



# CHAPTER 1

## Introduction

### SEVEN TRENDS IN NURSING

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**WHEN NURSING STUDENTS LEARN THAT** they will be required to study nursing history, they often question the usefulness of such an endeavor, preferring instead to focus on learning information related to the mechanics of current clinical practice. It is sometimes difficult to envision how something that happened 100, 50, or even 10 years ago could possibly be relevant to the continually changing and fast-paced world of nursing today. In truth, past events (even some that occurred hundreds of years ago) still exert a profound influence on current nursing practice, particularly in relation to seven basic trends: image, education, advancement in practice, war, workforce issues, licensure/regulation, and research. It is essential to remember that these seven trends influence each other and are intertwined; however, there are unique aspects related to each trend that warrant separate discussion in the pursuit of elemental understanding within the context of the whole.

The organization and presentation of information in this text is based on the premise that spotlighting these seven trends in relation to specific time periods (eras) will enhance awareness of key forces that continually shape American nursing through time. This approach fosters professional growth and leadership grounded in knowledge of what has come before, thereby facilitating positive change towards a productive future during which past mistakes will hopefully not be repeated.

Explanations of the seven trends listed previously are provided below. Examining these trends in relation to the eras addressed in each chapter forms the basis of this text.

## *The Image of Nursing*

**MASS COMMUNICATION AND ENTERTAINMENTS THAT** started with widespread use of the printing press in Europe in the 1600s and continued with the advent of radio, movies, television, and, most recently, the Internet, have led to commonly held, generalized impressions related to nurses and the nursing profession. Contradictory images of nursing became popular during different eras, resulting in a composite and inconsistent public perception of American nurses. Popular public perception of nurses influences how nurses are treated by patients, other healthcare professionals, and the public. It also has an effect on how nurses perceive themselves and their profession, and how they treat each other in the workplace.

## *The Education of Nurses*

**EARLY NURSING EDUCATION WAS BASED** on apprenticeship and observation. Nurses originally were educated by physicians and nurse supervisors. More formal methods

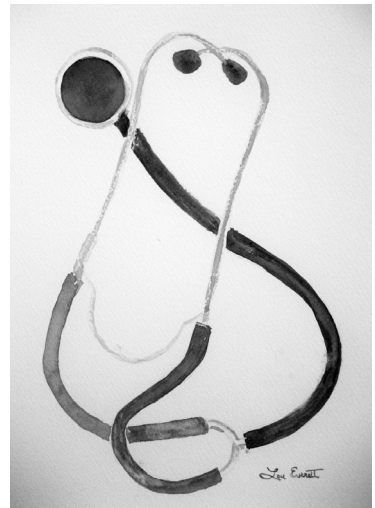




of education emerged as a result of the work of nurse leaders in Europe and the United States. What began as an unregulated, informal, highly inconsistent endeavor grew into a systematic, consistent, regulated, and academically rigorous pursuit that is required of all who wish to become professional nurses. General educational practices influence professionalism and consistency of care delivery. Level of education influences whether or not a profession has the training and infrastructure to develop its own knowledge base and then substantively interact within interdisciplinary teams consisting of other highly educated professionals. Progression of nursing education resulted in a variety of educational degrees that determined possibilities for role or function, certification, and practice.

## *Advances in Practice*

FOR THE PURPOSES OF THIS text, *advances in practice* refers to advances in healthcare technology and the development of new practice approaches/disciplines to effectively treat healthcare concerns. Technological advances through time have resulted in interventions that earlier healthcare providers could not imagine, for example antibiotics, insulin, ventilators, artificial hearts and limbs, organ transplants, intricate wound-care protocols, anesthesia, effective pain management, and genetic engineering. Technological advancements influence and (hopefully) improve outcomes and have resulted in perpetually fast-paced changes to nursing practice. The sociopolitical and healthcare environments influence practice trends and necessity of practice advancement. New practice approaches/disciplines have been developed over time to address specific client concerns; for example, school nursing emerged in the early 1900s to meet the basic healthcare needs of lower income schoolchildren in industrialized cities who would otherwise not have the money to receive necessary medical care.



