

Amanda Patterson

Dr. Guler

English 150: Writing and Research

14 November 2014

Struggles with a Career in Nursing

Nurses are vital members of the healthcare industry. The nursing career makes up a major part of employment in the United States at around 2.6 million jobs (“Nursing Now”). If the hospital were a chair then the nurses would make up the legs, and the seat would symbolize the doctors (Davis). Without the nurses there to comfort and educate the patients about their conditions and the doctors’ responsibilities, our nation would have an inadequate healthcare system. However, within this system, there are certain flaws that affect how nurses work. The problems are not just related to their work environment once they become professionals but also the education they receive. Due to the huge impact that the nursing career has on the overall healthcare system, the complications within the field need to be rectified.

A huge issue causing problems within the nursing field is the struggle to find adequate nursing faculty (Nardi 317). These programs tend to suffer with these shortages and leads to many qualified applicants being turned away from nursing programs. The number of qualified applicants who were turned away from a nursing school was 75, 587. This means that the acceptance rate of nursing schools is 39.5 percent (Rosseter). Each nursing program can only take a certain number of incoming students due to the size of the school, the budget, the number of faculty, and the number of spots allowed in the clinical positions of hospitals. These factors make nursing programs very competitive and force the schools to turn many away. Many students, whose dreams were to become a nurse, are sadly shot down to these low numbers of

accepted students. One way to solve the low staffing of nursing faculty is by offering larger benefits to current nurses for returning to school, and gaining a higher education in masters and doctorate degrees (“Budget Cuts, et.”). Benefits could include salary increases or greater opportunities for nurses at work. By adding more nurses into the field with higher degrees in nursing, many problems can be solved within the field and within the education system of nurses.

The education of future nursing students has advanced significantly since the beginnings of the career. There are multiple degrees that one can obtain to become a nurse. First, one can become a nurse through a diploma program at a local hospital based nursing school. Another is an Associate Degree in Nursing, which requires two-years of schooling at a community college. Lastly, a Bachelor of Science degree in nursing that is a four-year program at a university or college. The Bachelor’s degree is more appealing to future employers due to the fact that it sets the stage for a graduate education (Amos). There are two different styles of baccalaureate programs and either one begins nurses in their actual nursing classes when they are sophomore or juniors. The Nursing Program at Longwood University is a four-year program where students begin their nursing classes as sophomores. A requirement for nursing students at all universities is that they must maintain a minimum GPA in order to continue on in the program. For example, Longwood University’s nursing program requires a minimum GPA of a 2.75 and students must receive a grade of a C or higher in prerequisite classes before they start nursing classes (“Program Progression”). Baccalaureate nursing programs are difficult and strenuous; so that when students graduate then they will be prepared for the steadily changing setting in the healthcare industry (Amos).

Nursing programs across the globe have changed drastically these past fifty years due to the increase in technology and the advancements in the healthcare system; however, the education of nurses has not been transformed. Nursing education is all about the educational content and teacher focus. The current and prospective nursing students are very diverse, so the present teaching styles of nursing faculty needs to adapt to fit the educational needs of these students. There are more ethnically and racially different people as well as more men within the field. With these different people entering the nursing field, the education needs to allow flexibility within the education (Cowen 75). The Institute of Medicine has recommended numerous suggestions for the adjustments within the education of health professionals. They want the educators to focus on “providing patient-centered care,” meaning that the patient comes first. Secondly they recommend, “working with interdisciplinary teams,” so being a team player. They want people who can work with others to generate solutions and an efficient workplace. Another focus during the education aspect of the career is “employing evidence based practice,” meaning that they want the educators to teach students to make decisions based on research and chosen according to specific norms. Next educators should focus on “applying quality improvement methods,” showing that the healthcare industry wants people who can evaluate one’s work and can boost their performance. Lastly, “making use of informatics,” meaning that healthcare personnel should be able to access previous knowledge and use it in their practice (75-76). The healthcare industry wants to be more efficient and in order to do, so it starts with the education of future employees.

The nursing field is growing in diversity. There is an increase in male nurses as well as nurses from foreign countries (Cowen 623). This growing diversity within the field is great because then the nurses have a better ability to relate to the patients they are caring for. However,

with this increase there also comes an increase in discrimination. There tend to be more common types of discrimination by sex and sexual harassment. The United States census shows that male nurses used to represent 2.7 percent of registered nurses in 1970, and now men represent 9.6 percent of registered nurses in 2011 (United States). This gain in the nursing career is an asset, and has caused a decrease in sexual harassment. Male nurses used to experience some harassment from patients as well as coworkers because men are not considered people who nurture; however, there has not been as much of this harassment since the increase of men in the workplace. There is still a presence of sexual harassment between physicians and all types of nurses as well as tension within the workplace due to inability to work together. Many physicians act rudely towards people on a lower pay grades than themselves through humiliating them or making them seem incompetent. Physicians become upset when nurses call to ask questions about medication for patients when they are off duty. These tensions lead to issues within the workplace and compromise the well being of the patient (Cowen 626). Lori Edwards believes that certain physicians are better than others and that difference lies in the idea that doctors who take the time to teach are better. These problems need to be alleviated, so that the hospital can run as efficiently as possible.

