s degrees were awarded to women. 14

• In 2002–2003, 67% of degrees were earned by non-Hispanic white students; 22% went to Hispanic, African American, Native American/Pacific Islanders, and Asian American students. 15

• Between 1994–1995 and 2004–2005, prices at public colleges rose by 30%, and those at private colleges increased by 26%, after adjustment for inflation. 16
The decision to take advantage of a nursing education is in your hands. You are responsible for seeking out opportunities and weaving school into the fabric of your life. You may face some of these challenges:

- Handling the responsibilities and stress of parenting children alone, without a spouse
- Returning to school as an older student and feeling out of your element
- Learning to adjust to the cultural and communication differences in the diverse student population
- Having a physical disability that presents challenges
- Having a learning disability such as dyslexia or attention-deficit/hyperactivity disorder
- Balancing a school schedule with part-time or even full-time work
- Handling the financial commitment college requires

Your school can help you work through these and other problems if you actively seek out solutions and help from available support systems around you.

What is the Role of Diversity in Nursing?

As seen in Figure 1.2, from the most recent U.S. National Sample Survey of Registered Nurses, 88.4% of nurses were white in 2004. Yet U.S. census data show that the total U.S. population for that year was 67.9% white. To
meet the challenges of increasing diversity in the United States, nursing needs to recruit men and women of color into the profession.\textsuperscript{17} It is more encouraging to look at the latest enrollment data for nursing schools. In BSN and ADN programs 71\% to 72\% of students are white non-Hispanic, 12\% to 13\% are black, 5\% to 6\% are Asian, 4\% to 6\% are Hispanic, and 1\% are American Indian.\textsuperscript{18}

The History of Nursing and Diversity

Historically, African Americans, American Indians, and Latinos have suffered from more illness and death from diseases than non-Hispanic whites in the United States. Differences in the health of groups of people are called health disparities. The fact that minorities often receive poorer quality health care is one reason many organizations have called for changes to eliminate health disparities. One suggestion by the Institute of Medicine is to increase the diversity of health care providers.\textsuperscript{19}

Diversity as defined by the AACN includes race and ethnicity, class, gender, age, religion, sexual orientation, and disabilities.\textsuperscript{20} Beverly L. Malone, past president and only the second African American president of the American Nursing Association, views the United States as a country of many being led by the one, and she identifies “the one” as those who are primarily of European descent. Malone notes that while nursing as an institution has maintained the dominance of one group over the other, as a majority female nurses are especially aware of the “harsh realities of oppression and victimization by others.”\textsuperscript{21} Because of this, Malone reasons, nursing should be sensitive to patients from all ethnic and cultural backgrounds.

The Sullivan Report, called “Missing Persons: Minorities in Health Professions,” also makes note of the history of racism in the United States leading to health care systems and health care professions education programs that favored whites. This history is seen in the numbers: while 25\% of the U.S. population is African American, American Indian, and Hispanic, only 9\% of nurses, 6\% of doctors, and 5\% of dentists come from these groups.

Comparison of 2000 and 2004 national sample survey of percentage of registered nurses in the U.S. population

<table>
<thead>
<tr>
<th>Ethnic/Racial Group</th>
<th>RN</th>
<th>U.S.</th>
<th>RN</th>
<th>U.S.</th>
</tr>
</thead>
<tbody>
<tr>
<td>African American</td>
<td>4.9</td>
<td>12.1</td>
<td>4.6</td>
<td>12.2</td>
</tr>
<tr>
<td>Hispanic</td>
<td>2.0</td>
<td>12.5</td>
<td>1.8</td>
<td>13.7</td>
</tr>
<tr>
<td>Asian/Pacific Islander</td>
<td>3.7</td>
<td>3.7</td>
<td>3.3</td>
<td>4.1</td>
</tr>
<tr>
<td>Native American/Alaska Native</td>
<td>0.5</td>
<td>0.7</td>
<td>0.4</td>
<td>0.7</td>
</tr>
<tr>
<td>White (non-Hispanic)</td>
<td>86.6</td>
<td>69.1</td>
<td>88.4</td>
<td>67.9</td>
</tr>
</tbody>
</table>

Source: Adapted from The National Sample Survey of Registered Nurses, 2000 and 2004.
The Sullivan Report has these encouraging words about increasing the diversity of all health professions:\(^\text{22}\)

From the streets of Harlem to the barrios of East Los Angeles, the Commission saw shining examples of young students and professionals who can lead to this new era. Many share a dream of returning to their communities as physicians, dentists, and nurses to provide care for friends, neighbors, and relatives. They face huge financial obstacles, but new financing mechanisms can put a health professions education within their reach. Further reducing the debt burden will broaden access to a health professions education.

“I had incredible support that allowed me to pursue my dreams and fight to get my education,” testified Claribel Sanchez, a University of California, Berkeley, student born and raised in East Los Angeles, a neighborhood that has seen more than its share of crime and violence. “Even if I’m here on loans, I’m not letting money become an issue. It’s the only way I can get through and I’m not going to give up.”

With change, new role models will provide hope to medically underserved communities which currently see health care as a luxury, not a reality. New ways for providing quality care to those who now receive little will be discovered.

Tracy Brewington, a nursing student at Howard University, told the Commission: “I’m looking forward to going back home to Philadelphia, to the inner city, where I will have the opportunity to give back to my community. I feel like even if just one person could do something to try to eliminate these health disparities, it could be me. I’m here to make a difference.”

Nursing Needs Diversity

The Institute of Medicine says that “disparities in the health care delivered to racial and ethnic minorities are real.”\(^\text{23}\) Studies from the Center for the Health Professions indicate that increasing the diversity of health care providers can remove cultural barriers, which, in turn, can lead to a population’s improved health status.\(^\text{24}\) The Institute of Medicine calls for a systematic and sustained effort to enroll and graduate ethnic minority students prepared for health sciences careers, such as nursing.\(^\text{25}\) Likewise, in the Pew Health Professions Commission report, U.S. Senator George Mitchell is quoted as saying, “Ours is a nation of minorities. This is not just about race, and it’s not about quotas. This is about a national need for health care providers who are best qualified to meet the needs of their patients and society.”\(^\text{26}\) The Institute of Medicine and the Pew Commission unequivocally call for a solution to the harmful deficit in minority health care professionals. The American Nurses Association also actively supports a health care environment in which registered nurses reflect the diversity of the U.S. population.\(^\text{27}\) Effective recruitment and retention strategies are needed to increase men and nurses of color in the profession.\(^\text{28}\) Role models, mentors, financial aid, study skills assistance, and a welcoming environment are all ways to increase recruitment and retention of students.

The following sections describe both the history and the current status of men and various ethnic groups in nursing.
Men in Nursing

Nursing is predominantly a female profession, but that is changing. In 2004, 5.4% of RNs were men. In 2005, 12% of students in nursing schools were men. A considerable increase was made in the 1990s but has since leveled off. Surveys of college men suggest they would be more likely to choose nursing if they had more information. Men enter nursing for the same reasons women do: They want to help people, they are interested in science, they want a secure career with a decent salary, and they want a career with a great deal of opportunity.

Men tend to be drawn to more technical areas in nursing such as emergency departments, intensive care units, anesthesia, and flight nursing. Many men in nursing also become managers and administrators. However, there are men who become oncology nurses (working with cancer patients), pediatrics nurses, and work in labor and delivery. Some men have even trained to be nurse-midwives.

Attitudes toward men in nursing are changing slowly. On one hand, patients often mistake the man who is a nurse for the doctor. Coworkers may have biases about men in nursing. These biases may be seen in asking men to help with lifting and moving patients or assuming men don’t know much about labor and delivery. On the other hand, the men are perceived as ready for leadership roles, male physicians may treat male nurses with more respect, and male nurses make more money. One study in 2002 showed that men in nursing made 12% more than women.

Encouraging men to enter nursing needs to be a priority for nursing. Ways to achieve this include changing perceptions that men cannot be in a caring profession, showing images of nurses that include men, working in high schools to encourage young men to choose nursing, and changing the idea that the word nurse means a woman.

Why don’t more men go into nursing? Some say it is because of the persistent stereotype that nurses are female and that nursing is women’s work. But that was not always the case. As described in Figure 1.3, historically, nursing has been the realm of men. One group working to support and promote men in nursing is the American Assembly for Men in Nursing (www.aamn.org). The purpose of this organization is “to provide a framework for nurses as a group to meet, discuss, and influence factors which affect men as nurses.”

