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**The nurse's liberation: An evolutionary epistemological
paradigm for nursing**

Murphey, Carol Jean, Ed.D.

The University of North Carolina at Greensboro, 1987

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THE NURSE'S LIBERATION: AN EVOLUTIONARY
EPISTEMOLOGICAL PARADIGM FOR
NURSING

by

Carol Jean Murphey

A Dissertation Submitted to
the Faculty of the Graduate School at
The University of North Carolina at Greensboro
in Partial Fulfillment
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1987

Approved by

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APPROVAL PAGE

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MURPHEY CAROL JEAN, ED.D. *The Nurse's Liberation: An Evolutionary Epistemological Paradigm for Nursing.* (1987) Directed by Dr. Sarah Robinson. 112 pp.

Rapidly changing technology and complex bureaucracies in health care institutions represent modern society's attempt to deal with human problems. But it may seem to those nurses whose altruistic values led them to choose their profession that such progressions serve only to further complicate health care. The challenge to nurses is to maintain clear vision in their own practice so that health care will continue to improve.

This study offers an evolutionary epistemological paradigm in an effort to explain the evolution of theoretical approaches in nursing as society has become more technologically sophisticated. Nurses' social consciousness must grow in sophistication to balance the technology. This study explores the evolution of nursing theory development from pre-humans caring for their young to Florence Nightingale's military traditionalism to humanist views of Dorthea Orem and Martha Rogers to the professional socialization theory of Ada Jacox. The expanded paradigm offers a place for spiritual reality and healing arts adopted from ancient cultures. Hence, the paradigm attempts to reveal the evolutionary balance of practical technology with spiritual and moral reality, supported by the writings of Ken Wilber and Martin Buber.

Such evolution characterizes society only through the characterization of individual awareness. Likewise, nursing progresses as a profession as individual nurses progress in knowledge and practice. Yet, within a paradigm of evolution, progress, and change, nurses,

like all humans, grasp for consistency in their attempt to define their profession. My search for a unifying definition for nursing concludes that nursing is love. This definition is based on the theological premise that God is Love. Such a three word phrase appears to be simple in writing, but is so utterly profound in meaning. For without God there would be no love, no life at all. Nursing as a healing and teaching and caring profession can only be practiced most successfully with love and reverence for humans as they are created in the image of the Creator. Therefore, at the summit of the epistemological paradigm knowledge and love unite to form an ultimate state of being. The nurse, in this light, stands in mystical communion and carries out what is right and good and humane for the patient.

DEDICATION

**To nurses everywhere who do
what they do for love.**

ACKNOWLEDGEMENTS

Only one author appears on the title page of this piece of work. But I cannot take credit for all of the material, nor the energy that went into its production. A person learns who her true friends are when she undertakes such a task. For their encouragement and support I am eternally grateful. I wish first to thank my parents, Pat and Donna Murphey for tolerating my bouts of frustration, depression, stubbornness, and selfishness. Only they have seen me at my worst in every aspect, and loved me anyway. They are ideal parents. Likewise, the rest of my family, especially my sister, Shawn, and sister-in-law, Jimmie came to my rescue on countless occasions. For emotional support, I could not omit Tami and Neil Caulkins. Their insight and Biblical knowledge helped me in the formation of my own faith, which inspired the philosophy about which I have written. Another friend who was both supportive and inspirational is Dan Wishneitsky. Dan is not only a brilliant mathematician and theologian, but he always seemed to be there when I needed him. Likewise, George Haig, friend and scholar, has been helpful not only for his willingness to listen, but also for his seemingly limitless knowledge of theology.

I am most humbled to Dr. Sally Robinson, my committee chairman. Sally is a unique blend of strength and sensitivity, two characteristics which proved to be invaluable in the critiquing and editing

of this work. I could not have asked for a better mentor. My other committee members offered gentle leadership and guidance, for which I am thankful. Dr. Dale Brubaker's advice in writing and enthusiasm, Dr. Joe Bryson's graciousness, and Dr. Nancy White's kindness persisted throughout the development of my research.