The nursing career is highly dominated with females, and this has additional implications to consider regarding how nurses work in the field. Women tend to take extra time off from work due to their family and personal lives. This extra time off coincides with another issue, which is paid leave. The Family Medical Leave Act states that, “an employee can take up to twelve weeks of paid leave per year for the following reasons: birth of a child, adoption, or foster placement of a child, serious health condition of the employee, and serious health condition of a family member” (Cowen 625). Many nurses need to take extra leave if they are pregnant or if they have

a family. Lori Edwards does not feel pressure from employers when she takes leave, but puts the pressure on herself because she feels bad about abandoning her coworkers. She does not like leaving her coworkers “shorthanded.” Also, she believes that most problems within the nursing field are stress related and the stress is usually self-imposed.

Many people within the healthcare industry always talk about the nursing shortage in the field. The nursing shortage is mainly due to the number of veteran nurses still in the field. Many of the veteran nurses have continued to remain in the field and are putting off their retirement due to the economy, thus, causing multiple entry-level nurses to be out of work and unable to continue to contribute to the aging of the national population (Ramachandran). The reports show the number of middle-aged nurses in the workforce is increasing each year (Department of Health and Human Services). This number has increased due to many people choosing nursing as a second career option. Numerous people believe that nursing would be an excellent career choice after already choosing a career (Nardi 318). So, many of the current nurses only pursue the nursing career for twenty years of their life before retirement, but the industry needs nurses that are willing to give forty years. The healthcare industry is expected to grow each year and the world must meet this growth with additional staffing of hospitals, nursing homes, physicians offices and other places. With these constant demands of patient care, the United States has predicted a shortage of over eight hundred thousand nurses by the year 2020 (Spann). The problem with the fight over veteran nurses and entry-level nurses is only one of the numerous problems that compensate for the nursing shortage across the globe.

Another cause for the nursing shortage is the higher degrees that nurses strive to achieve. Most nurses enter the field with higher degrees like associates, bachelors, masters, and doctoral degrees. Some nurses entering the field with higher degrees tend to have their skills not utilized

to the maximum ability that they could be. Nurses want to be as efficient as possible and since their skills are not used fully, they choose to leave the nursing field (Howell). I am certain that more hospitals have gained experience dealing with nurses with higher degrees because it has become more prominent throughout the years.

Additionally, other factors contributing to the global nursing shortage are education, the misuse of nurses with higher degrees, and the need for higher education. The shortage will always come back to the education of nurses and how there are shortages within the nursing education field. In order to fulfill the shortage of nurses then the nursing schools need more faculty and an expanded budget so that they can accept more qualified nursing candidates. If we can accomplish this goal of expanding nursing schools so that the number of qualified students decreases from 75, 587, then we can decrease the shortage (Rosseter). The second factor of the misuse of nurses with higher degrees is a huge loss for the industry. These nurses continued their education, so that they would be more efficient within the industry. Once they begin working though, then their skills are not utilized to the best ability, therefore they leave their job and move into a management position (Howell). This adds to the shortage because it is more losses for the nursing field. Finally, more nurses are encouraged to continue the education by specializing or gaining a masters or doctorate degree. By pursuing higher education, they are removed from the industry for a few years and adding to the shortage of nurses. The factors influencing the nursing shortage are good factors as well as bad ones. We need to find a way to balance these, so that the maximum amount of needed and qualified nurses can be in the field at once thus relieving the nursing shortage.

Patient care is the number one priority for registered nurses. The well being of the patient is vital in the overall personality of the hospital. Three quarters of nurses recognize that their

quality of work life, patient care, and the amount of time spent with patients are inhibited by the nursing shortage (Buerhaus 77-78). This overall inability to carry out job on all aspects causes nurses to feel overly stressed during and after work. Lori Edwards, the Mechanical Circulatory Support Coordinator of the Heart Transplant Department at INOVA Fairfax Hospital, states, “Stress comes with the job and feels that her work is never done.” Also, Mrs. Edwards does not feel as if she has experienced any effects of the nursing shortage. Stress has always been considered a hazard in anyone’s work especially nursing (Jennings). I believe that stress has been and always will be in the nursing workplace and nurses have to learn how to work within the demanding field.

The nursing field has a great impact on the healthcare industry. In order for the healthcare industry to resolve its problems then we must first start with fixing the troubles within the nursing career. Most problems within the field are stress-related, the shortage, and others are education based. Once the nurses are taught how to deal with the amount of stress that comes with the responsibilities of being a nurse, then the problems within the field will decrease. In addition, I believe the nursing shortage is more prevalent in certain areas of the world. In areas that are more rural, than the nursing shortage is more visible, but in areas like where Lori Edwards works then there tends to be more nurses in those areas. Also, if we can give incentives to current nurses to achieve higher degrees in nursing, and offer them reason to enter the education of future nurses part of the nursing field ergo the education side of nursing can be fixed. Nurses are a vital part of our community and they are greatly needed to offer universal healthcare.

