

# Nursing's orphans: How the system of nursing education in Australia is undermining professional identity

## WENDY MADSEN

Senior Lecturer, Faculty of Sciences, Engineering and Health, Central Queensland University, Bundaberg, QLD, Australia

## MARGARET McALLISTER

Associate Professor in Nursing, School of Health and Sport Science, University of the Sunshine Coast, Maroochydore, QLD, Australia

## JUDITH GODDEN

Honorary Associate, Department of History, University of Sydney, Sydney, NSW, Australia

## JENNENE GREENHILL

Associate Professor in Clinical Education, Rural Clinical School, Flinders University, Adelaide, SA, Australia

## RACHEL REED

Research Assistant, School of Health and Sport Science, University of the Sunshine Coast, Maroochydore, QLD, Australia

## ABSTRACT

*This paper draws on the results of a national study of approaches to teaching nursing's history in Australia. We argue that the neglect of history learning within undergraduate nursing and mid-wifery education is undermining the development in students of a strong professional nursing identity. The data in our study shows that instead of proud, informed professionals, we are at risk of producing a generation of professional orphans – unaware of who they are and where they've come from, unaware of reasons underlying cultural practices within the profession, lacking in vision for the future, insecure about their capacity to contribute to future directions, and not feeling part of something bigger and more enduring.*

**KEYWORDS:** nursing; history; professional identity; curriculum; retention; Australia

## INTRODUCTION

In 1996, Matthews (1996) told his story of a lifelong search for his identity. Gordon was adopted at birth and, although he had been raised in a loving family, had no knowledge of his biological parents. This left him with an emptiness in his life that could only be filled by

finding his roots. Gordon's experiences have been repeated many times by those who have not been privileged to hear the stories of their ancestors as they grew up. As a result, their sense of identity is undermined. In a similar fashion, students enrolling into a Bachelor of Nursing within an Australian university join the family of nursing.

It is a family with a past: a past that has determined the culture and expectations of nurses today; a past that has determined the boundaries of practice that nurses operate within; and how nurses interact with other members of the health-care team. Yet, increasingly, students are graduating from universities without that understanding of nursing's past. It is argued in this paper that neglecting to provide nursing students with an understanding of their history undermines their professional identity, a factor associated with poor nursing retention.

Nursing graduates enjoy one of the highest employment rates in Australia, yet many leave within the first year of practice. Bellack (2004) estimates 20% leave within the first year. Hodges, Keeley and Troyan (2008) put the figure as high as 60% in the USA. One of the reasons postulated for this exodus is that nurses with a fragile or negative sense of professional identity rapidly became unhappy with their new occupation (Aiken et al., 2002) as they are faced with the realities of the nursing world, realities for which they were inadequately prepared. Yet researchers also report that Registered Nurses with strong professional identities are more likely to display self-efficacy and be resilient to role pressures and demands (Hodges et al., 2008; Skovholt, 2001). The need to provide nursing students with a sense of professional identity and to adequately socialise them into the profession of nursing is clearly a responsibility of educational institutions. Teaching students nursing's history is fundamental to building professional identity, but it is frequently overlooked as the curriculum becomes overlaid with technical and scientific instruction. This paper draws on the results of a critical interpretive study outlining the views of nurse academics towards teaching the history of nursing to nursing and midwifery students. It highlights the role of history teaching in providing students with a sense of who they are and enriching their understanding of nursing as a profession; and explores why nursing students are not being given the opportunity to more fully develop their professional identity.

## BACKGROUND

Over the past 20 years there have been numerous calls within the international literature for a greater recognition of the role the history of nursing can provide to the nursing profession. The history of nursing literature itself has undergone significant growth since the early 1980s, with greater levels of critical analysis of the past, more focus on nursing practice, and less reverence for myths. As this growth has occurred, nursing's history has been recognised by many as contributing to the profession's understanding of issues of identity, boundaries of practice and autonomy (Ogren, 1994). Gavin (1989, p. 62) called for the inclusion of the history of nursing in the curriculum in the late 1980s so students could 'understand the place of nursing in today's society and the relationship between medicine and nursing; and how it has changed'. He drew on Habermas' three domains of adult education – technical, practical and emancipatory – suggesting the latter which allowed nurses to explore their role in society was completely missing from nursing curriculum. In the 1990s authors continued to argue that nursing students needed to know their history so they had an additional sense of empowerment, pride, and sense of continuity and place in the nursing profession (Chambers & Subera, 1997; Davis, 1995). In the past decade, Lait (2000) contended the history teaching provides an orientation to the profession and a sense of identity and Thorne (2006) explained neophyte nurses need a sound understanding of the fundamental and core connection among nurses that is derived from knowing where we have come from in order to negotiate the complex world of nursing. The ongoing argument in the literature for the inclusion of history of nursing within the curriculum suggests this has not been largely realised.

