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ABSTRACT

This paper describes the historical factors which influenced the substantial growth of the associate degree nursing program in the United States since the mid 1950's. The authors discuss the growing hope that nursing will become a vital part of the nation's established system of higher education. In addition, they discuss the changes in duties to which nurses were being assigned during the past several decades. The manner in which junior colleges and schools of nursing have responded to these changes is explained along with a discussion of enrollment trends and sources of financial support. This paper contains three graphs illustrating the growth patterns of associate degree programs in nursing during three different time periods. The authors conclude by expressing optimism about the future growth, change and improvement of the nursing field.
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The Phenomenal Growth of
The Associate Degree Program
in Nursing

by

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Several factors helped to bring about the recent introduction and phenomenal growth of the associate degree nursing program in this country since the mid 1950's. First, there was a growing concern that nursing, as other allied professional fields should become a vital, integral part of the nation's established system of higher education. Secondly, the duties to which nurses were being assigned had suddenly and drastically changed during the past several decades. For instances, in the early 1920's, 75 per cent of all registered nurses were engaged in private practice, but only twenty-five years later, less than 25 per cent of the registered nurses remained in private duty and that figure is even lower today. Most nurses are now employed in hospitals or large health-care affiliated agencies, all of which have some form of direct nursing supervision. Thus, the majority of nurses find themselves in positions where their duties are largely guided by specific, definite policies and already established routines.

This change in the nature of nursing duties greatly contributed to the newly evolving idea that the educational program for nurses should be provided through a different type of educational experience. One may say the basic role

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of a nurse as a helping profession had remained inherently the same, but that the ways and means of carrying out this role had constantly grown more technical and complex.

The third factor to bring about the growth of the Associate Degree program in nursing was the sensational growth of junior and community colleges throughout the entire nation during the 1960's. The junior college as an institution proved to be very compatible with the basic curriculum design of the two year associate degree nursing program. Concurrent with all these factors, was a woefully short supply of nurses. The health and medical needs of the American people were expanding faster than nurses could be trained. Thus, the introduction of the two year nursing program housed in a community and technical college setting seemed to be a natural solution.

Schools of nursing began to analyze all these facts and concluded it would be better to provide a basic education for student-nurses which would qualify them to begin the practice of nursing sooner, let's say in two years, rather than to retain them as students in a nursing school for three years until a high degree of skill and expertise had been developed through constant repetitive practice.

These factors were culminated in an innovative educational research proposal by Mildred Montag at the Teachers College of Columbia University in 1952. The Kellogg Foundation decided to fund this model for a new educational nursing program which broke all the existing traditional patterns of nursing education.

It placed the entire responsibility of educating the student-nurse on the educational institution and future nursing practitioner--rather than on a service hospital institution.

The financial support by the Kellogg Foundation enabled several hospitals and colleges, working closely together, to establish this pilot program to train nurses. The result or growth record of this program has been phenomenal and has, by far, surpassed anyone's expectations.

The very early ADN enrollments of:

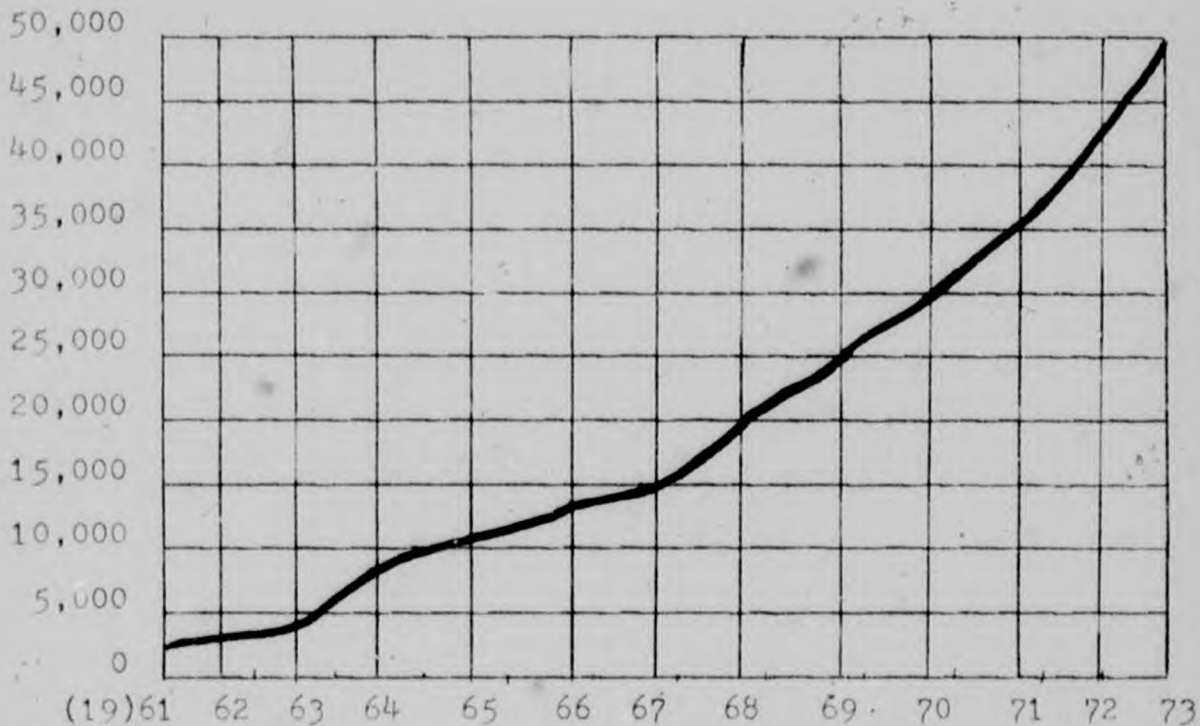
600	-	1952
800	-	1954
*575	-	1956
1200	-	1958
2000	-	1960
3900	-	1962

has grown to these overwhelming admissions figures shown of the following table:

*The brief drop in enrollment in 1956 is thought to be due to the end of the Kellogg monetary grant and was a transition time when the ADN program became a self-sustaining, unsubsidized program in colleges and universities.