There are three books that I mentioned frequently throughout the following chapters. They are so well written and comprehensive it almost seemed that I should say to the reader, "Go read these books, and then you'll know everything I know." Every nurse and nursing educator should read Helen Cohen's The Nurses Quest for a Professional Identity. Cohen did extensive research in search of answers to the question, "Why are nurses frustrated?" Her research provided a launching-off point for my work. The framework for this study reflects the paradigm created by epistemologist, Ken Wilber. He combined the philosophies of both western and eastern great thinkers in his book, Eye to Eye. The book is a massive undertaking, but well-organized and a fascinating integration of many ideas. Finally, one book I wish every human being could read is Martin Buber's I and Thou. The book is undoubtedly a classic. It shines right beside the Book of John in describing man's relationship with God. The few excerpts I've borrowed from it hardly represent fully the poetry of Buber's writing nor the wisdom among its pages.

I could not mention the above books without having mentioned the people who introduced the last two works to me. It was Dr. Fritz Mengert, whose charismatic teaching of knowledge and love deeply

touched and triggered the truly human part of me. Fritz is a professor of philosophy and epistemology at the University of North Carolina at Greensboro School of Education. Also, the secretary, Anita, is an amazing person who somehow by nature has learned everything that Fritz knows, without having studied the elements of love. Instead, Anita lives by them.

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PREFACE

In these days of complex bureaucracies, technologies, and multiple ideologies, the world of the nurse can seem painfully confusing at times. Not only do nurses assume the responsibility for their patients, but also suffer the burden of oppression from bureaucratic hierarchies. Pharmaceutical and technological advances created with the intention to make life easier, sometimes only serve to complicate it further. And the nurses, even in their tattered and weary states struggle on with their feet planted firm in faith, heads floating with dreams, and hearts energized with love and compassion for the human race. And yet, with all the theories and technologies included in nursing education, faith, hope and love seem to be overtly neglected. These gifts transform simple people into heroes who can withstand the chaos of health care institutions.

I have written these pages from the perspective of a hospital staff nurse whose formal and personal education has been a long process. The paper, largely autobiographical, is one nurse's search for truth, and a search for what nursing is. I have some stories to tell; most of them are both sad and funny at the same time. Life appears to be like that, sad and funny. And truly, this is but one of the many paradoxes that the wiser people notice. Or perhaps the very wisest see few options in the world because their vision is clear, and a

straight path is set out for them. They are the children of destiny who know how the world could be, and do what they can to make it that way. We all have known at least one person like this, so in tune to the human condition and always willing to listen. Whereas they believe in the hereafter, they live for the present spending most of their lives giving joy, comfort, and hope to those around them. They are the saints, poets, and prophets. They are the teachers whose inspiring words still ring in our ears, and they are the nurses whose warm touch had healing power. Such people have classic distinction quietly choosing to do the right thing regardless of the consequences brought upon themselves. They have integrity; they have style. If there exists an ultimate goal for nursing education, or for education of any kind, it would be to create more people such as these.

In our endless attempts to seek a professional identity and to create ambitious nurses who will change their world, I hope we also educate a few who choose nursing for the pure love of it. For these nurses, a professional identity already has been found. Helping others is a joy. In fact, they have difficulty understanding those who don't enjoy it, and who worry about such things as law suits and bad hours and low pay and working holidays. The future must hold a place for them. Their work, their example to the world, is so very important.

What I have seen in nursing is a progression and evolution of awareness. Once merely servants to physicians, nurses have continuously sought an identity of their own. Florence Nightingale made

the first attempt to separate the caring of nurses from the curing of physicians and established a traditional education curriculum based on her military authority. As time went by, education became longer, more intense, and more sophisticated. At present, we refer to education of nurses as professional socialization. That is, we socialize ordinary people into professionals. And for some time now, this has been an effective model. However, it has served its time well, and like the militaristic authoritarianism of Florence Nightingale, the socialization model will also become dated. Upcoming youth are ready for a new approach, something with more freedom of expression and meaningfulness to the self. A new paradigm for students will help them discover themselves and their own path, rather than following only the path others have set before them. Educational programs, rather than being "finely oiled machines", as director of a masters in nursing program proudly described it, will become a panorama of possibilities all of which focus on the students finding their niches in nursing, as well as direction of their lives toward happiness and conscientious freedom.

Actually, the new paradigm, as is often true with apparently fresh approaches, is not entirely new. It is founded on the same factors that make the world interesting: the integrity, imagination, and idiosyncracies of individuals. Yet, the binding together of the uniqueness of individuals lies in universal law: love one another. The old traditional values are important to uphold within the new paradigm. We cannot afford to lose human dignity in the quest for

technology, nor individuality for the sake of standardization. Education today is often more technical than it is creative and mechanistic rather than humanistic.