African American Nurses

In Black Women in White, it was noted that the racism at the end of the nineteenth century made it nearly impossible for black women to obtain nursing degrees. Yet, since their arrival in the Americas, black women provided health care to both blacks and whites. The training of black nurses was first implemented by hospital schools in the North that imposed racial quotas. The New England Hospital for Women and Children in Boston was where the first black professional nurse, Mary Eliza Mahoney, received her diploma in 1879. At that time the school admitted one black and one Jewish student each year. The philanthropists John D. Rockefeller and his wife, Laura Spelman Rockefeller, established the first black nurses’ training program in 1881 at the Atlanta Baptist Female Seminary, commonly referred to as Spelman College.
### FIGURE 1.3  A brief history of men in nursing

<table>
<thead>
<tr>
<th>Year</th>
<th>Event</th>
</tr>
</thead>
<tbody>
<tr>
<td>500 BC</td>
<td>In Ayur-Veda, the books from ancient India that discuss the prevention and care of disease, the &quot;Nurses&quot; mentioned are always male.</td>
</tr>
<tr>
<td>300 AD</td>
<td>The first five centuries of the Christian era (1–500) witnessed the rise of a religious and social movement that enabled the systematic development of organized nursing.</td>
</tr>
<tr>
<td>500 AD</td>
<td>The order of Benedictines, established in the sixth century by St. Benedict of Nursia, decreed the sick would be a chief function and duty of community life.</td>
</tr>
<tr>
<td>1000</td>
<td>Military nursing orders known as Knights Hospitallers surfaced in the eleventh century. They nursed the sick and defended the Holy Land during the Crusades.</td>
</tr>
<tr>
<td>1070</td>
<td>The Order of the Santo Spirito or Holy Ghost, established in 1070, was identified with the development of general hospitals within city walls.</td>
</tr>
<tr>
<td>1095</td>
<td>An order of men established in 1095, the Antonines (Hospital Brothers of St. Anthony), devoted themselves to sufferers of &quot;St. Anthony's Fire,&quot; probably the ergotism which caused hallucinations.</td>
</tr>
<tr>
<td>1200</td>
<td>St. Dominic also founded orders to take nursing out among the people (Dominican order founded 1206).</td>
</tr>
<tr>
<td>1182–1226</td>
<td>St. Francis of Assisi established three religious nursing orders including the Gray Friars, distinguished by gray robes with a rope girdle. This order chose to identify itself with the care of lepers and contributed to a public health movement (Franciscan order founded 1211).</td>
</tr>
<tr>
<td>1228</td>
<td>St. Louis IX was another saint whose endeavors with lepers were well known. Louis personally tended to the sick and devoted his life to humane treatment for all individuals (inheriting throne of France 1226).</td>
</tr>
<tr>
<td>1244</td>
<td>The Brotherhood of Misericordia was started in Florence in 1244. Founded primarily as a volunteer ambulance society, they became known as the &quot;Masked Brotherhood.&quot; This name arose from the members' belief that their contributions would gain spiritual reward only if they prevented themselves from being recognized by others.</td>
</tr>
<tr>
<td>1300</td>
<td>The Alexian Brothers were organized in the 1300s to provide nursing care for the victims of the Black Plague in the Netherlands.</td>
</tr>
<tr>
<td>1358</td>
<td>The Brothers of Mercy (also known as the Brothers of St. John of God or the Order of the Felipenfratelli) was founded in Spain by John Ciudad. They were mendicants who devoted themselves to nursing, hospital work, the distribution of medicines, the tender care of the mentally ill and abandoned children, and the visitation of the sick at home.</td>
</tr>
<tr>
<td>1590</td>
<td>In the sixteenth century St. Camillus founded the Nursing Order of Ministers of the Sick who pledged themselves to the work of nursing doing hospital work and caring for those stricken with the plague in Rome.</td>
</tr>
<tr>
<td>1800</td>
<td>Large numbers of men and women volunteered as nurses during the American Civil War. Walt Whitman served as a volunteer Civil War nurse in Washington, D.C. He described his experiences in a collection of poems.</td>
</tr>
<tr>
<td>1866</td>
<td>In 1866 the School for Male Nurses was established in connection with the New York City Training School for Nurses on Blackwell's (Welfare) Island. In 1888 the Mills College of Nursing was established in Bellevue Hospital in New York, the first nursing college for men.</td>
</tr>
<tr>
<td>1928</td>
<td>The Congregation of the Alexian Brothers established two schools for men nurses in their hospitals in Chicago (1928) and St. Louis (1928) which provided all types of care for men and boys.</td>
</tr>
<tr>
<td>1940</td>
<td>According to the U.S. Census, the number of men in nursing in 1940 was approximately 2% of the total number of graduate and student nurses.</td>
</tr>
<tr>
<td>1955</td>
<td>Although the U.S. government badly needed nurses during WWII, it refused to allow males to receive equal opportunity in the military. Although female nurses received full commission rank in U.S. military service in 1947, the first men were not commissioned as nurses until 1955.</td>
</tr>
<tr>
<td>1960</td>
<td>Philip E. Day became the first male to be elected president of the state nurses' association in 1960.</td>
</tr>
<tr>
<td>1966</td>
<td>A congressional bill authorizing appointment of male nurses to the regular forces of the Air Force, Army, and Navy Nurse Corps was signed by President Lyndon Johnson in 1966. Men constituted 22% of the Army's total nursing population.</td>
</tr>
<tr>
<td>1974</td>
<td>Male nurses face the sex stereotyping and cultural pressures that define nursing as a woman's profession.</td>
</tr>
<tr>
<td>1974</td>
<td>The American Assembly for Men in Nursing was established in 1974.</td>
</tr>
</tbody>
</table>

Efforts by the black community to train black nurses faced financial problems and discrimination. In 1868, the Harlem Dispensary was founded to care for the area’s poor. In 1887, it became the Harlem Hospital, and in 1910, when Harlem went from a majority white to majority black neighborhood, concerns were raised by whites about white nurses caring for black patients. In 1923, the Harlem Hospital School of Nursing was established to educate black women nurses. Yet administrators and physicians were still white, and black female students and staff encountered problems. It was not until 1945 that Alida Cooley Daily became the first black director of the Harlem school.

In the 1920s, there were approximately 3,000 black nurses. Petra Pinn, one of these nurses, graduated from the Tuskegee Institute training school in 1906 and became the head nurse of the Hale Infirmary in Montgomery, Alabama. By the 1920s, she was superintendent and manager of the Benevolent Society Hospital in Greenville, South Carolina. Nursing provided Pinn “a route to personal prestige and administrative autonomy, and a means to serve her people.” Although white nurses did not recognize black nurses as colleagues, within black communities they were respected and admired and “next to the teacher, they were the highest ideal of black womanhood.”

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How I became a nurse and the paths I have taken during my career is a question I often ponder. I have had an extremely rewarding experience; something I will always be thankful for. I did not enter nursing as the result of a conscious decision to become a nurse. I started college with the intent of getting a degree in biology and pre-med then entering an MD/PhD program so that I could conduct biomedical research.

I was an undergrad at the University of New Mexico in Albuquerque, NM. I was in the biology program and assisting the research efforts of the department chair. I spent a summer in Mexico studying the zonation of tapeworms in the spiral gut of stingrays; believe it or not it was exciting work. I also volunteered at the medical school as a lab tech in a cardiology research lab. I became even more interested in research and medicine during these experiences and enjoyed working with gifted individuals and intriguing tools. Over time I transitioned into the lab manager position and thought my career path was set. I was going to become a researcher with a medical/clinical background. I would think nothing of spending days and nights in the lab conducting research, developing my computer skills, working with flow cytometers, measuring intracellular calcium using immunofluorescence and confocal laser microscopes . . . it was captivating! I felt good about contributing to the body of knowledge that health care providers used in treating patients.

By the mid-1930s, 25 years after the first baccalaureate program was established for white students, only one black college, Florida A&M in Tallahassee, offered a bachelor’s degree in nursing. Black nurses worked together for change. For example, the National Association of Colored Graduate Nurses (NACGN), founded in 1908, fought for and won the right for black nurses to serve in the army and the navy in World War II.

