JUST A NURSE?

Last year I had the pleasure of attending my 20th year high school reunion. One of the things I most relished was the opportunity to renew friendships with those of my classmates who had gone onto nursing schools. The better part of the evening was spent in tracking down these long-ago friends and comparing notes on the types of projects now occupying our time. During one such discussion, I asked one of my classmates about her current career. She replied, "Oh, I'm just a nurse." There was a long pause... as several of us in the profession looked at her in disbelief.

In this age of enlightenment and heightened awareness, both from the women's movement and from the nursing profession, we found it incredible that a member of our profession could think in these self-deprecating terms! This outlook is one that has truly outlived any usefulness.

The nursing profession, with the direction of professional organizations such as ANA and NLN, has established criteria for the professional. These criteria will help create an educational environment that will produce nurses of a high caliber, but attitudes can not be governed by criteria.

Is it possible that this attitude still exists, perhaps on a more widespread basis, in some of the specialties? Do we still have members of the gerontological nursing community who see themselves in this light? Where does the responsibility for changing these attitudes lie? How can we eradicate the last remnants of this "handmaiden" attitude? Without its eradication, we will find our struggle for professional recognition an uphill one, indeed.

We know that the educational systems in today's nursing communities are working to create the professional profile and image. But what about the nurses who have been out in the field for many years? In their eyes, what would help them feel more respect for themselves and the valuable, essential work they do? Perhaps nursing assignments need redefining—in terms that indicate more closely the management nature of the position. Perhaps nursing's public image needs building within the community.

One way in which nursing's image can be elevated is for sponsoring institutions to take a more active role in assisting this endeavor. Maybe staff nurses need a little "spotlight" time. They need to work in the community, in behalf of their institutions. Hospitals and long-term care facilities are among the largest businesses in any community, and the nursing departments of these facilities are the largest professional bodies involved. Yet, when area or regional chambers of commerce convene to conduct business and to network among the membership, is nursing represented? Who better to convey the message of "health and well-being" from the institutions to the communities than the staff nurses who make it happen? If this takes place, there will be a few more nurses who will no longer say "Oh, I'm just a nurse." They will say "I'M A NURSE, REPRESENTING MY INSTITUTION AND MY PROFESSION!"

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