Nursing, as with life itself, requires technical skills, social skills and creative thinking. We have known that for some time, but have failed to identify what kind of teaching results in creative thinking. Leslie Hart, contemporary epistemologist, claims that schools are "brain incompatible" (Hart, 1983, p.44). That is, teachers often fail to help students link one thought with another, hence creating a new chain of thoughts. But if they can do this, the result is an exciting discovery process for the student. Education, then, has life. And life is something schools could use more of including schools of nursing. Few and rare are the teachers who can relate to students, make learning fun and enticing, yet be deeply serious to the meaning of their calling. Likewise with nurses, the serious few often become weary. Then life begins to dim and burn out. How can a lifeless person give life to patients? If there is any one thing that both nurses and teachers do, it is to generate life. And life is conceived from love.

The research for this dissertation began with a series of difficult and profound questions: What is education? What is nursing? From where has it come and what is the destiny of nursing education? From the process of asking and answering these questions, this essay developed, sometimes to the point where I neglected these essential routines--eating, sleeping, paying bills. I came up with endless

possibilities, but finally rested on a few that satisfy me. This effort is a collection of my thinking, my and a few more provoking questions to serve as brain-teasers, and test the strength of souls.

The work began with a definite structure and plan. When I started to write down my ideas, I found many paradoxes, dilemmas, ironies, and questions that still puzzle me. Because of the existence of these elements, I found some points to be inconsistent, but not necessarily contradictory. To the intellect, inconsistencies may seem too human to be profound. We are likely to forgive our own complexity more easily than forgiving those of the people we desire to understand and love. As with people's personalities, the most interesting writing may be free-flowing, multi-faceted, and personal but very serious in direction and meaning. Ambiguity is not only a problem with issues presented in the next chapters, but it is also a problem nurses and educators share. In fact, it is a fact of human existence in general.

I have presented an evolutionary epistemological paradigm applicable for nursing education. The paradigm is evolutionary because it is based on the supposition that the world was created and is in the process of creation. It is epistemological because it tackles some difficult questions about knowledge and intelligence. The answers rely on theology and have to do with a person's moral choices. I call the framework a paradigm to emphasize the concept of "pattern".

The pattern is based on my observations of the world and the works of philosophers and scholars I have enjoyed reading.

Finally, I have dedicated this work to comfort and enlighten nursing educators. However, many of the ideas have applications for management, administration and practice as well. While it has taken seven years for these ideas to crystallize into readable form, I hope the meaning lasts much longer. And for those nurses who do what they do with love as their meaning, I present this work as "The Nurses's Liberation: An Evolutionary Epistemological Paradigm for Nursing Education."

CHAPTER I
INTRODUCTION

Framework of the Study

Nursing has been in quest of a professional megatheory since Florence Nightingale made the first written attempt to define and outline the parameters of the profession. Since Nightingale, other scholars such as Martha Rogers (1970), Marlene Kramer (1977), Fawcett (1983) and Dorthea Orem (1985) have added their ideas to the literature. The present theories in nursing are based on megatheories from other disciplines. The findings of sociologists, anthropologists, and cosmologists have been studied and applied to nursing and nursing education. The unique features of a predominantly female profession can be studied from many angles. For example, one issue often debated concerns the three levels of education considered equally adequate for credentialing before state licensure. In addition, the individual perceptions of each theorist adds even more variety to the language and issues studied. As a result, there exist many views about what nursing is, what nurses do, and what will happen in the future of the profession.

This view of nursing includes the nurses' desire for political and economic equality, which are rarely mentioned in former theoretical explanations. Yet, seeking equity should not be our only goal.

We have so many more dreams to pursue for human existence. Hence, this study incorporates the intangible human aspects of nursing which are involved in healing, helping, and educating. In a fast-paced, pragmatic society, moral and social values seem to have taken a back seat to economic values when it comes to decision-making in the health-care political arena. While undoubtedly political and economic justice are valid goals, there are also social and ethical issues at stake. The dilemma the nursing profession faces reflects the paradoxical nature of the world's unfolding. Can we become more humane as technological advances occur? In search of the answer, the two predominant views of the world, that of orthodox religion and modern science, will be discussed later in the text. The concern of the individual is to somehow integrate these dualistic ideas as she searches for greater truth and meaning of her work and of her life. Such integration represents the artistry of nursing as it is for the art of living.