Despite these calls for history teaching in the recent literature, the history of nursing has been taught to students in the past, albeit often on an ad hoc basis. Lewenson (2004) outlined how the history of nursing had been taught to USA students over the twentieth century, noting the National League of Nursing Education recommended

15 h of history teaching from 1917. In 1937 it was recommended 30 h of history be included in the curriculum, and suggested teaching strategies include maps, graphs, reading assignments, class discussions, pageants and museum trips. However, the level of recommended history teaching was reduced again to 15 h after World War Two, and it was left up to individual faculties to implement. In 1999, a *Guide for Integrating History into the Nursing Curriculum* was produced, again making suggestions regarding how history could be incorporated (Lewenson, 2004). At times, individuals interested in the history of nursing have instigated courses that were included in nursing curricula. Kirby (1998) described her experiences teaching a strand of history of nursing into the undergraduate curriculum at Redwood in the UK, and found this raised students' historical consciousness. Chambers and Subera (1997) used pageants of nursing leaders as a means of teaching nursing's past and felt this type of activity helped to develop a sense of professional identity. More recently, Madsen (2008) described teaching the history of nursing to Australian undergraduate students. While there are some positive experiences outlined in the literature, it is evident many students are graduating from their nursing and midwifery degrees having had little or no exposure to the history of their profession despite the widespread acknowledgement of history as a key means of providing professional identity and a sense of place and worth.

Indeed, a national survey of academics teaching nursing's history within Schools of Nursing across Australia (McAllister, Madsen, Godden, Greenhill, & Reed, 2008), supported these assertions. The study, detailed at length elsewhere (McAllister, Madsen, Godden, Greenhill, & Reed, under review), found that history of nursing teaching is valued both by academic teachers and students, especially when it is well taught and its relevance made explicit. It also found, however, that history of nursing teaching is neglected and being squeezed out of the curriculum in preference for technical skills. Whilst technical competence is undeniably important to contemporary

nursing, well grounded liberal arts knowledge is vital for the development of professional identity, in quite specific as well as broad ranging ways. This paper draws on the themes elicited from this national study and explores to a greater extent the implications for professional identity.

### Knowing who you are and where you come from

The nurse academics interviewed for this study were all those nominated by the relevant Faculty/School Dean/Head as being responsible for teaching history of nursing. They are therefore the most likely to see the history of nursing as relevant to undergraduate teaching. This is evidenced in the number of times the concept of 'knowing your past to know your present' was raised in the interviews.

I think you learn a lot looking back to where you have come from. (P7)

I think it's valuable for nurses who are going to have a career in nursing to know where they have come from and know the history behind it. (P8)

I just felt that it was important that first semester students know actually where it's all come from. (P10)

I mean I believe that it is an important part of our past. You know, I believe that as a professional you have to understand where you have come from in order to successfully move forward. Because... because of where we have come from, you deal with all sorts of obstruction to moving forward if you don't really understand that. (P13)

I think it is important... if you don't know your past, you're not going to know your present, and you're not going to know your future. And what concerns me, I think that a lot of nurses do not know the past and the present. (P17)

Some academics understood this knowledge of the past to be important for students because it gave them a better concept of nursing as a profession.

I think these student nurses have had a good start with looking at nursing historically. I think it makes them feel proud of the

nursing profession... and because we talk about professionalism within nursing... you can see them now, some of them are really proud, and they have only been here 9 weeks. (P7)

I think it is important that our students are grounded. Absolutely... and I know 'holistic' is used quite a lot in really different dimensions, but that's what we want them to be. They need to understand that nursing is not just technology, it's not just science, there is an art behind it, and the art has come from this background. They need to be aware of how nurses... their predecessors fought to make nursing a profession and how it is our responsibility to maintain that level of professionalism and kind of propel our profession forward rather than looking backwards. (P10)

Well I think it is important, because how can you operate a profession without a history? (P10)

And I honestly think that unless students have an appreciation of what nursing has been in the past, they're really not going to have sufficient understanding of the importance of the changes that have occurred... and to have the respect for some of their colleagues who have gone through a period of immense change in nursing. (P21)

There was also recognition that the past has played an important role in how nursing has been, and continues to be portrayed in the media which influences the understanding of nursing by the general public. That this has not always been an accurate representation may have contributed to students not having a clear image of nursing.