Black nurses were excluded from state exams needed for licensing as registered nurses. Ludie C. Andrews, who graduated from Spelman College in 1906, spent 10 years working to allow black nurses the right to take the Georgia State Board licensing exam. Previous to her victory in 1920, the state of Georgia issued licenses to black nurses based on different standards and procedures than for white nurses. Black nurses were also denied membership in the American Nurses Association (ANA). Two black nurses were instrumental in changing the ANA: Estelle Massey Riddle Osborne and Mabel Keaton Staupers. Osborne was the first black nurse in the United States to earn a master’s degree and the first black instructor at New York University and at the Harlem Hospital School of Nursing. She also served as the president of the NACGN from 1934 to 1939. Staupers, born in 1890 in Barbados, West Indies, and raised in New York City, had led efforts to integrate the Army Nurse Corps during World War II.

In 1939, Osborne was invited to speak at the ANA meeting in New Orleans about the status of black nurses, but due to Jim Crow laws, was unable to enter the St. Charles hotel, where the meeting took place. The ANA’s intolerance was noted as incongruent when those who “desire to insure basic and human rights of all people have not been able to impress hotel managers and other less enlightened individuals with the importance of this principle.” Integration of the ANA finally occurred in 1948, and Estelle Massey Riddle Osborne was elected to the board of directors. In 1951, the NACGN was dissolved because Staupers felt that black nurses, now integrated into the ANA, held the leadership positions they needed.

Large societal changes in addition to work within black communities enabled black nurses to make policy changes that have resulted in “the advance of all minorities within nursing.” But racism and marginalization of minority nurses has not yet been eradicated.

The National Black Nurses Association (NBNA) was formed in 1971 with their first leader, Dr. Lauranne Sams, former dean and professor of nursing at Tuskegee University’s School of Nursing, Tuskegee, Alabama, carrying on the work of advancing professional black nursing. The NBNA is active today and has several professional publications. The organization has approximately 150,000 members from around the world, including the United States, eastern Caribbean, and Africa. The NBNA mission is to provide a forum for collective action by nurses of color to “investigate, define and determine what the health care needs of African Americans are and to implement change to make available to African Americans and other minorities health care commensurate with that of the larger society.”

Asian and Pacific Islander Nurses

People who identify as Asian American and Pacific Islander are counted together for the U.S. census, but they represent a great variety of countries,
cultures, and experiences. Many from these groups have been in the United States longer than white immigrant groups, such as Germans or Irish. Asian and Pacific Islander nurses comprise 3.3% of all RNs. Even though Asian and Pacific Islanders rank high socioeconomically in the United States, they are not well represented in leadership roles in nursing and in educational systems.

Asians and Pacific Islanders suffer health disparities with higher rates of lung cancers, heart disease, hepatitis B, and tuberculosis. To alleviate health disparities, nurses who are culturally competent and who represent all groups in the United States are increasingly needed. Even though the Registered Nurses Sample Survey (2004) showed that the 3.3% of nurses who are Asian/Pacific Islander is close to the percentage in the U.S. population, 4.1%, data are not necessarily accurate because people from many subgroups are combined into one large ethnic group.

The Asian American/Pacific Islander Nurses Association (AAPINA) was established in 1991. The goals of AAPINA include identifying and supporting the health care of Asian Pacific Islanders (API) internationally, taking action on issues such as registration and policies affecting the health of APIs, working with others in health care, and identifying and supporting professional nursing issues of concern to API nurses.

**Hispanic and Latino Nurses**

The Hispanic population is the fastest growing ethnic minority group in the United States, and Hispanics represent many countries, including Mexico, Puerto Rico, Cuba, and the countries in Central and South America. The number of Hispanics in the United States is increasing, but Hispanics suffer many health disparities. Much more cultural competence is needed within nursing to help improve Hispanic and minority health. Furthermore, the highest educational degree most Hispanic nurses obtain is the associate’s degree, and as with other nurses of color, this education means that Hispanic nurses may be less likely to be in leadership positions. There have been few Hispanic directors, or deans, in the history of nursing schools in the United States.

Historically and culturally, barriers to attaining leadership roles outside the home may be attributed to Hispanic culture that encourages men to work outside the home and women to work as housewives. Gender roles may also explain why more Hispanic women than men go into nursing. To increase the number of Hispanic nurses, recruitment and retention problems must be addressed from a Hispanic perspective. Education may be presented not only as a personal benefit to the individual student but as a family benefit.

The National Association of Hispanic Nurses (NAHN) was started in 1975 by Laura Murillo Rohde, RN, PhD, ND, FAAN. It includes chapters in the District of Columbia and Puerto Rico. NAHN began as a committee formed at an American Nurses Association conference as the Spanish-Speaking/Spanish-Surnamed Nurses’ Caucus. One year later, it was re-named the National Association of Spanish-Speaking/Spanish-Surnamed Nurses. Finally, in 1979, it was renamed the National Association of Hispanic Nurses. Here are its mission and philosophy, as stated on its website (http://thehispanicnurses.org):
MISSION
Promoting Hispanic nurses to improve the health of our communities.

PHILOSOPHY
NAHN strives to serve the nursing and health care delivery needs of the Hispanic community and the professional needs of Hispanic nurses. NAHN is designed and committed to work toward improvement of the quality of health and nursing care for Hispanic consumers and toward providing equal access to educational, professional, and economic opportunities for Hispanic nurses.

Native American and Alaska Native Nurses
The first school of nursing for Native American students was located on the Navajo reservation in northeastern Arizona at Ganado. The school was started in the fall of 1930 and closed in 1952. The school has since reopened and now offers a bachelor’s degree in nursing with the support of the University of Northern Arizona. Ganado is one of a few schools of nursing located on a reservation; the others are the Salish Kootenai College in Montana and Sissetton Waphten College and Oglala Lakota College, both located in South Dakota.

Lillian Tom-Orme, a Navajo, past president of the National Alaska Native American Indian Nurses Association (NANAINA), is a policy analyst and professor at the University of Utah. Responding to changes in health care systems and to the health needs of Native Americans, Tom-Orme noted that nursing could help restore the balance and harmony that is important to Indian nations by having Indian nurses provide care for Indian communities. Tom-Orme proposed that Indian nurses partner with other nurses and health care professionals while retaining the values of caring, spirituality, and “the core of all that we do as American Indian nurses.”

Increasing the number of Native American nurses is not just a matter of increasing educational opportunities but includes the need to increase understanding of the challenges Native American nurses face. Native American nurses often value and practice traditional holistic nursing. Integrating traditional values with the culture of nursing is needed.

Role models have been identified by Native American nurses as fundamental in their decisions to become nurses. One Navajo nurse educated at Georgetown University in Washington, D.C., said that her reason for becoming a nurse was her grandmother and the hospice nurse who cared for her grandmother when she had cancer. Another nurse from the Fond du Lac reservation said she was encouraged by her mother, who was a nurse’s aide, to become an RN. The first Hopi nurse told interviewers that she became a nurse, despite barriers such as her fear of evil spirits, catching illnesses, and learning white man’s ways, because of a nurse in her local clinic who served as her role model.

There is a long tradition of Native American women becoming medical practitioners. In the early nineteenth century, graduation lists from black colleges show that Native American women attended the colleges and became nurses. An Omaha Indian woman, Susan La Fesche, was one of the first Native Americans to receive formal training as a physician and became a leader for her tribe in legislative actions to promote health and to recognize tribal land rights. Susie Walking Bear Yellowtail, a Crow Indian woman, is considered
one of the first Native American nurses. Yellowtail graduated from a nursing program in Massachusetts in 1921, but she eventually returned to her Montana reservation to promote health and become a national leader in Indian health policy.

The National Alaska Native American Indian Nurses Association (NANAINA) was started after the American Indian Nurses Association and later, the American Indian Alaska Native Nurses Association. The organization holds annual conferences, publishes a newsletter, and provides scholarships to members.

