

Teaching Opens New Doors

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Article:

There's a crisis in nursing. For some time now we've known about the shortage of nurses; however, we've been paying less attention to another crisis: the shortage of nurse educators. According to the National League for Nursing (NLN), approximately 1,390 budgeted, vacant, full-time faculty positions exist nationwide. Since 2002, the vacancy rate in baccalaureate and higher degree programs has increased 32% (soaring to a 7.9% vacancy rate) and 10% for associate degree programs (growing to a 5.6% vacancy rate).¹

The faculty shortage has profoundly impacted the general nursing shortage. Without nurse educators, our ability to reverse the shortage of practicing nurses is severely compromised. Therefore, it's timely to undertake a discussion of the educator shortage's origins, the benefits of becoming a nurse educator, and the types of career development opportunities that are available.

Background and overview

An estimated shortage of 800,000 registered nurses (RNs) is expected by the year 2020.² A variety of factors contribute to the shortage: an aging nursing workforce, a decreasing number of individuals entering the workforce (particularly nurses with baccalaureate degrees), an increased demand for nursing services (due in part to an aging population), higher acuity levels in hospitals, an increased need for nursing care outside of hospitals, and the growing number of opportunities for women to enter careers in other fields.

Concerned stakeholders, hospitals and other healthcare agencies, nursing organizations, nurse educators, and federal and local governments are enhancing efforts to increase the number of RNs in the United States. These recruitment efforts target men and minorities, as well as women, and are beginning to pay off. Consequently, the American Association of Colleges in Nursing (AACN) reports a nearly 14% increase in the number of applicants to schools of nursing.³ According to the AACN, however, schools of nursing were unable to admit 32,797 qualified applicants due to a variety of factors, including insufficient numbers of faculty, clinical sites, and preceptors; limited classroom space; and budget constraints.³ With over 75% of the reporting schools of nursing citing faculty shortages as a reason for not accepting students into baccalaureate programs, the impact of the short-age of nurse educators is critical.

Origins of the shortage

Nurse educators are a crucial component of solving the nursing shortage. They're the key in preparing new RNs. But access to nursing education is becoming increasingly more difficult because of the lack of faculty. The shrinking number of nurse educators is a major factor in the denial of qualified applicants to schools of nursing. Survey responses in 2005 from 432 schools of nursing indicate that 32,617 qualified applicants were denied admission into nursing programs; this number continues to increase each year, "with 29,425, 15,944, and 3,600 students turned away in 2004, 2003, and 2002, respectively."⁴ Insufficient faculty continues to be one of the primary barriers to admitting qualified students.⁴

In general, the shortage of nurse educators is due to the increased number of nurses leaving nursing education and the reduced number of nurses preparing for careers in education. This limits the number of individuals in

the pipeline who may potentially become nurse educators. As with the shortage of RNs, a variety of factors contribute to the shortage of nurse educators. One factor is age. Just as the average age of practicing nurses is increasing, so is the average age of nurse educators.⁵ An AACN study found that the average age of doctorally prepared nurse educators is 54.43 and that the average age of those holding the rank of professor is 57.3.⁶ A wave of faculty retirements is expected within the next 10 years. Nursing education stands to lose 200 to 300 doctorally prepared faculty members between 2003 and 2012, and 220 to 280 masters prepared faculty members between 2012 and 2018.⁷

Aging and retirement aren't the only reasons for the exodus of nurse educators. Nurses in clinical practice and other (nonclinical) positions in various areas earn higher salaries than those who remain in nursing education. Increasingly, nurse educators, especially those who possess the knowledge and skills for advanced practice, are leaving education for such opportunities. For example, data from the 2003 National Salary Survey of Nurse Practitioners showed that masters-prepared nurse practitioners (NPs) in clinical settings earned an average of \$94,313, compared to the NLN's report of masters-prepared NPs in academic settings earning \$61,452 in 2002.⁸

End in sight

While increasing numbers of nurse educators are either leaving nursing education for positions in clinical practice and other areas or simply retiring, their numbers aren't being replaced. As a result, the number of nursing faculty members continues to shrink. According to the AACN's report, *2004-2005 Enrollment and Graduations in Baccalaureate and Graduate Programs in Nursing*, the number of individuals entering and graduating from graduate-level nursing programs is decreasing.⁹ The report also notes that the increase in the number of nurses graduating from masters programs is up only 6.9%, and the number graduating from doctoral programs is up a mere 2%. The AACN found that in the fall of 2004, 2,748 qualified applicants were turned away from masters programs in nursing, and 202 from doctoral programs.⁸ There's no expectation that these trends will reverse any time soon because the shortage of nurse educators adversely affects the number of individuals admitted to both undergraduate and graduate programs, further contributing to the decrease in the number of potential nurse educators in the pipeline.

While the number of nurses entering and graduating from graduate nursing education programs is declining, another factor is contributing to the decrease in new graduates entering nursing education. Just as nurse educators are being lured away from nursing education by the increased salaries in clinical practice and other nonclinical positions, graduates of nursing masters and doctoral programs are being lured by these same opportunities. A response to this situation must be crafted. (See "Funding for faculty.")