Presentation of the Problem: The Call for
a New Paradigm

The call for a fresh framework in nursing is quite obvious on both personal and professional levels. Much has been written of the frustration and turmoil in nursing. Helen Cohen documented and analyzed the literature revealing this turmoil in her book, The Nurses' Quest for a Professional Identity (1981). In the anxious quest for a professional identity, nurses may have forgotten one very important factor in our role--joy. The nurse's work is so profoundly religious that she must do it responsibly, lovingly, or not at all. Sadly, "not

doing it at all" appears to be the option of many intelligent and creative young people today, as revealed by the November 1985 issue of the American Journal of Nursing. The American Journal of Nursing article revealed a drop in the standard scores as well as the number of nursing school applicants. Said one dean, "The women's movement has wrecked nursing; young women are being encouraged to be anything but nurses" (p. 1291). This lament reflects the perception that new options for creative young people lie outside the profession.

An epistemological paradigm requires reconceptualization in nursing education. Nursing teachers need a greater understanding about how learning occurs. Instead of imposing a standardized idea of professionalism upon students, there is a need for fresh teaching methods of the polemic nature to help students get in touch with their own values and thoughts, while helping them relate to new and different ideas. Faculty must encourage self-expression by involving students in dialogue which leads to self-revelation. Teachers, then, should recognize students as unique individuals whose being is unfolding rather than simply being formed by the institution. Focusing on individual unfolding builds internal spirit while relationships build spirit between the student and others. This spirit, this energy, represents the element necessary for effective teaching and healing. Hence, a new paradigm should offer explanation for the success of healing arts which lie beyond customary scientific practice such as therapeutic touch, foot reflexology, and therapeutic massage. These healing arts are currently in use and are being found effective, however present nursing frameworks fail to explain why this may be

true. A new framework ought to be more open and organic, allowing for the growth of spiritual knowledge. Scientific and spiritual truths should be able to co-exist in a general framework. Thus, an open paradigm will help free nursing of the boundaries of medical and business models yet maintain selected practices offered by each.

This philosophy, as presented here reveals a autobiographical journey of a hospital staff nurse's own evolution of consciousness. The individual evolution reflects the evolution of the universe, and of the nursing profession in search for a more sophisticated view of consciousness. While trying to avoid sentimentality, I have spoken of love, faith, wisdom, joy, courage and art, rather than skills, leadership, accountability, and the like. Many common words have been used to describe uncommon phenomenon. Likewise the writings of Martin Buber and Ken Wilber offer insight about the nurse's relationship with God and the development of a spiritual reality. The phrase "moving up" means a growing relationship rather than vertical moves in a bureaucracy. Hence, the paradigm is often traditional in word choice and structure, but its intention is liberating, if not radical. While recognizing a place for order, the paradigm frees nurses to live according to their own consciences, rather than exist only within the restrictions cast for them by man-made structures.

Metaphorically, this view of nursing that presents levels of knowledge represents another way to study nursing. It includes epistemological framework for making decisions useful for teacher-

student and nurse-patient interactions. The purpose of describing this autobiographical journey toward an epistemological framework is to offer more understanding about the nature of nursing. Most importantly this study should provoke thought, stimulate imagination, and create inspiration for nurses and students regardless of their career settings and roles.

Description of the Study

The methodology used in this study is an autobiographical journey toward the construction of a personal paradigm for nursing. Support for the paradigm is derived from Ken Wilber's Eye to Eye: The Quest for a New Paradigm (1983). The Wilber evolutionary paradigm converges both Eastern and Western philosophies to form an explanation of consciousness. Wilber asserts that all mankind is evolving to levels of higher consciousness. Similarly, the consciousness paradigm is reflective of the nursing profession's evolution toward liberation.

Included in the methodology is an explanation of paradigm development as a method of research. Patterns of phenomenon emerge from personal experience, colleagues, and from the literature. For those less accustomed to accepting revelation as a form of knowledge, explanations are added and support is given for the use of phenomenological evidence in research. The writings of modern curriculum theorists such as Ross Mooney (1975), James Macdonald (1977), and Dale Brubaker (1982) claim that the more unique and creative research does not eliminate imagination, intuition, emotion, personal values, per-

ception, and experience. With support from the reconceptualist educators and researchers, as well as support from evolutionists, a new paradigm for nursing is created.