The goals of NANAINA from their website (www.nanainanurses.org/About/index.php) include:

• Continuing to support Alaska Native and American Indian students, nurses, and allied health professionals through the development of leadership skills and continuing education
• Continuing to advocate for the improvement of health care provided to American Indian and Alaska Native consumers
• Working at increasing culturally competent health care provided to Alaska Native and American Indian consumers

International Students

Many students come to the United States to study nursing, and many RNs come to work. In 2004, 3.5% of U.S. RNs were from countries other than the United States. Nurses from the Philippines (50.2% of foreign-educated RNs) and Canada (20.2%) make up the majority of foreign-born nurses. RNs also come from the United Kingdom (8.4%), Nigeria (2.3%), Ireland (1.5%), India (1.3%), Hong Kong (1.2%), Jamaica (1.1%), Israel (1.0%), and South Korea (1.0%). Twelve percent of RNs are from 47 other countries. The majority of foreign-born RNs have a BSN degree.77

If you are an international student considering nursing, see U.S. Nursing Schools for International Students at the All Nursing Schools website (www.allnursingschools.com/faqs/international.php). Here you will find questions and answers useful to your admissions process.

A journey of a thousand miles must begin with a single step.

LAO-TZU

How Does an Education in Nursing Promote Success?

Nurses make up the majority of the nation’s health care workers, with 2.9 million registered nurses. Yet misinformation from news stories, television, and other media continues to confuse the public with inaccurate images of
Face Your Fears

Use practical skills to conquer a fear of yours that stems from the experience of starting college. Use a separate sheet of paper to record your responses.

First, describe your fear—and be specific.

Now, list three small activities that get you closer to working through that fear. If you don’t want to start a project because you fear failure, for example, you can begin by reading a book on the subject, brainstorming what you already know about it, or making up a project schedule.

1. _____________________________________________________________________
2. _____________________________________________________________________
3. _____________________________________________________________________

Commit yourself to one step that you will take within the next two days. State it and include the time and date you will begin and how much time you will spend.

What reward will you give yourself for taking this step?

Did taking this step help ease your fear? If so, describe how.

Affirm that you have taken that first step and are on the way to success by signing your name here and writing the date:

Name ______________________________________ Date _____________________

nurses. As you plan an education in nursing, consider the following facts about nurses from the AACN:78

- The U.S. Bureau of Labor Statistics projects that employment for registered nurses will grow faster than the average for all occupations through 2014.
- There are more than four times as many RNs in the United States as physicians.
- Most health care services involve some form of care by nurses. Although approximately 56.2% of all employed RNs work in hospitals, many are employed in a wide range of other settings, including private practices, public health agencies, primary care clinics, home health care, outpatient surgical centers, health maintenance organizations, nursing school–operated nursing centers, insurance and managed care companies, nursing homes, schools, mental health agencies, hospices, the military, and industry. Other nurses work in careers such as college
educators or as researchers.

- Nurses can be certified nurse-midwives (CNMs) and nurse anesthetists (CRNAs), as well as certified in cardiac, oncology, neonatal, neurological, or obstetric/gynecological nursing, and other advanced practice clinical specialties.

**Shortage of Nurses**

The aging population in the U.S. is both growing in numbers and living longer. This means there is a demand for nurses with knowledge of gerontology (taking care of elders), long-term care, and taking care of people with chronic illnesses. Demand has intensified for more BSN nurses with skills in critical thinking, case management, and health promotion skills across a variety of inpatient and outpatient settings. There is also a need for nurses to be culturally competent.

Pointing out the emergence of a disastrous nursing shortage, the AACN projects the following statistics:79

- Some 1.2 million new nurses will be needed by 2014.
- Currently, there are 118,000 vacancies, a vacancy rate of 8.5%.
- An estimated 55% of nurses working now plan to retire by 2020.

A 2006 Fact Sheet from the AACN states many reasons for the nursing shortage, including the aging workforce and a demand for nurses greater than the supply:80

- The supply of new nurses has decreased even though applications were up 9.5%.
- The supply of nurses is adversely impacted by faculty shortages in nursing schools, making it difficult to increase the number of students nationwide.
- A decrease in the number of new nurses means the average age of nurses is increasing. An aging workforce means more nurses will be retiring soon, increasing the shortage. In other words, there are not enough new nurses coming into the profession to replace, much less increase, the ones who will be leaving. The average age for a nurse in 2004 (the latest statistics) was 46.8 years old. That is up from the average age in 2000 of 45.2 years.

This shortage increases stress on nurses because there are fewer nurses to take care of patients. Linda Aiken has studied the effect of the shortage on nurses. She and her colleagues found that nurses reported more job dissatisfaction and emotional exhaustion when they were responsible for more patients than they can safely care for. She concluded that “failure to retain nurses contributes to avoidable patient deaths.”81
Salaries in Nursing

An education in nursing prepares you for a career that is rewarding in many ways, including financially.

Consider the May 2005 salary data from the Bureau of Labor Statistics. The average annual wage of workers in the most common health care occupations were as follows:

- $25,380 for pharmacy technicians
- $36,210 for licensed practical nurses (LPNs)
- $56,880 for RNs
- $88,650 for pharmacists
- $140,370 for family and general practitioners
- $45,950 for dieticians and nutritionists
- $22,200 for nurses’ aides

Learn from a Mistake

Analyze what happened when you made a mistake in order to avoid the same mistake next time. Use a separate sheet of paper to record your responses.

Describe an academic situation— you didn’t study enough for a test, you didn’t complete an assignment on time, you didn’t listen carefully enough to a lecture and missed important information—where you made a mistake. What happened? What were the consequences of the mistake? What, if anything, did you learn from your mistake that you will use in similar situations?

Understanding is joyous.

CARL SAGAN
The Role of Graduate School

The health system’s increasing demand for front-line primary care providers and the accelerating trends toward prevention and cost efficiency are driving the nation’s need for nurse practitioners, certified nurse-midwives, and other registered nurses with advanced practice skills.

Advanced Practice Nursing

Here are a few facts about advanced practice nurses (those with master’s or doctoral degrees in a clinical specialty):

- Nurse practitioners (NPs) and midwives earn an average of $75,905 per year. Clinical nurse specialists averaged $75,294 per year in 2000.83
- For the highest paying specialty area, nurse anesthetists (CRNAs), the average salary (according to Salary.com) was $164,172.84
  Approximately 46% of the nation’s 36,000 nurse anesthetists and student nurse anesthetists are men, compared with about 8% in the nursing profession as a whole. In 2001, the CRNA professional association’s most recent figure, the average salary was $113,000.85
- Mounting studies show that the quality of care by NPs and midwives is equal to, and at times better than, comparable services by physicians.86

See Figure 1.4 for a percentage breakdown of advanced practice nurses by role.

![Figure 1.4](image)

Registered nurses prepared for advanced practices, March 2004

Why Do Nurses Need to Study a Variety of Arts and Sciences?

You probably already know one reason why a good science background is important: To keep up with rapid advances that affect daily life. With newspaper headlines announcing “Scientists urge more prudent use of antibiotics” and magazine articles discussing robotics, DNA, and the “geometry lesson of the marching ants,” it takes only basic observation to see that life is rapidly changing owing to advances in science and technology. If you are 18 years old and just beginning college, think back 10 years. What kind of computer did you have? What kind of treatments were available for HIV? If you are older and returning to school, the contrast is even more vivid. Do you remember a time when you didn’t own a DVD or a cell phone? Did you always have e-mail? Do you remember a time when no one talked about greenhouse gases or global warming? And almost everyone can remember a time when complex genetic engineering, cloning, and stem cell research were not occurring.

Even if you do not pursue a nursing career, you need a knowledge of science and math to be an active citizen and a responsible family member. For instance, you must be able to understand the ethical and practical implications of genetic testing and therapy, spread of viruses, and disappearing wetlands, rain forests, and other natural habitats. Can you understand the research presented in the articles you read? Can you discern reality from sensationalism? If you read about a new study on exercise, engines, or equilibrium, can you put it to use?

All of us are called on to make political, social, and personal decisions regarding everything from health care to finances, from international foreign aid to environmental protection, and from genetically engineered tomatoes to gene therapy for a host of diseases. The decision to major in nursing is a good one and one that will be useful to you in many ways. Science and math knowledge and skills teach you critical thinking, creativity, teamwork, and all-around good work habits; each one is essential to any kind of career you pursue.

Studying the humanities and arts gives you the needed knowledge to think in different ways and to understand new perspectives. For instance, think about studying art. Learning about the evolution of painting from romantic realism to impressionism can help you understand how social changes affect human thinking and actions. If this seems far removed from nursing, consider health practices. In the past, people relied completely on physicians to tell them what to do. With today’s technology and increased access to information, people are assuming responsibility for their health. It is common now for people to work with their care providers to come to solutions rather than accept what someone else tells them. Technological and social changes affect human behavior, and the health care system is evolving to meet these needs. Nursing encompasses the study of human beings and their response to health and illness. That response is based on many things, such as culture, social learning, politics, and history. The more you learn in college the better prepared you’ll be to work with all kinds of people.

