A Little Competition Never Hurt Anyone
by Rachael Leffler

“Raise your hand if you’re taking this course because you want to become a nurse.” Seventy hands shoot up. Seventy. This is only one Chem120 class. JJ Leary, my chemistry teacher, was merely trying to demonstrate how important the knowledge of basic chemistry concepts is in many common occupations. What Dr. Leary did not realize, however, is that he sparked a certain degree of fear and anger in those students aiming to get admitted into James Madison University’s nursing program. Immediately after the question was asked, eyes were darting around the room. You could feel other prospective nurses trying to discover your level of intelligence by the confidence, or lack thereof, plastered on your face. Yes, at eight in the morning on the second day of school, competitive sparks were already flying.

In order to graduate with the rest of their class, students must enter the nursing program the fall semester of their junior year. If they do not get in that semester, they can keep reapplying each semester and therefore graduate late. As of the fall semester of 2009, there were 203 freshmen that declared nursing as their major, yet only about 60 students are actually accepted at the end of their sophomore year. However, many freshmen are scared away by the high competition. According to JMU’s Nursing Program website, even to be considered for the nursing program, we need a 2.8 GPA as well as the completion of CHEM120, MATH220 and two biology classes (BIO 270, BIO 280, BIO 290) during our freshman year. The average GPA of accepted students during the fall semester (the first semester available) is a 3.6, and 3.34 for the spring semester (one semester late). When notification time came in the fall semester of 2009, about 60 students out of 104 qualified applicants were accepted. In the following spring semester, the number jumped to 60 out of 153 qualified applicants (“JMU and Nursing”). These sixty students were not only sophomores, but also the upperclassmen that were not accepted on the first go-round. While the program seems difficult to get into and the statistics do not seem all that promising, once a student is admitted into the program and has completed the required courses with passing grades as well as passed a national and state licensure exam, jobs are not hard to find. With the nationwide nursing shortage continuing to rise, it is considerably easy for any RN to get a job.

The U.S. has undergone many nursing shortages over the past 50 years. Such shortages tend to come and go with time, correlating with the United States’ economic crises. The present U.S. shortage, however, has lasted about ten years and seems to worsen increasingly. As of now, most of the nursing workforce is comprised of baby-boomers ready to retire within the next few years. In addition, the population is once again increasing and the need for critical caretakers is continuing to rise. Peter Buerhaus, director of the Interdisciplinary Health Workforce Studies Institute at Vanderbilt University, projects that there will be a shortage of 260,000 registered nurses by the year 2025 (“Nursing Shortage Fact Sheet”). Chart 1 below, produced by the Bureau of Health Professions, exemplifies the RN supply and demand projections from the years 2000 to 2020. As can be identified in this chart, the supply of registered nurses remains constant while the demand increases over time.
Our nursing situation as a whole can be very complex and seems paradoxical. If there were such a shortage of nurses around the world, then why would we prevent more from becoming part of such a necessary workforce? The answer is simple. A prevalent factor in the U.S. nursing shortage is the nursing faculty shortage within schools and college nursing programs. According to Gayle Roux and Judith Halstead, a pair of nursing school deans, 3.7 percent of nurses held faculty positions in 1980. As of 2006, that number has decreased to 2 percent (Halstead and Roux 542). At the same time, nursing school rejections are going up. A survey conducted by the American Association of Colleges of Nursing, or AACN, found that in the 2002-2003 academic school year, nursing schools in the US rejected 5,283 qualified applicants. In the 2003-2004 academic year, the AACN found that nursing schools rejected 18,105 qualified nursing students (McNeil and Poulin). Finally, in the year 2008, US nursing schools rejected 49,948 qualified students “due to insufficient number of faculty, clinical sites, classroom space, clinical preceptors, and budget constraints” (“Fact Sheet: Nursing Shortage”). The lack of qualified students accepted into nursing programs is projected to increase until the year 2020.

Now the obvious question is why there is such a small number of nursing faculty members in the first place. The present nursing faculty is retiring. Also, the process to become a nursing faculty member requires a lot of extra schooling, which involves an abundant amount of extra time and money. Because a faculty member requires a lot of field experience and extra years of schooling prior to becoming certified, the age for a nursing faculty member is higher than most people realized. The national average age for nursing faculty with doctorate degrees is 56.6 years. In addition, the average age for faculty to retire is 62.5 years (McNeil and Poulin). Most nursing faculty members do not even teach for ten consecutive years. In addition, between the years 2012 and 2018, it is projected that between 220 and 280 master’s-prepared nursing faculty will be eligible for retirement (“Nursing Shortage Fact Sheet”).

