

Instructions for Letters to the Editor and Dialog

Letters, published at the editor's discretion, are welcomed in response to articles in the journal. Letters, like a regular manuscript, should be typed doubled-spaced, and no more than two pages in length.

The Sigma Theta Tau affiliation of the letter writer should be noted. Anonymous letters will not be published, but names may be withheld on request. In general, letters in response to articles published more than two issues previously will not be considered.

For DIALOG, the author of the original article may be asked to respond, then both the letter and response will be published together.

All letters are subject to editing. Page proofs are not sent in advance of publication. Letters are selected for clarity, significance, and space. The use of several references is permissible.

A transmittal letter containing copyright assignment should accompany a letter to the editor.

Crisis in Nursing Academics is Not Brewing—It is Present

Practice, Teach, and Research Too (*Image: Journal of Nursing Scholarship*, Second Quarter 1998), certainly struck a poignant cord.

I am in my 20th year of nursing education at a fine university. I carry a heavy teaching load and work diligently to maintain my clinical skills. To remain clinically competent, much of my practice is through community service and I incorporate substantial current research findings from nursing and other disciplines. Because I lead a balanced life including career, family, and community service—my days are full.

I value the research findings and skills needed to be a successful researcher; however researching was not my choice. I fall into the 0.1% of nurses with a doctorate degree, I am in the group of nurse educators over 55 years-old, and I will probably never achieve full professor even though I have maintained a specialty certification for most of my career.

A crisis is not beginning—it is present. Ask anyone who is searching for qualified faculty members. It took us 3 years to fill one position and 2 years to fill another!

I applaud your call for revolution in nursing education; however, it is needed not just at the graduate level. The change must start in the basic education, not just in what we teach but in the way we teach and in what we expect of students as well as what we expect of nurses entering practice.

My last comment is on perspective.

Just what perspective shall we choose for teaching, research, and service? To maintain balance, I can strive for excellence in two areas and when the third is added I am not content with the results. So as I have matured and grown in my career, I have chosen teaching and service (practice). In no way does this di-

minish the value of research. I apply research findings appropriately and select results carefully. However, I do not consider myself an accomplished researcher. I do consider myself a dedicated and competent nurse.

I look to nursing's leaders to provide the vision to move the profession forward in a humane and caring way.

Linda T. Aglin, *Epsilon Epsilon*

Associate Professor of Nursing
Bradley University Department of Nursing
Peoria, Illinois

Many Think It, Few Say It

Your editorial, *Practice, Teach, and Research Too* (*Image: Journal of Nursing Scholarship*, Second Quarter 1998), is outstanding.

Thank you so much for putting this into print. Many do think it, but you are brave enough to say it—I am proud to know you! As a dean, this issue was a great concern of mine.

Know that I will quote you in my comments related to facilitating research.

Billye J. Brown, past president

Sigma Theta Tau International
and Professor Emeritus
University of Texas
Austin, Texas

National Attention to Nursing Education is Needed

Thank you for bringing to national attention a number of vexing issues in nursing education in your recent *Image* editorial (Second Quarter 1998). I would like to add several dimensions.

Undergraduate education: We need to be concerned with the quality of undergraduate education overall and its relevance to the current and emerging health care needs of society nationally and internationally. With health care increasingly being delivered in community settings, and with the movement toward managed care, nurse educators continue to prepare students in acute-care settings. Students are not prepared with the clinical, intellectual, political, and interdisciplinary skills that are needed. Furthermore, undergraduate students have no awareness of health care needs, issues, and problems on other continents and the potential role they can play.

If the picture is to change, graduate programs should give their students the skills and the wherewithal so that as they assume teaching functions, they can become dynamic, contemporary, and relevant.

Graduate education: The exponential growth in doctoral education in the 1980s and 1990s should be of grave concern. It appears that institutions initiate doctoral programs because they believe having one brings prestige. Yet many current doctoral pro-

grams and some under planning do not have the faculty and other crucial resources to conduct high-quality doctoral education. Further, once a doctoral program is in place, resources and emphasis tend to shift from undergraduate and master's education, with further dilution in the quality of the latter.