Purpose and Significance of the Study

The main purpose of this paradigm for nursing is to improve nursing education. The paradigm creation involves five processes or steps of thought. First, the reader will find the polemic voice in defense of the paradigm creation as a method of research. Next, the two predominant views of the world and their significance to nursing are discussed. Then Ken Wilber's "three eyes" paradigm is analyzed in attempt to converge the world viewpoints as yet another option to nursing. Following Wilber, is the creation of an evolutionary and liberating paradigm for nursing. Finally there are suggestions on potential use of this paradigm in nursing education.

This study has significance because nursing, as in any dynamic field, needs continual renewal of the paradigm. No one before apparently has attempted to apply an epistemological paradigm for nursing and nursing education. None has been published.

Although an evolutionary epistemological paradigm is quite new for nursing, many of the concepts and ideas have been in circulation among philosophers and theorists for quite some time. This paradigm has some unique features in that it merges both ancient and modern ideas in a new way for the profession of nursing. Furthermore, it reveals evolutionary patterns for the past and present developments in nursing and also offers speculation for nursing in the future providing nurses with room to grow both as individuals and professionals.

In so doing, the epistemological portion of the paradigm forms from converging empirical, logical, and mystical levels of knowledge. Descriptions of nursing as both a technological science and a healing art are interwoven throughout the paradigm. Nursing is both a career and a calling.

Organization of the Study

The balance of Chapter I presents a polemic case for using paradigm development as a method of research. The writings of Ross Mooney, James Macdonald, and Dale Brubaker offer support for the methodology. Chapter II includes Review of the Literature, particular attention is given to the theories in nursing as they have evolved over time. In Chapter III, Ken Wilber's evolutionary paradigm is presented and is given support by other evolutionary theorists. The Wilber model is then applied to nursing education in order to illustrate the profession's movement toward liberation.

Chapter IV probes how individuals develop a spiritual reality. Emphasis is given to the writings of Martin Buber, especially from his classic book, I and Thou (1970). Buber indicates that the spiritual liberation of the human begins first with the individual. Likewise, the nursing profession will make strides through the successes of individual nurses. Finally, Chapter V contains positive possibilities for change in education and practice, prospects for effect on students, summary and conclusions.

Explanation of the Methodology

Whereas so far the chapter has introduced paradigm creation in nursing as an important endeavor for research, the next section tells how the paradigm developed, what thought processes were involved, and which reconceptualist theorists support such thought processes as a method of research.

It must be made clear at this point that "paradigm" and "theory" do not mean the same thing. Although this work is a paradigm, "theory" and "theorists" often are used because they are the more commonly used terms, and certainly less awkward than "paradigmists", despite technical and definitive accuracy. Paradigms, theories, conceptual frameworks, models and the like, are similar in two ways. The purpose for making them is an attempt to explain how a person perceives phenomenon, or more poetically, how one tries to make sense out of a chaotic world. The same is true for literature, be it fiction or non-fiction. Someone once said that the only difference between fiction and non-fiction is that fiction exaggerates the truth in order to make the author's perception of the world more clear. Hence, passages from Sherlock Holmes' stories are selected to illustrate points.

Most humans appreciate clarity. They like order. Whereas each paradigm, theory, and model attempts to make order of the world, and each is the result of mental activity, their functions differ. A paradigm is a mystic's wholistic view of the world. That is, a mystical eye sees the "big picture" by stepping back and studying the world as a whole, rather like studying an impressionist's painting. The reasoning behind the paradigm formation is inductive, whereas Sherlock

Holmes' theorizing requires deductive reasoning. Inductive reasoning requires intuition, metaphorically a feminine trait as even Doyle himself praised.

...the best plans of Mr. Sherlock Holmes were beaten by a woman's wit. He used to make merry over the cleverness of women, but I have not heard him do it of late (p. 18).

Therefore, this paradigm is a personal concept of nursing. The word "theory" is used to demonstrate the analysis of thinking, for the purpose of explaining the steps of orderly thought processes within the larger paradigm. A theory, then, is more methodical, scientific, and metaphorically masculine. Theories can be subjected to practical test because they attempt to make possible predictions of phenomenon. A paradigm has a softer and more open-ended purpose than a theory. This study includes illustrative figures which provide a visual condensation of the paradigm.