Bibliography

- Amos, Linda K. "Baccalaureate Nursing Programs." *American Association of Colleges of Nursing: Advancing Higher Education in Nursing*. American Association of Colleges of Nursing, n.d. Web. 21 Oct. 2014.
<<http://www.aacn.nche.edu/education-resources/bsn-article>>.
- "Budget Cuts, Faculty Shortages Limit Number of Nursing Students." *Human Capital Blog*. Robert Wood Johnson Foundation, 6 Mar. 2012. Web. 21 Oct. 2014.
<<http://www.rwjf.org/en/blogs/human-capital-blog/2012/03/budget-cuts-faculty-shortages-limit-number-of-nursing-students.html>>.
- Buerhaus, Peter I., et al. "Trends in the Experiences of Hospital-Employed Registered Nurses: Results from Three National Surveys." *Nursing Economic\$* 25.2 (2007): 69-79. Print.
- Cowen, Perle Slavik, and Sue Moorhead. *Current Issues in Nursing*. 8th ed. St. Louis: Mosby Elsevier, 2011. Print.
- Davis, Sheila. "Why Nurses Are the Unsung Heroes of Global Health." *Huffington Post*. N.p., 20 Nov. 2012. Web. 15 Oct. 2014.
<http://www.huffingtonpost.com/sheila-davis-dnp-anpbc-faan/international-nurses-week_b_1499802.html>.
- Department of Health & Human Services, Health Resources and Services Administration. "The Registered Nurse Population: Findings from the 2008 National Sample Survey of Registered Nurses." *Initiative on the Future of Nursing*. Robert Wood Johnson Foundation, n.d. Web. 15 Oct. 2014.
<<http://thefutureofnursing.org/resource/detail/registered-nurse-population-findings-2008-national-sample-survey-registered-nurse>>.
- Edwards, Lori G. E-mail interview. 29 Oct. 2014.
- Gantz, Nancy Rollins, et al. "Global Nurse Leader Perspectives on Health Systems and Workforce Challenges." *Journal of Nursing Management* 20.4 (2012): 433-43. Print.
- Howell, Whitney L. J. "C-Suite Struggles to Find a Fit for Nurses with Higher Degrees." *H&HN: Hospitals & Health Networks* 85.10 (2011): 16. Print.
- Jennings, Bonnie M. "Work Stress and Burnout Among Nurses: Role of the Work Environment and Working Conditions." *Patient Safety and Quality: An Evidence-Based Handbook for Nurses*. Ed. Hughes RG. Rockville: Agency for Healthcare Research and Quality (US), 2008. N. pag. Print.
- Nardi, Deena A., and Charlene C. Gyurko. "The Global Nursing Faculty Shortage: Status and Solutions for Change." *Journal of Nursing Scholarship* 45.3 (2013): 317-26. Print.

- "Nurses Make World Health Care Go Round." Infographic. *Partners in Health*. N.p., n.d. Web. 15 Oct. 2014. <http://act.pih.org/page/s/supportglobalnursing?utm_source=PIH&utm_medium=email&utm_campaign=20120508Nurses_email&source=20120508Nurses_email>.
- "Nursing Now." Graphic Organizer. *Johnson & Johnson*. Johnson & Johnson Services, Inc., 10 Jan. 2014. Web. 15 Oct. 2014. <<http://www.discovernursing.com/nursing-now#fact-4>>.
- "Program Progression." *Longwood University*. Longwood University, n.d. Web. 26 Oct. 2014. <<http://www.longwood.edu/nursing/35546.htm>>.
- Ramachandran, Vignesh. "The New Nursing Shortage." *USATODAY.com*. Ed. David Callaway. USA Today, 7 May 2014. Web. 15 Oct. 2014. <<http://www.usatoday.com/story/money/business/2014/05/07/ozy-nursing-shortage/8807937/>>.
- Rosseter, Robert. "New AACN Data Show an Enrollment Surge in Baccalaureate and Graduate Programs amid Calls for More Highly Educated Nurses." *American Association of Colleges of Nursing: Advancing Higher Education in Nursing*. American Association of Colleges of Nursing, 22 Mar. 2012. Web. 21 Oct. 2014. <<http://www.aacn.nche.edu/news/articles/2012/enrollment-data>>.
- Spann, Jeri. "Charting Nursing's Future." Ed. Michelle Larkin. *Robert Wood Johnson Foundation*. Robert Wood Johnson Foundation, 5 Jan. 2005. Web. 22 Oct. 2014. <http://www.rwjf.org/content/dam/farm/reports/issue_briefs/2005/rwjf13683>.
- United States. U.S. Census Bureau. *Men in Nursing Occupations*. Washington: GPO, 2013. Print.