HABIT
A preference for a particular action that you do a certain way, and often on a regular basis or at certain times.

CHAPTER 1
A major purpose of going to college is to broaden your worldview by studying subjects both within and outside a major or career goal. The purpose of this book is to help you learn to succeed in nursing, whether you remain in nursing your entire life or decide in your senior year to become an art major. And if you do opt out of nursing, your science background will help you with painting (chemistry), sculpting (physics and geometry), ceramics (chemistry and physics), or designing jewelry (metallurgy, physics, and anatomy). Remember, your goals may change as you go through college, but what you learn in the physical and life sciences, math, and humanities will help no matter what you decide.

**How Education, Not Just Nursing Education, Promotes Life Success**

If your work in college only helped you succeed in the classroom, the benefit of your learning wouldn’t last beyond graduation day. However, learning is a tool for life, and a college education is designed to serve you far beyond the classroom. Here are a few important “life success goals” that college can help you achieve:

*Life Success Goal: Increased Employability and Earning Potential.* Getting a degree greatly increases your chances of finding and keeping a high-level, well-paying job. College graduates earn, on average, around $20,000 more per year than those with a high school diploma (see Figure 1.5). Furthermore, the unemployment rate for college graduates is about half that of high school graduates (see Figure 1.6).

**FIGURE 1.5** More education is likely to mean more income

Median annual income of persons with income 25 years old and over, by gender and highest level of education, 2000.

![Bar chart showing the median annual income by gender and highest level of education.](chart)

Life Success Goal: Preparation for Career Success. Your course work will give you the knowledge and hands-on skills you need to achieve your career goals. It will also expose you to a variety of careers related to your major, many of which you may not have even heard of. Completing college will open career doors that are closed to those without a degree.

Life Success Goal: Smart Personal Health Choices. The more educated you are, the more likely you are to take care of your physical and mental health. A college education prepares you with health-related information that you will use over your lifetime, helping you to practice wellness through positive actions and to avoid practices with the potential to harm.

Life Success Goal: Active Community Involvement and an Appreciation of Different Cultures. Going to college prepares you to understand complex political, economic, and social forces that affect you and others. This understanding is the basis for good citizenship and encourages community involvement. Your education also exposes you to the ways in which people and cultures are different and how these differences affect world affairs. Thinking about these big-picture goals should help you begin to brainstorm, in more detail, what you want out of college. What courses do you want to take? What kind of schedule do you want? What degree or certificate are you shooting for? Think about academic excellence and whether honors and awards are important goals. If you have a particular career in mind, then consider the degrees and experience it may require. Finally, consider personal growth, and think about the importance of developing friendships with people who will motivate and inspire you.
In Chinese writing, this character has two meanings: one is “chaos”; the other is “opportunity.” The character communicates the belief that every challenging, chaotic, demanding situation in life also presents an opportunity. By responding to challenges in a positive and active way, you can discover the opportunity that lies within the chaos.

Let this concept reassure you as you begin college. You may feel that you are going through a time of chaos and change. Remember that no matter how difficult the obstacles, you have the ability to persevere. You can create opportunities for yourself to learn, grow, and improve.

What Basics Should You Know as You Begin Nursing School?

No matter what kind of nursing school program you have begun, one of the first steps in creating your own success is learning what your school expects of you—and what you have a right to expect in return as a consumer of higher education. This section will lead you through some practical information that will help you get off to a good start.

What Your College Expects of You

If you are clear on what it means to be a college student before classes start, you will minimize surprises that may be obstacles later on. What is expected of you may be different from anything you encountered in high school or in other educational settings.

Specific expectations involve understanding curriculum and graduation requirements, registering for classes, pursuing academic excellence, following school procedures, getting involved in extracurricular activities, and mastering the college’s computer system. Do your best to understand all these areas and, if you need it, ask for help—from instructors, administrators, advisers, mentors, experienced classmates, and family members.

Additional resources to assist you include your college catalog and student handbook. Your college catalog contains a wealth of information. It may give general school policies such as admissions requirements, the registration process, and withdrawal procedures. It may list the range of subjects you may study. It may outline instructional programs, detailing core requirements as well as requirements for various majors, degrees, and certificates. It may also list administrative personnel as well as faculty and staff for each department. The college catalog is an important resource in planning your academic career. When you have a question, consult the catalog first before you spend time and energy looking elsewhere.

Your student handbook describes important policies such as how to add or drop a class, what the grading system means, campus rules, drug and alcohol policies, what kinds of records your school keeps, and safety tips. Keep your student handbook where you can find it easily, in your study area at home or someplace safe at school. The information it provides can save you a lot of trouble when you need to find out about a resource or service. For example, if you call for locations and hours before you visit a particular office, you’ll avoid the frustration of dropping by when the office is closed.

Your student handbook also looks beyond specific courses to the big picture, helping you to navigate student life. In it you will find some or all of the following, and maybe even more: information on available housing (for on-campus residents) and on parking and driving (for commuters); overviews of the support offices for students, such as academic advising, counseling, career planning and placement, student health, disabled student services, child care, financial aid, and individual centers for academic subject areas such as writing or math; descriptions of special-interest clubs; and details about library and computer services. It may also list hours, locations, phone numbers, and addresses for all offices, clubs, and organizations.

Exploring Your Curriculum and Graduation Requirements

Use your college catalog and website to explore your course requirements, and then complete the following:

• What are your course requirements for graduation?
• What are the requirements to major in nursing? List, on a separate page if necessary, the courses in the order they must be taken.

RESEARCHING YOUR NURSING EDUCATION
CHAPTER 1

What grade point average must you maintain to remain in good standing at your college and to major in your area of interest? Identify two study-related activities you will start in the next month to help ensure that you will achieve that GPA.

GPA:
1. _____________________________________
2. _____________________________________

UNDERSTAND CURRICULUM AND GRADUATION REQUIREMENTS

Every college has degree requirements stated in the catalog and website. Among the requirements you may encounter are:

- Number of credits needed to graduate, including credits in major and minor fields
- Curriculum requirements, including specific course requirements
- Departmental major requirements, including the cumulative average needed for acceptance as a major in the department

Among the nursing degrees granted by two-year and four-year colleges are bachelor of science in nursing and associate's degree in nursing.

CHOOSE AND REGISTER FOR CLASSES

Your course selections define what you will learn and who will teach you. Course registration can be both exciting and challenging, especially the first time. Scan the college catalog and website and consider these factors as you make your selections:

- Core/general requirements for graduation
- Your major or minor
- Electives that sound interesting, even if they are out of your field

Once you decide on courses, but before you register, create a schedule that shows daily class times. If the first class meets at 8 A.M., ask yourself if you will be at your best at that early hour. Create one or more backup schedules in case courses or sections you want fill up before you register. Show your ideas to your adviser for comments and approval.

Actual course registration varies from school to school. Registration may take place through your school’s computer network, via an automated phone system, or in the school gym or student union. When you register, you may be asked to pay tuition and other fees. If you receive financial aid, make sure that checks from all aid sources have arrived at the college before registration.

PURSUE ACADEMIC EXCELLENCE

Pursuing academic excellence means doing your very best in every course. You can accomplish this through a series of small but important steps that lead you to success:

- Read all assigned text material ahead of time.
- Attend every class with a positive attitude.
- Arrive on time.
- Complete assignments on schedule.
- Listen attentively, take notes, and participate in discussions.
- Study for exams.
- Seek help if you need it.

When you receive grades, remember that they reflect your work, not your self-worth. A grade of D or F does not diminish you as a person but rather tells you that your efforts or products are below what the instructor expects. Similarly, an A does not inflate your value as a person but recognizes the high quality of your academic performance.