The Process of Paradigm Formation

The paradigm I envision for nursing involves several years of observation, recognizing patterns of phenomenon, speculating causes of the phenomenon, obtaining knowledge of the available literature, and soaring with a vivid imagination. In short, the idea for a paradigm was conceived much the way all ideas, all dreams, all paradigms, all visions are conceived: the input of the senses, the interpretation by the mind, the inspiration of the heart, and the determination of the soul.

Support in the Literature

Nursing needs paradigmatic thinking. In order for nursing to associate itself among other erudite fields of study, nursing must

have a body of knowledge to distinguish itself. Helen Cohen, sociologist, stated in The Nurse's Quest for a Professional Identity (1982) that nursing must develop a professional paradigm. She claims that having an established theoretical base distinguishes professionals from technicians. A theoretical approach must differentiate the technical and professional functions and by separating the physicians' curative powers and the nurses' caring powers in such a way that the nurse's care role has autonomy and recognition (p. 152).

A paradigm describes and attempts to explain phenomenon. From that explanation nurses derive guidelines for taking action. The same basic purpose holds true for theory-building. James Macdonald (1977) described a theory as a "map that tries to explain what is going on in a territory." Behind every sound judgment for action, such as in a nursing intervention, lies a solid theory, a panoramic paradigm, a vision of the "big picture" where all phenomenon fit together.

The Mind Work

Creating a paradigm is mind work or brain play. To the person who formulates ideas, theories, and models for fun, it is play, much like fitting together a jigsaw puzzle or deciphering a cryptogram. To the person who takes the work only seriously, the search for an absolute answer suddenly becomes work. Hard work. The following sections reveal the thought processes involved in paradigm development, illustrated by the thought of physician Arthur Conan Doyle speaking through the character of Sherlock Holmes.

Making observations. One could surmise that in order to draw an accurate map of the territory, one must know a few details about it.

It is proposed that Holmes' success as a detective was a result of his finding brain teasing puzzles as joyful games. He thrives on activity for his mind. In "A Scandal in Bohemia," the impudent detective declares:

It is a capital mistake to theorize before one has data. Insensibly, one begins to twist the facts to suit theories, instead of theories to suit facts (Doyle, 1953, p. 5).

Thus, the first step in theory formation is gathering data, making observations, obtaining facts. The simplest form of knowledge, then, is factual or empirical knowledge. Yet, facts serve the foundation for theory building.

Connecting Observations and Concepts to Formulate Theories.

While empirical evidence (data, facts, observations) is important, the next step in paradigm construction is the juggling of the evidence into concepts. The researcher interprets the meaning of the observations and finds relationships among them. Dale Brubaker called this step of paradigm building as "making connections between key concepts" (1985). Marc Belth, in his book, The Process of Thinking (1977), defines thinking as making metaphors or analogies, which sounds very much like making connections.

Leslie Hart uses more technical language to describe thinking. He bases his assertions on brain neurophysiology, and despite his claims to be greatly humanistic, he refers to the work of the brain as programmatic. Hart uses computer metaphors to describe the brain's function.

We live by programs, switching on one after another, selecting from those that have been acquired and stored in the brain. (Hart, 1983, p.89)

and

The capacity to use old programs in fresh combinations seems to underlie what we call creativity. (Hart, 1983, p.88)

According to Hart, the brain functions on input transference, storage and output of information. Yet since Hart's viewpoint is basically neurophysiological, he accredits the uniqueness of humans largely on genetic and environmental factors.

To be different is to be normal, only within the artificial, bureaucratic structures of training and education would clones be welcomed. The structures are abnormal, not the people. (p. 115)

Thus, Hart points out the greatest problem of education and our society. We expect people to conform to some imaginary norm. Many unique talents go undiscovered simply because the person failed to meet the criteria for normality in the setting. Hart points out, the norms are artificial, but people are real and should be our primary concern. Ironically, many of the greatest thinkers were people who were, in their day, considered eccentric. The plight of genius is, sadly, having to deal with loneliness, criticism, and being misunderstood. As usual, love for thinking as well as creative thinking itself, has its drawbacks.