## *War and Its Effects on Nursing*

THE EVOLUTION OF PROFESSIONAL NURSING in the United States is intricately tied to war-time activities. Interestingly enough, much of what nursing is today and the ever-expanding

abilities and opportunities for nurses are the results of advances in war and the need for nurses to be intimately involved in the health and humanitarian care of soldiers, civilians, and/or the enemy. American nurses have consistently entered the armed forces when bidden and acted with bravery and honor wherever needed. Each war posed unique challenges and opportunities for nursing related to expanded professional roles and responsibilities. Innovative battlefield medical interventions have resulted in significant advances in emergency, trauma, and intensive care practices. Groundbreaking rehabilitative approaches for war-related injuries have led to advancements in prosthetics, psychiatric care, and neurological care. Cutting-edge treatments originally created to save and improve the lives of American soldiers have ultimately enhanced survival and quality of life for all Americans. Much of the technology that nurses routinely use today is the direct result of wartime.



## *Nursing Workforce Issues*

**WORKFORCE ISSUES RELATED TO SUPPLY** and demand of qualified nurses have consistently emerged, sometimes related to an overabundance of nurses and more often connected to shortages. Other issues have concerned the employment of men, ethnic minorities, and racial minorities in nursing. Nursing began in the United States as primarily the work of Caucasian females; however, the number of men and ethnic/racial minorities entering the nursing profession has steadily increased. Increased numbers of men and minorities entering nursing have transformed workplace cultural/social dynamics from homogeneity to integra-

tion and variety. Workforce issues influence nursing practice on a daily basis, particularly during periods of shortage. Many professional issues are ultimately influenced by nurses themselves and their willingness or lack thereof to accept these demographic shifts.



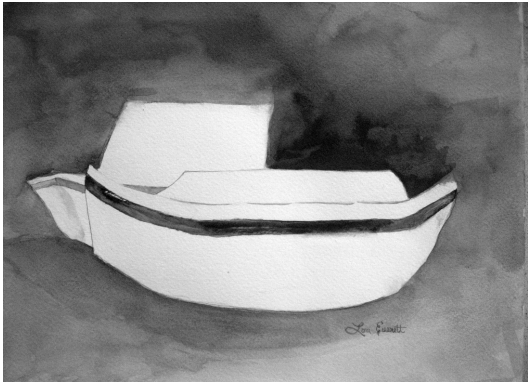
## *Licensure and Regulation*

**EARLY NURSING IN THE UNITED STATES** was an informal endeavor. Anyone who felt knowledgeable about how to



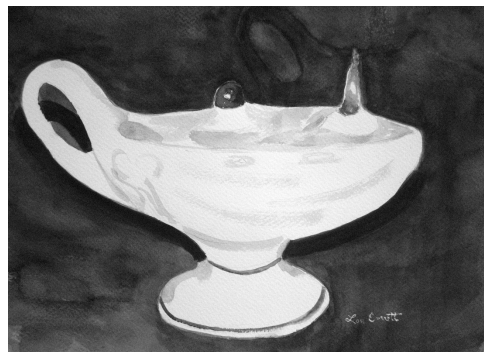
take care of others who were ill, injured, or in childbirth could assume the role of nurse and offer services for pay. When nursing education became more formalized and consistent, licensure and regulation issues came to the forefront; all practicing nurses were eventually required to obtain and maintain licenses. Over time, advanced practice nursing roles stimulated an ongoing licensure/regulation debate around the issues of prescriptive authority and degree of autonomy

in practice. Many certifications and specialty endorsements are now an essential component of nursing practice; they ensure competency as they delineate role, responsibility, and obligation. Nurse Practice Acts (NPA) define legal boundaries of nursing practice based on licensure, regulation, and certification. NPAs ensure safe, quality health care of community (individual and community). The recent influx of foreign nurses wanting to work in the United States has prompted dialogue related to licensure/regulation of nurses who are not American citizens. Licensure/regulation laws set the tone for entry into different levels of nursing practice and ensure accountability of all professional nurses.



