## **DIALOGUE**

IMAGE welcomes letters in response to previously published articles. Letters should be addressed to the Editor, should be typed double-space and should not exceed two typed-pages. The Sigma Theta Tau affiliation (if applicable) of the letter writer should be noted. Anonymous letters will not be considered for publication, but names may be withheld upon request. In general, letters in response to articles published more than two issues previously will not be considered. The original authors may be asked to respond to letters.

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To the Editor:

I am writing in response to an article published in the Spring/Summer issue of IMAGE entitled "Toward a Feminist Model for the Political Empowerment of Nurses" (Mason, Backer and Georges). I am compelled to respond due both to my outrage and sadness at what I perceive to be a combination of racism, politically correct thinking and the reduction of Nursing to its lowest common denominator? The supposition that this paper is the correct application of Feminism is most certainly debatable, and for nurses with advanced education to continue to challenge the entry-into-practice theme as contrary to feminist views is an outrage to me! Are these authors also suggesting that high academic standards for Engineering, Law and Medicine are also biased against women or does this only apply in female dominated professions?

I believe that nurses are oppressed because we continue to foster our victim roles and confirm this by accepting everyone into our ranks who merely expresses an interest in "being a nurse". Reducing, or even maintaining already limited educational standards will only further potentiate this self defeating thinking, as well as give permission to others to sustain such thinking about us. Let's empower ourselves by increasing our standards of expectation not reducing them!

The authors have further suggested that nurses misuse power and limit the development of others by exclusion through standards. I do not disbelieve that this occurs in certain environments; however, it is not rationale enough to abandon the entire standards of entrance and education throughout the profession. I believe that we can value women's ways of knowing without substituting these for formal education. I am gravely concerned about this recommendation and the authors' suggestion that this will result in greater empowerment of nurses.

Judy C. Paull, RN, BSN Graduate Student, Psych-Mental Health Nursing The University of Michigan The Authors respond:

We appreciate the opportunity to respond to one reader's reaction to our article. We wrote it with the hope that it would engender discussion regarding the values and frameworks underlying our policies and actions as professionals and as individuals. Entry into practice continues to be a volatile issue for nursing. It is erroneous to assume that legislating educational standards through "entry into practice" is the only route to improving standards in nursing or that opposing it will lower standards. The development of policies related to the education and utilization of nurses is restricted when the debate focuses solely on the entry-into-practice position. For example, differentiated practice may be a more effective method of promoting appropriate utilization of nursing care providers than legislating entry into practice.

We may be limiting our thinking in adopting models that have been developed by the male dominated professions that Ms. Paull cites. As educators we value the continuing education of nurses. We believe that nursing already has a unique professional model that other professionals will come to emulate as our society becomes increasingly focused on the lifelong and continuous education of its work force. If we free up our thinking we may collectively come up with models of operating that may better serve society.

We believe that care needs to be taken to listen to one another's voices and thinking without labelling these as politically correct or incorrect. We have not addressed Ms. Paull's comment about the article being racist because she did not explain it, but would welcome the opportunity to continue this dialogue with her. Ms. Paull's letter did provide an impetus for us to re-examine our thinking on a feminist model for empowering nurses and we believe that continuing explanations and challenges of it are necessary to fully develop the model.

Diana J. Mason, RN, C, PhD, FAAN Barbara A. Backer, RN, DSW C. Alicia Georges, RN, C, MA, FAAN

To the Editor:

Sherry Jimenez's article "Consumer Journalism: A Unique Nursing Opportunity" (IMAGE, Spring 1991) affirmed my decision to produce a consumer publication. I have enjoyed reaching consumers through yearly pre-retirement programs and sharing with them ways to age successfully. When asked to publish my preventive health recommendations in a pre-retirement series for business, my academic side hesitated. The publisher is a commercial company and not a professional journal, referred, research based, or in other words, appropriate for tenure review. Would I be wiser to spend my time on a scholarly publication?