So they (the students) have to give a chronological timeframe of how nursing has developed in Australia and then look at how the image of Australian... look at the different images. You know, the 'angel', the stereotypical... TV, media aspect, the person... basically the social construct of the nurse, I guess. (P6)

I think they often have a very fuzzy idea about what nursing is about, and what health is about. (P16)

The nurse academics interviewed for this study thus considered students needed to know about the history of nursing to build a sense of professional identity, to have respect for the profession and to respect the efforts of those who have gone before in order to develop the profession as it is today.

## Understanding the culture of nursing

A second aspect to building a sense of identity is an understanding of the culture of nursing, including the unwritten rules and expectations students encounter in the clinical environment.

What I was seeing in the clinical subjects that I was teaching was students coming back from prac and running into problems and it related to them not understanding the unwritten rules that are out there. And a lot of that related to understanding the culture of the place and how that culture came about, the history behind the culture within the organisation. (P1)

I think that has to be understood now because we are still fighting the antecedence of our strongly gendered past, and the hierarchies that respect this still stay. So I don't think you can understand and operate as a fully fledged critical, aware professional unless you have some understanding of where your professional group has come from historically and sociologically... that is in relation to power and social structures and gender. (P4)

...but it's very difficult to challenge students when they go into practice and they see conformity and compliance, and they experience the compulsion to fit in. (P18)

It certainly gives you that basis of understanding...why some of the practices that we have are still with us today and perhaps the roots of some of those practices. (P20)

Through understanding the development of the culture within nursing, a number of academics believed students gained a more comprehensive

perception of nursing; they saw the 'bigger picture'.

I really think that nursing history gives students the framework on which to work from. It allows them to have an understanding of the things that have been important in developing nursing in the past. (P1)

And I think it's important for them to understand... that's one of the contexts... to give the big picture and the broad picture of nursing is important. (P11)

We use it as a demystifying process, which is quite a useful place to begin and use the historical framework for what we're doing in nursing now a days in mental health to set it in context for them, and to encourage them to reflect on their own beliefs around mental health and illness. (P21)

Thus, participants saw that teaching students about the history of nursing contributed to professional identity by allowing them a deeper understanding of the profession of nursing and how the past influenced present practices and expectations. In this way, students were expected to enter into the clinical arena with a more realistic appreciation of that environment, a key factor in developing resilience.

### **Clearer vision and empowerment**

The third element in developing a professional identity relates to understanding those factors that have affected past events and seeing how these continue to be influential. The nurse academics saw this as a key to empowering students so they would not be content to simply accept the status quo.

I want students to think about what has influenced nursing in the past and to understand those factors are still an issue now. That we still are influenced by political issues, by the political agenda, by the way society sees nursing and health in general and economics of course. (P1)

I think students have to see it in the broad picture, nursing is an evolving profession and that it's never static, that it's ever changing. (P6)

There are the usual clichés about 'you have to know about the past, not to repeat the same mistakes'. But, you also have to know what worked in the past and to allow that to happen again. I think it's very easy to see in hindsight, we don't always have great foresight... I think looking at history helps give us some foresight, gives us context, gives us a broader picture. (P11)

When you speak about the way in which our understanding of the past and... how that shapes the present and the future and having the analytical skills to handle that knowledge in a different way then I think people see the benefit of it. (P12)

Ultimately, nurse academics wanted students to be able to think differently about nursing and to approach nursing in a more critical manner.

How it actually changed the way they viewed nursing, and changed their attitudes towards nursing and what nursing was, and made them have a much broader understanding of the influences nurses in clinical practice can have. (P18)

So it's also about empowerment, and history... if you know, and you understand where it's come from ... then there's a lot of power and energy in that knowledge. (P21)

Overall, the nurse academics interviewed advocated that teaching students the history of nursing provided them with a strong sense of professional identity by helping them know their past and where nursing had come from; by exposing unwritten rules within the culture of nursing; and by allowing them to critically think about those factors that have influenced nursing and empowering them to take control of their future. All of these factors should help build resilience within the students. However, while there is a strong belief in the history of nursing being able to deliver on this, the presence of history within the nursing curriculum was minimal.

## History is a luxury

Although there was a strong association between history learning and professional identity, most of the nurse academics viewed history teaching as something that was dispensable when curriculum decisions got tough. There was a sense that history was a luxury, something that would be nice to know, but not critical to the performance of the student or to the new Registered Nurse.