Graying of the nursing professorate: Many schools are already facing a large number of faculty retirements. There are two reasons for this. The first reason is the advanced age at which nurse faculty attain senior rank. Many senior faculty are already in their late 50s and 60s. The second reason has to do with the unreasonableness of the expectations we have placed on senior faculty. You pointed out some of these.

The burdens of institutional maintenance activities, academic administration, and mentoring of junior faculty fall mainly on senior faculty. They have to do these things in addition to teaching, serving the professional community in multiple ways, conducting scholarship, and publishing.

With regard to the latter, additional norms are now operating that make the situation even more stressful. In many settings it is no longer sufficient that someone do research, publish, and contribute to knowledge. One also has to have funding. However, it is not sufficient to have funding, unless it is from specified federal agencies.

And so it goes. As a result, many senior faculty are taking early retirement. There appears to be no plan to assure stability of educational programs.

We are seeing a picture emerge in which schools are trying to attract senior faculty from other institutions with enticing offers. However, this simply moves the existing academics from one setting to another. While deans bemoan the fact that they cannot fill faculty vacancies, many new doctoral graduates are being told by employers that they are looking for: senior faculty, and faculty with "practitioner" skills.

There is something definitely strange with this picture!

In addition, one has to consider the average age at which students begin doctoral study (36-37 years), and at which they graduate (41-42 years).

We should develop strategies to encourage the young to enter doctoral study. Academe should be made a much more attractive career choice than it is today. Meaningful national dialog is needed on these matters.

Shaké Ketefain, Rho

Director of Doctoral/Postdoctoral Studies
University of Michigan School of Nursing
Ann Arbor, Michigan

Nurse Educators Overwhelmed

Your editorial in the Second Quarter 1998 issue of *Image* is outstanding. It focuses on an issue that nurse educators in large research universities are coping with and seem overwhelmed by trying to accomplish the expectations in all three areas. Other

than being a seemingly impossible task, the issue also can be one that causes dissension among faculty.

Thank you for the exemplary work you do as editor.

Ruth LaVerne Gallman, Epsilon Theta

Professor Emeritus
University of Texas
Austin, Texas

Unbundling Research, Teaching, and Practice is Wrong Solution

I write in response to your editorial in the Second Quarter 1998 *Image* issue, *Practice, Teach, and Research Too*. While I agree that quality must be a part of every aspect of practice, education, and research—and that new methods of providing nursing education should be explored, your solution, "unbundling practice from teaching and research" is the wrong solution.

Remember, nursing is a practice-based discipline. For most of the past 20 years, in fact, academic policies have led us to unbundle research and practice: and thus, a great deal of research has been produced that has little to do with nursing practice. Further, those few scholars who chose to continue their practice had difficulty justifying the choice, and often were told that they could not possibly achieve tenure because practice would take attention away from scholarship.

For those few intrepid souls, myself included, who believed that good clinical scholarship and relevant research could only come from questions embedded in practice, the tide has begun to turn. More and more faculty, led by those who must practice to maintain certification, are striving to find balance and synergy among practice, research, and teaching—and they remain committed to practice-based scholarship.

Scholarship, to be truly applicable to nursing practice, must evolve from practice. This link is even more critical now, with the imperative that practice be evidence-based. What we must do is find better ways of helping faculty find synergy in the various areas of their work, not unbundle research and practice. If faculty can get "credit" for practice, and their practice is relevant to their teaching and research, so much the better. Further, doctoral programs must model this for their students, or we will succeed only in replicating the mistakes of the past.

At Yale, our doctoral program was founded on these principles.

Margaret Grey, Delta Mu

Independence Foundation Professor of Nursing
Associate Dean for Research
Yale University School of Nursing
New Haven, Connecticut

Some Clinical Faculty are Indentured Servants

I was delighted to read your recent editorial in *Image* (Second Quarter 1998). As you read this, please picture me standing and