THE GROWTH PATTERN OF
ASSOCIATE DEGREE PROGRAMS IN NURSING
ADMISSIONS/1961 to 1973

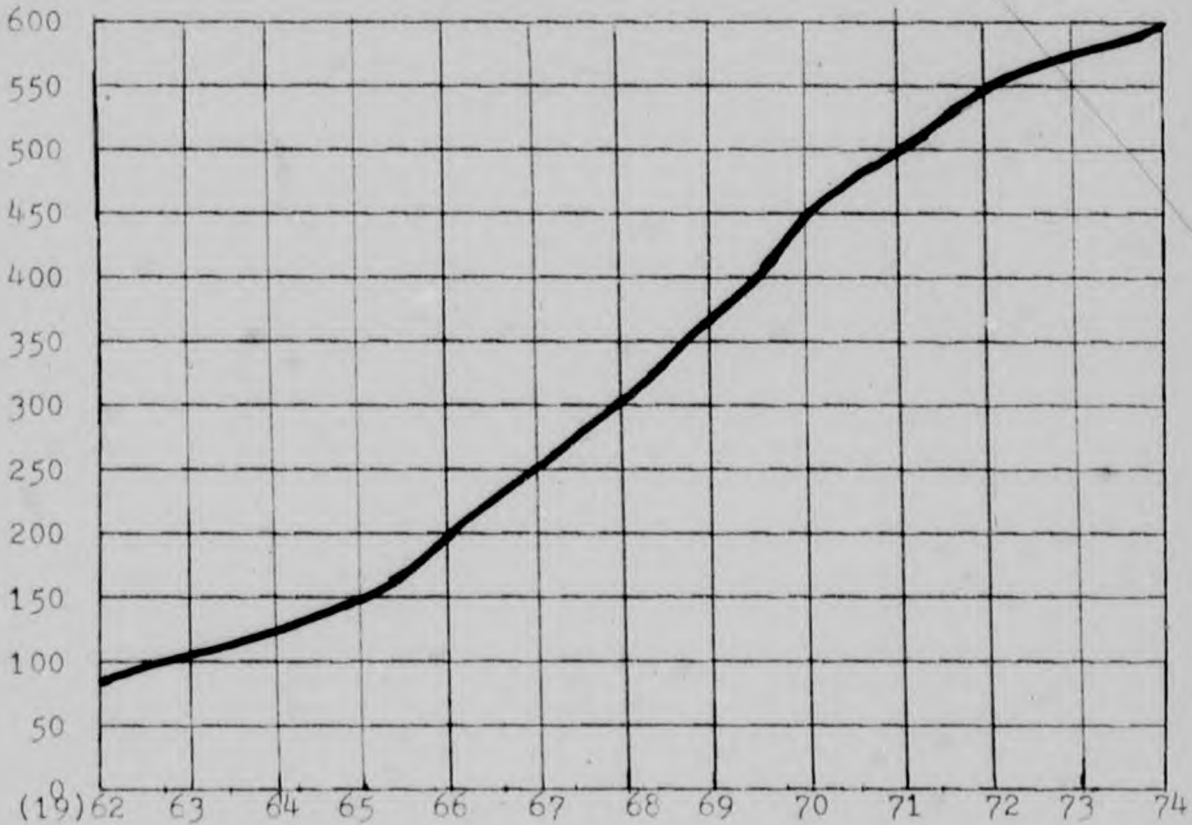
Number of
Admissions



The rapid increase in ADN enrollments throughout the country has been matched by an equally rapid growth in the number of new nursing education programs in colleges and universities. Beginning with six pilot schools in 1952, they have grown to a walloping total of 574 programs in 1974. The over-view of this steady growth in programs can be seen in the following table;

THE GROWTH PATTERN IN
ASSOCIATE DEGREE PROGRAMS IN NURSING
NUMBER OF PROGRAMS/1962 to 1974

Number of
Programs



Comparing associate degree programs with traditional diploma nursing programs in the past few years one can see further evidence of this rapidly rising growth pattern:

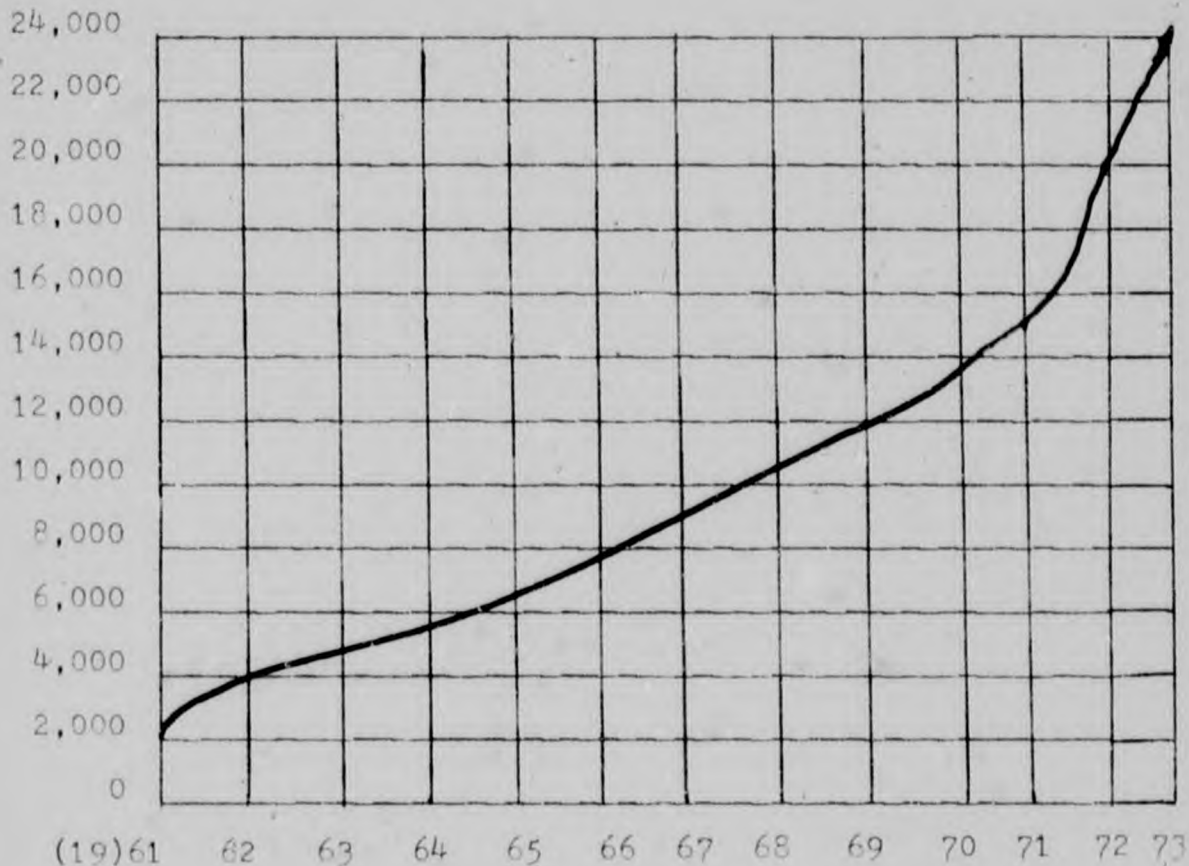
Number of Programs Preparing Students to Practice
In Nursing

<u>Associate</u>	<u>Diploma</u>	<u>Bacc</u>	<u>Total Basic RN Programs</u>
1973-574	494	305	1,373
1972-541	543	293	1,377
1971-491	587	285	1,363
1970-444	641	270	1,355
1969-390	695	254	1,399

The number of RN graduates from the new associate degree program has been equally as impressive:

GROWTH PATTERN
ASSOCIATE DEGREE PROGRAMS IN NURSING
GRADUATIONS/1961-62 to 1971-73

Number of
Graduations



It is now being said that a plateau has finally been reached in the associate nursing program; and this may well be true, for the number of new programs has greatly leveled off, and the number of new admissions and graduations (projected) are no longer growing by leaps and bounds each year. Slight increases, in graduates...yes; slight increases in new programs as diploma schools gradually phase themselves out...yes, but there is just no longer that almost uncontrollable overwhelming, phenomenal growth.

The new AD nurse is a new professional, trained in a new "knowledge-base" model rather than an apprenticeship or experience-base setting. This too is part and parcel of the challenges of new times, with the knowledge explosion and all. More comprehension and varied course work are by-words of the college associate degree program. "Global vision" is also emphasized as nurses are now taught to be concerned about varied aspects of patient-care, including the psycho-social well being as well as the patients'.

A more traditional physiological needs. The result is obviously a nurse who feels more competent than ever. The new nurse comes from a more well-prepared professional background. She demands and expects more from her occupation and even from herself.

Thus, it looks like the college trained nurse is here to stay. With the new breed of nurse, it is becoming increasingly evident that hospitals will witness a greater movement towards more flexibility and individualization as a new type of nurse seeks to determine her own destiny in the medical setting. The tremendous impact of many social and scientific changes in American society caused the nursing profession to try this new approach to preparing nurses, and the future promises more change, more challenge, more rapid technological discoveries. The field of nursing today is growing, changing, improving, and challenging--as thousands of highly trained nursing specialists go forth to provide quality patient-care to a whole nation of people in their time of need.