And taking time out for these more philosophical subjects where students have got the luxury of looking and thinking back over time... or whatever else... in this sort of industry-ready graduate type thing... that doesn't come into it. (P3)

Because you know, history is a luxury subject, its one of those ones where you read, and you think and mull over it... and sort of talk about things that have happened and what could have been different and whatever else. So, in an ideal world it would be lovely to go back to having those types of subjects in the university programs, so it wasn't just...that it was driven as a profession... it's not driven totally from the needs of the industry. (P3)

The focus seems to be what they need when they get out there as far as where they need to be at on graduation, rather than... history being I suppose a bit of a soft topic, rather than a hard concrete practical topic. (P8)

There is a kind of a mind set... not among all students, but among some students of 'teach me what's going to be on the exam, that's all I want..., don't go giving me anything else'... you know, they are very exam focused, and getting finished and moving on, and I think that's part of how life is today. It's become faster and... like, the history of things is not seen as that valuable. (P22)

Because history was viewed as an 'optional extra', its place within the curriculum was vulnerable and as curricula underwent reviews, the place occupied by the history of nursing was threatened.

## The squeeze on history through a crowded curriculum

Nurse academics have to make some difficult decisions regarding what to put into a curriculum, and the health industry has been applying significant pressure to have 'work-ready' graduates. This has resulted in history being squeezed out of the curriculum.

It was developed very, very closely with our industry partners. And they want the graduates to be industry ready. You hear the term they want to 'hit the floor running' very quickly. And so they want them skilled up with all that practical knowledge that is applied from day to day in the health services. They're the ones that I think also have pressure on the university programs to have certain elements in there so that the graduates are ready. (P3)

Because the curriculum is so jammed with everything. And the argument no doubt would be 'we would love to have it, but what are we going to take out if you're going to bring that in'... There is such a push to get the basic medical surgical skills, the basic paediatric skills, the basic fundamental physical and technical skills of nursing, and mental health skills in... that they tend to take precedence over other things, and in a three-year program, it is very hard to get it all in. (P11)

I don't know if you understand with curriculum development it's becoming more and more squeezed. That we only need to teach the essentials, and this is what the essentials are. (P22)

As a result, the history of nursing has been lost from the curriculum in many instances, or reduced to a 1 or 2 h lecture within the three-year program.

I just think it has got missed because we need to cover so much in the curriculum, that it's just been missed. (P8)

So, that was quite embedded into our curriculum. But, once we had to condense down, you

know from five units down to four units, then a lot of that was actually omitted. (P10)

In 2006 we had a change in the curriculum and a couple of units were merged together and the unit that contains a lessened amount of the history of nursing is not in a unit... The change in the new curriculum I'm afraid has moved us more towards... very much an emphasis on clinical nursing. And so those units that encourage thinking and analysis have tended to be rather crowded I'm afraid. (P12)

But over many curriculum reviews, we seem to be always having a curriculum review... a lot of the nursing history kind of fell out of the curriculum because units were absorbed, and two units then became one unit, and one of the casualties has been the component on nursing history. (P16)

The constraints of having to include a whole range of things... of learning outcomes that students need to demonstrate in order to register for the profession, means that often the history of nursing will be relegated to a small component as a kind of taster, introduction at best... and at worst could be viewed as something that you have the energy and luxury of undertaking at a postgraduate level. (P21)

Clearly the history of nursing is being lost to the curriculum, but this also means it is being lost to the students who undertake these programs.

### **Students not feeling part of something bigger and more enduring**

The final aspect related to this study is that students are the ones who are not being given the opportunity to develop an understanding of their past, and hence build professional identity.

Well I think today's students don't have enough history to be able to value it. And how can we expect them to value something they don't know. (P10)

So, yeah, I think that the historical is terribly important and perhaps overlooked in some curriculums [sic]. I know that at [name of university] they had none... they taught nothing on the historical perspectives of nursing in their whole curriculum. (P17)

I don't know that they do, straight away... but, I think perhaps they might give more pause for thought as things move on in their careers. I don't know that they do. But maybe it's up to us to try and instil a respect, an acknowledgement for our historical roots when we're teaching at this level. (P21)

Without the history of nursing finding a place in the curriculum, it is difficult for students to gain an understanding of their past, of being able to form a strong professional identity, of being able to understand and challenge the status quo and have the clarity of vision to allow them to feel empowered and in control of their future.