In addition to the fact that nursing faculty tend to be older and do not work for long periods of time, they also receive a significantly lower salary than those who decide to work in a field setting. According to Melissa Wirkus, an associate editor for NurseZone.com, the average annual salary of a registered nurse with a master’s degree working in a hospital is $76,000, while the average annual salary of a member of the nursing teaching faculty with a master’s degree is $59,000. Fewer nurses are apt to become professors if the pay is nearly $20,000 less. Without an adequate number of nursing faculty to teach nursing students, the nursing shortage is predicted to get much worse as the number of new nurses able to enter the workforce decreases (Wirkus).

Several strategies have been implemented to address the faculty shortage. Wirkus reports that “The AACN has devised several strategies for tackling the faculty shortage including appeals to the U.S. government and partnerships with leading organizations that have an interest and concern for nursing.” The AACN is also striving to receive help from the media to draw attention to the growing problem. We, as future caregivers, can become a part of finding solutions. The easiest thing we can possibly do is keep the general public informed about this crisis.

It’s no wonder that the nursing program is so competitive. Nursing is an appealing career choice for many individuals. With only so many admissions slots open, of course there will be competition. Buerhaus, along with a pair of other researchers, states, “With its relatively attractive entry wage, high job security, and relatively small educational investment, nursing has become a very attractive career option for people in their 20’s or early 30’s” (186). This fact brings us back to the realization that admission to the nursing profession is actually quite contradictory and, in a sense, inconsistent. As this paper previously states, 49,948 qualified applicants were turned away in 2008.

There is not much we, as students, can do to change the economic problems related to the shortage of nursing faculty. We can lobby to the government in hopes to increase the funding for nursing programs and encourage more registered nurses to become qualified faculty members. However, our best efforts lie within our own determination. We can most definitely apply to more than one nursing program and, if need be, transfer. JMU is among many Virginia state universities with excellent nursing programs. If transferring does not seem like a viable option, one can always choose to take advantage of JMU’s repeat-forgive policy. In this policy, students can retake courses in which they have done poorly, with the hopes of performing better and raising their GPA. Although this policy can only be used twice throughout your entire JMU
career, it may be wise to retake a failed nursing prerequisite in order to improve your chances of acceptance into the program. Lastly, if you are still not accepted, keep trying. Try to get accepted for next semester. In the meantime, while you have an extra semester, complete a minor. You could also take few of the many nursing electives offered here at JMU. By choosing this option, you can not only increase your background knowledge of a specific nursing field, but also limit your risk of having to stay longer.

We, as prospective nurses, have to be committed in every class we take, all volunteer work we do, and every opportunity to help we can. I'm sure we are all aware that the specific criteria needed to be accepted into James Madison's nursing program is very demanding. On top of high academic standards, the admission officers say that they love well-rounded individuals who have a lot of volunteer experience. In turn, not only do we have to keep up a high GPA, but we also have to put in a significant amount of time and extra work. To other JMU students this may seem highly impossible. Nursing students, however, must be dedicated, or they have no chance of fulfilling their dream to become a nurse. I know that sometimes in the attempt to increase our chances of acceptance, we secretly want other aspiring nurses to fail a certain quiz while we succeed, but we cannot succeed alone. It will be much easier if you find a prospective nurse just as dedicated as you to study or discuss classes with. We must learn how to embrace the competition that we face.

If we can stick an IV in a patient and deal with piles of paperwork, then we can most certainly handle a situation such as getting accepted into a nursing program, whether it be JMU's or not. Although the JMU admissions process is stressful at times, it is helping us learn ways to manage stress and anxiety—a skill that we will most definitely need in our future career. If you go and shadow nurses in a hospital and watch how they work, interact, and make speedy decisions, all of the competition that we experience before acceptance into the nursing program seems trivial. We may complain to our fellow classmates about an anatomy practicum the next day that we haven't even begun to study cross sections for; we may sit in the study lounge on the verge of tears because, no matter how many times we try, we simply cannot figure out this one chemistry problem, but that isn't what nursing is about. Yes, of course we need to know the basics, but we also must have the ability to make decisions accurately. We must be willing to work with a team and due to the intense nature of our work, we, as nurses, must be emotionally stable and, in turn, be able to cope with stress. When a real life-or-death situation prevents itself, we will hopefully know how to handle ourselves. Stress is a major part of the nursing profession, and learning strategies to control and deal with this stress will help later. The first task here is to realize that every other prospective nurse is right there beside you feeling the same exact anxiety that you feel. Relax. You can do this.

Works Cited