Most schools use grading systems with numerical grades or equivalent letter grades (see Figure 1.7). Generally, the highest course grade is an A, or 4.0, and the lowest is an F, or 0.0. In every course, you earn a certain number of college credits, called semester hours. For example, Biology 101 may be worth three hours, and Student Success may be worth one hour. These numbers generally refer to the number of hours the course

---

**FIGURE 1.7**

<table>
<thead>
<tr>
<th>Letter Grade</th>
<th>A</th>
<th>A−</th>
<th>B+</th>
<th>B</th>
<th>B−</th>
<th>C+</th>
<th>C</th>
<th>C−</th>
<th>D+</th>
<th>D</th>
<th>F</th>
</tr>
</thead>
<tbody>
<tr>
<td>Numerical Grade</td>
<td>4.0</td>
<td>3.7</td>
<td>3.3</td>
<td>3.0</td>
<td>2.7</td>
<td>2.3</td>
<td>2.0</td>
<td>1.7</td>
<td>1.3</td>
<td>1.0</td>
<td>0.0</td>
</tr>
</tbody>
</table>
meets per week. When you multiply each numerical course grade by the number of hours the course is worth, take the average of all these numbers, and divide by the total number of semester hours you are taking, you obtain your grade point average, or GPA.

Learn the minimum GPA needed to remain in good standing and to be accepted and continue in your program. At some schools, for example, courses with grades below 2.0 may not be counted toward your major requirement. Figure 1.8 shows you how to calculate your GPA.

Inherent in the pursuit of academic excellence is honest, ethical behavior. Your school’s academic integrity policy defines the behavioral standards that are expected of you in your studies and in your relationships with faculty, administrators, and fellow students.

**Follow School Procedures**

Your college has rules and regulations, found in the college handbook and on the website, for all students to follow. Among the most common procedures are:

**Adding or Dropping a Class.** This should be done within the first few days of the semester if you find that a course is not right for you or there are better choices. Late-semester unexcused withdrawals (almost any withdrawal after a predetermined date) receive a failing grade. However, course withdrawals that are approved for medical problems, a death in the family, or other special circumstances have no impact on your GPA.

**Transferring Schools or Moving from a Two-Year to a Four-Year College.** If you want a change, check out the degree requirements of the new college and complete an application. If you are working toward an ADN and intend to transfer to a four-year school, be sure to take the courses required for admission to that school. In addition, be sure all your courses are transferable, which means they will be counted toward your degree at the four-year school. At most community colleges, advisers are available to help students through this process.

**Taking a Leave of Absence.** There are many reasons students take a leave of absence for a semester or a year and then return. You may want time away from academics to think through your long-term goals, or you may be needed for a family emergency. If you are in good standing at your college, leave is generally granted. However, students with academic or disciplinary problems who take a leave may have to reapply for admission afterward.

**Getting Involved**

Extracurricular activities give you a chance to meet people who share your interests and to develop teamwork and leadership skills. These activities also give you the chance to develop skills that may be

---

**FIGURE 1.8 How to calculate your GPA**

<table>
<thead>
<tr>
<th>COURSE</th>
<th>SEMESTER HOURS</th>
<th>GRADE</th>
<th>GRADE POINTS</th>
</tr>
</thead>
<tbody>
<tr>
<td>Basic Chemistry</td>
<td>4</td>
<td>C</td>
<td>4 credits × 2 points = 8</td>
</tr>
<tr>
<td>Anatomy and Physiology</td>
<td>3</td>
<td>B+</td>
<td>3 credits × 3.3 points = 9.9</td>
</tr>
<tr>
<td>Spanish I</td>
<td>3</td>
<td>B−</td>
<td>3 credits × 2.7 points = 8.1</td>
</tr>
<tr>
<td>Psychology 101</td>
<td>3</td>
<td>C+</td>
<td>3 credits × 2.3 points = 6.9</td>
</tr>
<tr>
<td>University 101</td>
<td>2</td>
<td>A−</td>
<td>2 credits × 3.7 points = 7.4</td>
</tr>
</tbody>
</table>

Total semester hours: 15  
Total grade points for semester: 40.3  
GPA for semester (total grade points divided by semester hours): 40.3 divided by 15 = 2.69  
Letter equivalent grade: C+/B−
important in your career. In addition, being connected to friends and a supportive network of people is one of the main reasons people stay in school.

Some entering students take on so many activities that they become overwhelmed. Pace yourself the first year. You can always add more activities later. As you seek the right balance, consider this: Studies have shown that students who join organizations tend to persist in their educational goals more than those who don’t branch out.87

**Master Your College’s Computer System**

A large part of the communication and work that you do in college involves the computer. Here are just some examples:

- Registering for classes
- Accessing a course syllabus and required-readings list
- E-mailing instructors for assignment clarification; receiving e-mail responses
- Tapping into library databases and the Internet for research
- Completing assignments and writing papers
- Submitting papers via e-mail to instructors
- Creating spreadsheets for math and science
- E-mailing classmates to schedule group/team meetings
- Receiving schoolwide announcements via the college computer network
- Taking interactive quizzes

In most colleges, it is no longer possible to manage without a computer—your own, one borrowed from school, or one available in computer labs. Most dorm rooms are now wired for computers, which gives students access to the campus network. Here are some suggestions for using your computer effectively:

- **Get trained.** Start by getting help to connect to your college network. Then, take training classes to master word processing, data and spreadsheets, and the Internet. If you encounter technical problems, talk to technicians in the computer lab.
- **Use computers to find information.** If you have specific questions about your school, check the college website. You may find the information or the e-mail address of a contact person.
- **Be a safe and cautious user because computers sometimes fail.** To safeguard your work, create regular backups by saving your work periodically onto the hard drive, CD, or flash drive. In addition, use an antivirus program.
- **Use computers for appropriate tasks.** During study time, try to stay away from Internet surfing and computer games. Set time limits at other times to keep your academic focus.
- **Protect yourself from trouble.** Avoid revealing personal information, including financial data, to strangers you meet on the Internet.

**A Word About E-Mail**

You may be required to communicate with your instructor, submit assignments, and even take exams via e-mail. Following are suggestions for improving your communication:

- **Use your college’s e-mail system.** Register for an e-mail account at your school as soon as possible. You’ll need this connection to receive schoolwide e-mails and possibly to access the college library.
- **Use effective writing techniques.** To make the best impression—especially when writing to an instructor—take the time to find the right words. Organize your thoughts and use correct spelling, punctuation, and grammar. To make your e-mails easy to read, get to the point in the first paragraph, use short paragraphs, use headings to divide long e-mails into digestible sections, and use lists. Always proofread before hitting “send.”
- **Be careful of miscommunication.** Try to be diplomatic and pleasant, and think before you respond to upsetting messages. If you write back too quickly, you may be sorry later.
- **Rein in social e-mailing.** Prioritize your e-mailing. Respond to the most important and time-sensitive messages first. Save personal e-mail for when you have downtime.
No matter what school or extracurricular activity you are involved in, you will find people who are eager to help you succeed.

**Connecting with People and Support Services**

Instructors, administrators, advisers, and a range of support staff are available to help you. This overview will help you identify and connect to the people and services around you. As you read, keep in mind that the names of offices and personnel titles may vary, and remember that some colleges do not offer every resource.

**Teaching and Learning Take Center Stage**

The primary mission of most colleges and universities is teaching—communicating to students the knowledge and thinking skills they need to succeed in school and beyond. Responding as an active, engaged learner is your role and responsibility as a student.

In every course, you’ll meet one—or sometimes several— instructors. Although the term *instructor* is used in this text, teachers have official titles that show their rank. Instructors with the highest status are full professors. Moving down from there are associate professors, assistant professors, lecturers, instructors, and assistant instructors, more commonly known as teaching assistants or TAs. Adjuncts may teach several courses but are not official staff members.

**Administrators Provide Support**

The administrative staff enables your college—and the student body—to function. Large universities may be divided into schools with separate administrative structures and staffs—for example, a School of Nursing or a School of Medicine. Each school normally has its own dean, and each department within the school has a chairperson, an instructor who heads the department.

One of the most important administrative offices for students is the Office of the Dean of Student Affairs, which, in many colleges, is the center for student services. Staff members there can answer your questions or direct you to others who can help.

**Administrative Offices Dealing with Tuition Issues and Registration**

Among the first administrative offices you will encounter are those involved with tuition payments, financial aid, and registration.

- The *bursar’s office* (also called the office of finance, the accounting office, or cashiering services) issues bills for tuition and room and board and collects payments from students and financial aid sources.

- The *financial aid office* helps students apply for financial aid and understand the eligibility requirements of different federal, state, and private programs.