### **DISCUSSION**

In a recent analysis of nursing textbooks used by nursing students throughout the twentieth century, Walker and Holmes (2008) highlighted the construction of nursing education has always emphasised technical instruction over reflective or critical pedagogy. As such, the history of nursing has never gained a strong foothold within the professional milieu of nursing. It could be argued it didn't need to be included formally in the syllabus. When nursing education was associated with training hospitals, students were embedded in the traditions of the hospital hierarchy and this underpinned the development of strong professional identification and connection (Brennan, 2006; Gregory, 1988; Sheehan, 2005; Strachan, 1996). Indeed, those who completed the nursing apprenticeship within the hospital environment often held onto this professional identity for the remainder of their lives, regardless of how much nursing they undertook, and is evidenced in the common saying, 'once a nurse, always a nurse'.

However, with the move of nursing education into the tertiary sector from the mid 1980s, the traditions and socialisation associated with hospital training was lost. Instead, students relied on the formal content in the curriculum to provide them with the basis of their professional identification and to give them the values associated with nursing (Horton, Tschudin, & Forget, 2007). Without these values and that sense of identity, graduating nurses are at risk of experiencing personal conflict and low self-confidence leading them to resign from the career for which they had spent three years preparing (Hodges et al., 2008). For the sake of the longevity of the nursing workforce, nurse academics can no longer subscribe to the view that the science should take primacy over the art of nursing within the curriculum.

This study into the viewpoints of Australian nurse academics regarding the place of nursing's history demonstrates a clear association between teaching the history of nursing with the development of a professional identity. Yet, it was acknowledged that the demands of industry for 'work-ready' graduates was causing more technical instruction to be included in the curriculum at the expense of those aspects that develop professional identity, a key factor in building resilience within the workforce, and thus retaining nurses in the industry. This issue of the healthcare industry demanding new graduates be able to take on the same workload as experienced Registered Nurses is one of longstanding. In 1926, a prominent American nurse identified the problem with the nursing shortage was that the profession was putting new wine into old wine skins – it was expecting new graduates to solve the problems of workforce retention (Geister, 1926). The results of this study would suggest little has changed in 80 years. The difference now, however, is that there are no longer the same numbers of young women vying for nurse training places. The context of nurse preparation is very different at the beginning of the twenty-first century. Miers (2002) suggests nursing's preoccupation with the practical has meant nurse academics have not always felt comfortable within the

academic environment, and as a result, students have been denied the opportunity to recognise and examine the structural and cultural context of their own profession. This related to a tradition of nursing emphasising the practical aspects of their work to increase their own social status in a world that saw practical skills as separate and inferior to intellectual activity. This same process can be seen in the manner in which the history of nursing has been squeezed out of the curriculum within Australian nurse education. History requires the students to think and to reflect on the past and to make connections with the present; it encourages critical thinking (McKenzie, 2005) and is thus essentially an intellectual activity.

Borsay (2009), a social historian, recently challenged nurses to consider the relevance of history to the nursing profession. She noted history was firmly located in the 'arts' paradigm of the science/arts divide, but emphasised understanding the past enhances our understanding of the present, that history facilitates critical thinking, and can offset the excesses of the medical model. She suggested this was possible by focusing more on professional identity, particularly in a time when nurses work in a variety of settings necessitating constructing multiple meanings for their work. The history of nursing thus offers nurses a sense of connection with the past and therefore with each other. However, without a recognition of the value of history, nurses have experienced what Nelson and Gordon (2004) term a 'rupture' with their past, leaving them to question their own contributions to the profession. Only by introducing students to the history of nursing, and by demonstrating the value of that history, are nurses going to overcome their estrangement from their past, and in doing so begin to build towards a collective sense of professional identity.

## CONCLUSION

This study into the teaching of nursing's history in Australian universities has demonstrated that while there is recognition of the value of nursing's history in providing a sense of professional identity for neophyte nurses, the rhetoric does



not match the reality and the history of nursing is being squeezed out of the curriculum. The consequences of this continuing to occur are more significant than losing some 'niceties'. The nursing profession is risking its own sense of connectedness. The nursing workforce is risking retention to gain experienced nurses. History cannot be seen as a luxury and therefore expendable. The system of education for nurses no longer has informal mechanisms of passing down the traditions associated with nursing. Nurses are not graduating with a strong sense of professional identity and this is becoming evident in the number of resignations seen in the first year of practice. Nursing graduates can only truly be 'work-ready' if they have developed not only those technical skills and knowledge that allow them to function as Registered Nurses, but have also developed the professional skills and knowledge that allow them to remain as Registered Nurses long enough to contribute to the development of the profession in the long-term. Teaching students their history can provide them with these skills and knowledge and allow them to connect with nurses of the past, present and future.

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