

Nursing Education in Peril

June: the time of year for graduations and planning for summer relaxation and reinvigoration. It is also the time of year when new nursing students are admitted to the school of their choice—or not. In the school where I teach, we receive more than three applications for every seat. Many students, with high GPAs and perhaps lifelong dreams of being nurses, are rejected. I receive many phone calls and sometimes office visits from prospective nursing students, who often are accompanied by a parent, spouse, or child. Their pleas for admission into the school are heartrending. Criteria for admission are university policy and not subject to exception by me or anyone else, so there is little I can do but listen. I am always struck by their determination to be nurses, willing to do almost anything to fulfill their goal. This story is typical in most nursing schools—at a time when we are experiencing yet another severe nursing shortage.

However, we also are experiencing another type of nursing shortage: that of qualified nursing faculty. One of the primary reasons a school has to limit the students it admits is because there are insufficient faculty to teach them. Faculty are growing older, with the average age of 51.5 years in baccalaureate and graduate programs (Tanner, 2006). A huge wave of faculty retirements is expected, and the number of nurses in graduate programs is insufficient to keep up with the expected demand.

Why are more nurses not choosing nursing education as a career path? One reason is money. Faculty salaries are almost ridiculous in many schools. In practice, I earned about \$20,000 more than I do in academia. However, I also

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worked 12 months a year, 5 days a week, and about 10 hours a day. When teaching at the college level, many faculty are off all summer, a time that allows them to do research, expand their knowledge base in a subject area, attend conferences, and rest. Some faculty have 12-month contracts, with significantly higher salaries, in schools that run extensive summer sessions or calendar year programs. How much I look forward to having a few months to catch up on my research activities, to write more, and to think about new strategies for teaching while strolling along a beach. I do not have to tell you that those opportunities are few and far behind in practice.

Another problem may be the nature of teaching nursing. Clinical instruction has changed little since I was an undergraduate; it is hospital based, doing repetitive tasks and putting in the hours. However, there is an increasing amount of research and discussion in nursing education circles about changing clinical instruction. Sister Rosemary Donley (2005), a person whom I regard as one of the greatest thinkers in nursing, recently authored an article on challenges for nursing in the 21st century. She noted that nurse leaders need to inform nurse educators that the health delivery system has changed and clinical instruction should not be hospital based when most care is delivered in the community. Nurses must be knowl-

edge workers, with skill in information literacy. Use of simulation, such as standardized patients and computer-based simulations, is being integrated into some curricula. Technology is exploding in education, including the use of PDAs at the bedside or in the lab as well as in online learning. Things are changing, and I have not felt more enthused and excited about nursing education in a very long time.

So why not think about nursing education for your next role? Take a look at the *Journal of Nursing Education* or the National League for Nursing's *Nursing Education Perspectives* to see what educators are discussing. Graduate programs in nursing education exist at the master's, post-master's, and doctoral levels. It is tremendously rewarding to work with aspiring nurses, to challenge yourself on the best way to explain something so that students understand and remember it, and to inspire them. Not everyone is up to the challenge. Perhaps you are?

References

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- Tanner, C. (2006). The next transformation: Clinical education. *Journal of Nursing Education,* 45, 99-100.