## Nursing Research

**EARLY NURSING PRACTICE WAS BASED** on tradition rather than systematic study of efficacy. Movement of nursing education into university settings stimulated research activities aimed at assessing the effectiveness of nursing interventions and clarifying how nursing practices could be improved to support optimal client outcomes. Emergence of the widely accepted concept of evidence-based practice has resulted in increasingly dynamic knowledge development related to a wide range of



nursing activities and disciplines. Continued advancement and refinement of the nursing knowledge base is an obligation of all professional nurses. Have we previously established the abbreviations for these RN levels? Do we need to do this since some readers may not be nurses? BSNs provide questions/topics for inquiry and implement research findings at the clinical level. MSNs do all that BSNs do, plus assist in the creation and execution of research

## Historical Happenings

Growing up as a sharecropper's daughter, I spent many years working on the farm primarily in tobacco, and later [I] became a caregiver to the parents who had me at the age of 43. I am truly thankful to all the mentors that I've had along the way who guided me on the journey of becoming a nurse, counselor, and later administrator—roles which have blessed my life with a wonderful career. However, with a strong work ethic, academia brought continuous challenges of the terminal degree moving further and further ahead, coupled with the demands of tenure and promotion as measurements of success.

It was 1994 after developing pneumonia for the first time that I was led to Art as an Avocation. With each subsequent bout of pneumonia I painted more. It has been through these later years of painting and learning to be quiet and alone that I have learned to listen more and hear the guidance from my own creator. I now know that the most important *titles* that I've ever been given have been the honors of being a wife, mother, grandmother, daughter, friend, and others that come from being in a family.

To my hard-working, career-minded colleagues who focus much on the well being of others, please remember when the final curtain falls, it is not the credentials or what we've accomplished professionally that will linger most in the hearts of our families and closest friends, it is what we have been to them personally. Enjoy your professional careers, but let's take care of ourselves, our health, our souls, so that we can be there for our families. Joy is scattered all around . . . even if we have to squint to see the good." In painting, I've learned to squint [and as I do] there is [much] more that I can [understand]! It is truly my family for whom I have the most pride and thank God each day that I am part of their lives.

I hope my expressions of art will continue to fan the wings of your joy and gratitude for the 'good life' and beauty we all enjoy in Eastern NC.

—Lou Everett (2012) ♦

studies. Doctorally prepared RNs add to this skill set the creation, management, and dissemination of all aspects of research studies to improve practice through evidence. All RNs have the responsibility of awareness to ever-changing discoveries while maintaining an adequate knowledge base that supports the growth and continued development of the nursing profession. This requires vigorous research activity at all levels of professional nursing.

## How the Chapters and Information in This Text Are Arranged

**NURSING HISTORY UNFOLDED WITHIN LARGER** sociopolitical climates. Each chapter begins with a brief overview of the general sociopolitical climate related to the era covered in that chapter. Exploration of how the seven trends manifested during that era is then discussed. This text is a basic overview, with a focus on general trends and eras rather than examination of exhaustive historical information. All concepts in each trend are succinctly presented. Chapter 2: Reflections: The Study of Nursing History reviews selected nursing historical happenings and basic research methodology from both historical and nonhistorical perspectives. Suggestions on how best to use this book are presented so that discovery of the significance of the trends on nursing and nursing on the trends ensues.

### ◆ SUGGESTED READING

- Andrist, L. C., Nicholas, P. K., & Wolf, K. A. (Eds.). (2006). *A history of nursing ideas*. Sudbury, MA: Jones and Bartlett.
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