Career benefits

One response is to remind clinicians of all that nursing education has to offer. There are many benefits for the professional nurse wishing to become a nurse educator. The reward most often cited by nurse educators is the opportunity to influence the future of nursing education, nursing practice, and the profession in general. Nurse educators also note the opportunity to form mentoring relationships with students—to watch them grow into professional nurses, blossoming from novice to expert.

The opportunity to approach nursing with the fresh eyes of a novice nurse can be refreshing and renewing. Also, nurse educators affect the care of all the patients their students will care for when they complete their programs and become professional colleagues.

Nurse educators appreciate the opportunity for intellectual stimulation. Working with colleagues on a variety of clinical and educational initiatives stretches creative-thinking faculties in creative ways, enabling educators to stay abreast of best practices in patient care and teach students how to provide that care.

In addition to working with new nurses and having the opportunity to make an impression on their development, other advantages to a career in nursing education abound. Teaching provides an opportunity for collaboration with other faculty members in and out of nursing. This collaboration can enrich the continuing

development of nursing faculty as clinicians and educators. It's often possible to continue in some form of practice while teaching. Practicing as an educator involves not only maintaining one's clinical skills, but also extending the borders of nursing practice as a scholar. In this sense, practice refined by teaching is enriched by the teacher's experience as a clinician.

As a nurse educator, there are increased opportunities for diverse professional activities in nursing. The nurse educator may participate as a faculty member in continuing education programs—locally, regionally, nationally, and internationally—which provide the latest information and techniques in nursing practice. There are chances to collaborate with schools of nursing in other parts of the country, and across the globe, to develop curricula and clinical practice experiences. Opportunities exist for presenting scholarly papers based on clinical practice or research at professional and scholarly meetings, thus having a wider impact on nursing practice and healthcare in general.

Career development

While the shortage of nurse educators has had a chilling effect on the general nursing shortage, as noted earlier, various initiatives aim to address the problem. These initiatives create opportunities for nurses from various backgrounds interested in becoming nurse educators. Opportunities fall into three categories: available nurse educator positions, options for educational and experiential preparation for careers in nursing education, and funding opportunities to prepare for careers in nursing education.

A number of states are addressing the issue of diminishing nursing positions through a variety of state government initiatives that include increasing the number of faculty positions allocated to state schools (to accommodate more nursing students), and increasing funding to make nurse educators' salaries more competitive. As these initiatives develop, a number of Web sites now include links to help learn about these opportunities.

One such Web site is Nurses for a Healthier Tomorrow (<http://www.nursesource.org>) which, in the fall of 2004, launched a campaign to highlight the need for nursing faculty. In addition to providing updates on the campaign, the Web site features information on the types of careers available in nursing education and Internet links to resources for career support.¹¹ The AACN's Web site contains an "Education Center" (<http://www.aacn.nche.edu/Education/finaid.htm>), which features "Your Nursing Education: Facts and Figures." This site includes information on nursing career opportunities and development, plus a job database. There's also a link to information on financial aid for potential and current nursing students. Finally, the site contains information on faculty positions, opportunities for higher education, loan forgiveness programs, and education loans.

One strategy for financial assistance, discussed earlier, is the federal Nursing Faculty Loan Program. For students in qualifying graduate nursing programs who work as nurse educators upon completion of their programs, educational expenses are partially or completely reimbursed. This is one example of the types of financial support that may be obtained through federal and state government initiatives. The Independence Blue Cross Nurse Scholars Program is an example of the response from the private sector to address the problem of financial assistance for nurses who wish to become educators. Nurses for a Healthier Tomorrow, the AACN, and the NLN are all organizations that can provide more information on these types of programs.

Doctor of Nursing Practice

For those interested in pursuing advanced degrees, a new educational opportunity is available. With many schools requiring doctoral preparation for educational practice, the new Doctor of Nursing Practice (DNP) degree is intended to prepare nurses for advanced practice, and may facilitate an increase in the number of nurse educators holding a doctoral degree.

The new practice doctorate has a different focus, thus it provides different educational experiences for students who are primarily interested in nursing practice and its application to teaching. The DNP, broadly defined, is

based on nursing practice. As specified in the latest draft of *The Essentials of Doctoral Education for Advanced Nursing Practice*, there are two major areas of practice: practice that focuses on systems for patient care, and practice that focuses on direct patient care.¹²

While it isn't a research degree, DNP completion will require the ability to translate, evaluate, and apply research, as appropriate, to nursing practice to make it evidence-based. With these skills, advanced practice nurses will be able to evaluate the outcomes of the evidenced-based practice they've provided and generate data for future directions for practice. It's beyond the scope of this article to address the many issues and questions that arise in relation to the DNP. The AACN provides a resource (<http://www.aacn.nche.edu/DNP/index.htm>) with DNP-related materials including currently accredited programs.

Light at the end of the tunnel

The decrease in professionally practicing nurses has been exacerbated by the growing decline in the number of nurse educators needed to prepare student nurses for future practice. The loss of nursing faculty has had a deleterious effect on the ability of schools to admit qualified applicants into nursing programs.

While the shortages in the ranks of both practicing nurses and nurse educators is critical, the situation has provided opportunities that include an increase in available positions for nurse educators, options for educational and experiential preparation for careers in nursing education, and funding opportunities for preparing to join the nursing education workforce.

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