- The * registrar’s office* handles course registration, sends grades at the end of the semester, and compiles your official transcript, which is a comprehensive record of your courses and grades. Graduate schools require a copy of your official transcript before considering you for admission, as do many employers before considering you for a job.

**Student-Centered Services**

A host of services helps students succeed in college and deal with problems that arise. Here are some you may find useful:

- Center for Human Rights
- Multicultural Affairs Office
- Office of Equity and Diversity

Many schools have offices staffed by specialists who can help you. For instance, if you suspect discrimination or any type of harassment is occurring, seek out the staff in these offices. Such offices are also responsible for recruitment and retention of diverse students and increasing cultural opportunities and awareness on the campus and in communities. They help assure that different people have a voice in school decision making.

**Academic Enhancement Centers, Including Reading, Writing, Math, and Study-Skills Centers.** These centers offer consultations and tutoring to help students improve skills at all levels.

**Learning Centers and Writing Labs.** Staffed for all students, these centers can be especially useful for students who are learning English. Use their services to help you!

**Academic Computer Center.** Most schools have computer facilities that are open every day, usually staffed by technicians who can assist with computer-related problems. Many facilities also offer training workshops.

**Student Housing or Commuter Affairs Office.** Residential colleges provide on-campus housing for undergraduate students, with many schools requiring lower classmen to live on campus. The housing office handles room and roommate placement, establishes behavioral standards, and deals with special needs (for example, an allergic student’s need for a room air conditioner) and problems. Schools with commuting students may have transportation and parking programs.
Health Services. Health services generally include sick care, prescriptions for common medicines, routine diagnostic tests, vaccinations, and first aid. All clinics are affiliated with nearby hospitals for emergency care. In addition, psychological counseling is sometimes offered through health services, or you may find it at a separate facility or via the college website. Although services are available, you have to seek them out. Many colleges require proof of health insurance at the time of registration.

Career Services. This office helps students find part-time and full-time jobs, as well as summer jobs and internships. Career offices have reference files on careers and employers. They also help students learn to write résumés and cover letters and search job sites on the Internet. Career offices often invite employers to interview students on campus and hold career fairs to introduce companies and organizations. Summer internships and jobs are snapped up quickly, so check the office early and often to improve your chances.

Services for Students with Disabilities. Colleges must provide students with disabilities full access to facilities and programs. For students with documented disabilities, federal law requires that assistance be provided in the form of appropriate accommodations and aids. These range from interpreters for the hearing impaired to ramps for students in wheelchairs. If you have a disability, visit this office to learn what is offered. Remember, also, that this office is your advocate if you encounter problems. For specifics on learning disabilities, see Chapter 4.

Veterans’ Affairs. The Office of Veterans’ Affairs provides veterans with various services, including academic and personal counseling and current benefit status, which may affect tuition waivers.

Student Organizations

Many colleges and universities have student organizations where you can meet and get support from students with similar interests. For example:

- Multicultural Student Center
- American Indian Students
- Asian American Students
- Latino Students
- International Students
- Math Club
- Choir
- Student Government
- Foreign Language Clubs
- Intramural Sports Clubs

Please make use of these groups. Many students have benefited from meeting people, finding mentors and tutors, and just getting connected with other students. You need support!

Learn About Nursing Student Organizations

Depending on your school, there will be nursing student organization chapters on or off campus. The National Student Nurses’ Association (NSNA) may be contacted to find your local chapter. But the simplest method for locating student nurse organizations is to contact your school’s nursing adviser. The adviser will know of, or help you contact, other students involved in your local group. These groups will support you in finding and getting into a nursing program of your choice; provide information on all phases of being a student nurse; and, finally, be a great resource for finding jobs after you graduate. They also provide opportunities for experiences in leadership within your school.

NSNA is a membership organization representing 45,000 students in 50 states, the District of Columbia, Guam, Puerto Rico, and the U.S. Virgin Islands.

NSNA Mission Statement

- Bring together and mentor students preparing for initial licensure as registered nurses, as well as those enrolled in baccalaureate completion programs.
- Convey the standards and ethics of the nursing profession.
- Promote development of the skills that students will need as responsible and accountable members of the nursing profession.
- Advocate for high-quality, evidence-based, affordable, and accessible health care.
- Advocate for and contribute to advances in nursing education.
- Develop nursing students who are prepared to lead the profession in the future.

Understanding and Applying for Financial Aid

Financing your education—alone or with the help of your family—involves gathering financial knowledge and making financial decisions. Visit your school’s financial aid office in person or on the Internet, research the available options and decide what works best, and then apply early. The
types of aid available are student loans, grants, and scholarships.

**Student Loans.** As the recipient of a student loan, you are responsible for paying back the amount you borrow, plus interest, according to a predetermined payment schedule. The amount you borrow is known as the **loan principal,** and interest is the fee that you pay for the privilege of using money that belongs to someone else. Loan payments usually begin after graduation, after a grace period of between six months and a year, and generally last no more than 10 years.

The federal government administers or oversees most student loans. To receive aid from any federal program, you must be a citizen or eligible noncitizen and be enrolled in a program that meets government requirements. Individual states may differ in their aid programs, so check with the financial aid office for details. Figure 1.9 describes the main student loan programs to which you can apply.

**Grants and Scholarships.** Unlike student loans, neither grants nor scholarships require repayment. Grants, funded by federal, state, or local governments as well as private organizations, are awarded to students who show financial need. Figure 1.10 describes federal grant programs. In contrast, scholarships are given for various abilities and talents. They may reward academic achievement, exceptional abilities in sports or the arts, citizenship, or leadership. Scholarships are sponsored by federal agencies and private organizations.

**Researching Financial Aid.** Start digging at your financial aid office and visit your library, bookstore, and the Internet. Guides to funding sources catalog thousands of opportunities.

Additional information about federal grants and loans is available in the current version (updated yearly) of *The Student Guide to Financial Aid.* This publication can be found at your school's financial aid office, or you can request it by mail or phone (1-800-433-3243). The publication is also available online at [http://studentaid.ed.gov/students/publications/student_guide/index.html](http://studentaid.ed.gov/students/publications/student_guide/index.html).

You can find the Free Application for Federal Student Aid (FAFSA) form at your library, at the Federal Student Aid Information Center, through your college's financial aid office or website, or via the U.S. Department of Education's website at [www.ed.gov/finaid.html](http://www.ed.gov/finaid.html).

If you are receiving aid from your college, follow all the rules and regulations, including meeting application deadlines and remaining in academic good standing. In most cases, you will have to reapply for aid every year. Even if you did not receive a grant or scholarship as a freshman, you may be eligible as a sophomore, junior, or senior. These opportunities often are based on grades and campus leadership, and they may be given by individual college departments.

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### Figure 1.9

**Get the details on federal student loan programs**

<table>
<thead>
<tr>
<th>LOAN</th>
<th>DESCRIPTION</th>
</tr>
</thead>
<tbody>
<tr>
<td>Perkins</td>
<td>Low, fixed rate of interest. Available to those with exceptional financial need (determined by a government formula). Issued by schools from their allotment of federal funds. Grace period of up to nine months after graduation before repayment, in monthly installments, must begin.</td>
</tr>
<tr>
<td>Stafford</td>
<td>Available to students enrolled at least half-time. Exceptional need not required, although students who prove need can qualify for a subsidized Stafford loan (the government pays interest until repayment begins). Two types of Staffords: the direct loan comes from federal funds, and the FFEL (Federal Family Education Loan) comes from a bank or credit union. Repayment begins six months after you graduate, leave school, or drop below half-time enrollment.</td>
</tr>
<tr>
<td>PLUS</td>
<td>Available to students enrolled at least half-time and claimed as dependents by their parents. Parents must undergo a credit check to be eligible, or may be sponsored through a relative or friend who passes the check. Loan comes from government or a bank or credit union. Sponsor must begin repayment 60 days after receiving the last loan payment.</td>
</tr>
</tbody>
</table>
Learn More About the Financial Aid Process

You’ll find detailed information about the financial aid application process in your college catalog, on the college website, and in federal publications and websites mentioned here. Use these resources to complete the following:

- List the deadlines to submit FAFSA applications during the next year:

<table>
<thead>
<tr>
<th>Term/Semester</th>
<th>FAFSA Filing Date</th>
</tr>
</thead>
<tbody>
<tr>
<td>Fall 20__</td>
<td></td>
</tr>
<tr>
<td>Spring 20__</td>
<td></td>
</tr>
<tr>
<td>Summer 20__</td>
<td></td>
</tr>
</tbody>
</table>

- Endowed scholarships may be available through your college. Find out about two scholarships for which you are eligible and describe them here:
  1. ______________________________________
  2. ______________________________________

- Make a commitment to take three actions in the coming year to apply for these scholarships. Describe these actions in the space below:
  1. ______________________________________
  2. ______________________________________
  3. ______________________________________

How Can Successful Intelligence Help You Achieve Your Goals?

In the view of Tufts University dean and professor Robert J. Sternberg, intelligence is not a fixed quantity; people have the capacity to increase intelligence as they learn and grow. Successful intelligence better predicts life success than any IQ test because it focuses on actions—what you do to achieve your goals—instead of just on recall and analysis.

Everyone knows people who fit the conventional definition of “smart.” They score well on tests and get good grades. In contrast, other students have a hard time making the grade but are seen as “offbeat,” “creative,” or “street smart.”

Successful intelligence has three parts or abilities: **Analytical thinking**, **creative thinking**, and **practical thinking**.

- **Analytical thinking**—commonly known as critical thinking—involves analyzing and evaluating information, often to work through a problem or decision. Analytical thinking is largely responsible for school success and is recognized and measured through traditional testing methods.

- **Creative thinking** involves generating new and different ideas and approaches
to problems, and, often, viewing the world in ways that disregard convention.

- **Practical thinking** means putting what you’ve learned into action to solve a problem or make a decision. Practical thinking enables you to accomplish goals despite real-world obstacles.

Here are two examples that illustrate how this works.

**Successful Intelligence in a Study Group—Reaching for the Goal of Helping Each Other Learn**

- **Analyze** the concepts you must learn, including how they relate to what you already know.

- **Create** humorous memory games to help you remember key concepts.

- **Think practically** about who in the group does what best, and assign tasks according to what you discover.

**Successful Intelligence in Reaching for the Goal of Becoming a Nurse**

- **Analyze** your strengths and weaknesses in your college courses. Then analyze the support systems in your college that can help with your weaker course(s) by looking in the catalog, online, or speaking to an adviser or professor. You could start your analysis by going to see someone in academic services. Then, based on your analysis of which option of support works best for you, say a chemistry tutor, proceed to get the help you need.

- **Create** a plan for getting the grade point average you know you need to get into nursing school. Then create the motivation for your plan by talking to nurses in the nursing school advising office or to other nurses you know. This will help you re-create your motivation to get into nursing school.

- **Think practically** about getting into nursing school by talking with students and instructors in the nursing school or college, reviewing course requirements for admission, and interviewing nurses in practice areas, such as community health or the Emergency Department, that interest you.

This text is designed to help you build the analytical, creative, and practical thinking skills that will help you succeed as a nursing student and later on in the health force workplace. In-chapter Get Analytical, Get Creative, and Get Practical exercises help you build your skills in the context of each chapter. At the end of the chapter, the Successful Intelligence: Think, Create, Apply exercise has you put all three skills to work together. With analytical, creative, and practical skills, you can move ahead toward success.

You are beginning the journey of your college education and lifelong learning. The work you do in this course will help you achieve your goals in your studies and in your personal life and career. Robert J. Sternberg, the originator of the concept of successful intelligence, said that those who achieve success “find their path and then pursue it, realizing that there will be obstacles along the way and that surmounting these obstacles is part of their challenge.”

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Nourish yourself with love of truth, goodness, righteousness, with reverence and admiration for wisdom, beauty, order, wherever such attributes are made manifest.

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FLORENCE NIGHTINGALE, 1852

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SUCCESSFUL INTELLIGENCE

Think, Create, Apply

Evaluating Internet sites. You will be using the Internet frequently at school and in nursing. This exercise is intended to introduce you to one of the many excellent nursing sites as well as sites that can help you evaluate Internet resources.

Step 1. Get together with a group of students and go to your library or computer lab.

Step 2. Once on the Internet go to a nursing site. To find one, do a search, say on Google.com, or use a link provided by your school's nursing department or library.

Step 3. Bookmark your nursing site, or open a second window, and go to one of these evaluation sites:

http://www.lib.nmsu.edu/instruction/evalcrit.html
http://library.albany.edu/usered/eval/evalweb/

Step 4. Apply the basic criteria for evaluating a site to the nursing site you found.

Step 5. What can you say about the validity and usefulness of your site based on the evaluation criteria?

Step 6. What can you do if any of the sites you visited are no longer functioning? How can you find a new site?

TEAM BUILDING

Collaborative Solutions

Skills Analysis, or “I’ll never forget the time . . .”

One method for discovering what skills and important interests you have is to tell a story from your life. Start thinking of a time you did something that was fascinating, significant, or in
any way particularly memorable. It doesn’t have to be anything that seems connected to nursing. Begin with the statement: “I’ll never forget the time I . . .” and fill in the rest. You can tell another person your story. After you have told your stories, ask yourself the following questions:

- What was so important to you about this event?
- What underlying feelings and thoughts were associated with it?
- What skills, such as observation, reaction, communication, caution, or humor, did you use?

Write down the answers to these questions, and explore ways they might be connected to a health care field of study such as nursing.

**WRITING**

**Discovery Through Journaling**

Record your thoughts on a separate piece of paper or in a journal.

**Reflection.** Writing a journal requires a high level of reflection that goes beyond a “Dear diary” approach. Reflection is an essential element of nursing and critical thinking. The ability to observe yourself and your thoughts and feelings is a valuable step toward learning to observe the world around you. Observation is one of the most important skills in nursing. Thinking about your thoughts, feelings, and the events that occur each day will assist you in developing an observant mind as well as sharpen your imagination and creativity. All of this will help you to understand and work in nursing.

Start the journal process by writing a detailed description of your environment. You can go into the backyard, into the kitchen, or onto your front porch. Take as long as you need to do this exercise.

Minimum: 10 minutes of continuous writing; maximum: several days, if that helps you get all the details as precise as possible. (If you need help, consider the following question as a starting point: What do you see, smell, hear, feel?)

**CAREER PORTFOLIO**

**Plan for Success**

**Career Analysis, or “My three top careers would be . . .”** This exercise can help loosen up your brain and get your thoughts going (often referred to as brainstorming).

1. Begin by making a list of all your favorite ideas for work.
   a. Where do you see yourself working?
   b. Who do you see yourself working with?
   c. What kind of work are you doing?
2. List what you would consider to be your top three jobs incorporating all of the things you said in number 1.
3. Write the name of one person you can think of in a nursing career. If you can't think of anyone, write down someone you think could help you find such a person, for instance, a mentor, a parent, a reference librarian, or a teacher.

4. Find out how to contact this person using either a phone book or an Internet search. Many people in nursing work for universities, so you can often find a way to contact them through the school’s website. If the person you have chosen is well known, use a search engine.

5. Call or e-mail the person, and set up an appointment to meet in person (or via e-mail, if that is more convenient for him or her).

6. Ask the person the following questions and add some of your own:
   - What is the most interesting part of your work? The least interesting?
   - If I wanted to pursue this area, what advice would you give?
   - What skills should I be working on in school?
   - How can I get more information?

Nursing is the protection, promotion, and optimization of health and abilities, prevention of illness and injury, alleviation of suffering through the diagnosis and treatment of human response, and advocacy in the care of individuals, families, communities, and populations.

American Nurses Association definition of nursing (www.ana.org)

Suggested Readings


Internet Resources

Student Center: www.studentcenter.org
Student.Com—College Life Online: www.student.com
Prentice Hall's Student Success Supersite—Student Union: www.prenhall.com/success/StudentUn/index.html


Endnotes


5Ibid.

6Ibid.


13Ibid.


15Ibid.

16Ibid.


18Ibid.


22The Sullivan Commission, “Missing Persons: Minorities in Health Professions,” in A Report of


13Ibid.

14Ibid.

15Ibid.

16Ibid.

17Ibid., p. 62.

18Ibid.

19Ibid.

20Ibid.

21Ibid., p. 131.

22Ibid.


25Ibid.


27Ibid.


30Ibid.


32Ibid.


34S. Torres and H. M. Castillo, “Bridging Cultures: Hispanics/Latinos and Nursing,” in Current

Ibid.


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