The Problem of Significance. We might reasonably conclude that much of paradigm construction involves a passion for complex thinking, for making associations between things or ideas. Like most talents, a passion to do it well leads the person to doing it well, or at least

better than many other people. The great thinkers, then, are largely misunderstood by on-lookers. Hence they are often subjected to jealous gossip and wrong assumptions that they are always in the state of genius. For instance, there is the tale of the young Albert Einstein. He showed up at his girlfriend's house, was greeted by her father who slammed the door in the inventor's face. Einstein had forgotten to put on his pants. Whether the tale is true or not, we may never know; it may not matter. It would be funny no matter who it happened to, but to think it happened to a genius makes it just a little funnier. Likewise, the seemingly bizarre ideas or behaviors of geniuses may be the result of sheer boredom with routine and normality. In the "Sign of the Four," Holmes complains:

My mind rebels at stagnation. Give me problems, give me my work, give me the most abstruse cryptogram, or the most intricate analysis, and I am in my own proper atmosphere, I can dispense with artificial stimulants. But I abhor the dull routine of existence. I crave for mental exaltation. That is why I have chosen my own particular profession--or rather have created it.

("The Sign of the Four")

Furthermore, Watson, whose fascination is to regard Holmes' thinking rather than doing much of his own, often failed to follow the detective's method of connecting details in order to formulate an hypothesis. This passage is also from "The Sign of the Four."

Watson: "But it was not mere guess-work?"

Holmes: "No, no; I never guess. It is a shocking habit--destructive to the logical faculty. What seems strange to you is only because you do not follow my train of thought or observe the small facts upon which large inferences may depend."

Wisdom: One Step Further

Beyond the logical faculties of reasoning lies yet another source of knowledge. It is that source of knowledge which demands of humans more than calculating, more than mind play, more than gathering and processing information about the world. Some say it is the source of and the use of knowledge that distinguishes brilliant people from great people. Ross Mooney listed the great people as Lincoln, Gandhi, Moses, Jesus, Buddha, Plato, and Confucius. They were people with a vision of the world as a harmonious community of free individuals. That source of knowledge is wisdom. It is insight and enlightenment. It is revelation. It is knowing what should be done and doing it; hence, it is the most creative form of obtaining knowledge. No one quite understands what happens in the mind that causes great flashes of insight, or how ideas spring into the mind. But there are beliefs and theories. It is important to keep in mind that theories serve to explain but may actually be entirely wrong. That is why an open, and critically thinking mind is as important as a creative one. The following is a quote to help keep these ideas in perspective; that they are merely creations of the mind.

A word-theory is verbal, or "armchair." It never touches ground, so to speak, to become more substantial or real than speaking or writing, and hence can never be subjected to hard-nosed testing...Freudian theory provides a mammoth example...A good theory should not lead us to expend a lot of energy in the wrong directions. Efforts to use Freudian word-theory to treat psychosis or severe anxiety, for example, have produced outcomes as much disputed as the theory itself. To accept Freudian ideas, one must have a deep belief, akin to religious faith, that they have validity. (Hart, 1983, p. 23)

The argument set out by Hart is that proving the validity of ideas born of revelation is a complex issue, a problem to be explored in Chapter III.

The Gift of Wisdom

If wisdom is the greatest form of knowledge, how does a person obtain it? Whereas we study and conduct research to gather factual knowledge, and we use our brains to ponder and formulate theories, we consider good judgment a talent. In the Judeo-Christian tradition the gift of wisdom is granted to those with a sincere desire for it, and those with a reverence for God. And it is from God that wisdom is granted. In the Book of Job, God speaks directly to Job, assuring him that even the wisest men are foolish when compared to the Almighty. Yet, because He is a kind and loving Father, He gives us wisdom when we are humbled to Him. The Lord says to Job:

But if you have anything to say at this point, go ahead. I want to hear it, for I am anxious to justify you. But if not, then listen to me. Keep silence and I will teach you wisdom.
(Job 33:32-33)

Throughout the book, the definition of wisdom is clear; wisdom is fearing God. For example:

Behold, to fear the Lord is true wisdom; to forsake evil is understanding. (Job 28:28)

And so in reverent awe, we worship the Lord and gain wisdom.

Choosing a Judeo-Christian perspective, reverence for the Lord is affirmed in the New Testament, especially in the writings of saints Paul and James. Paul simply states, "All wisdom comes from God. He alone is wise." Paul, the most dramatically converted Jewish follower

of Christ, spent most of his life evangelizing to both Jews and Gentiles, assuring them Christ's resurrection brought salvation to everyone who believed in Him. Salvation, thus, is a turn toward wisdom.

St. James added that wisdom flows from a relationship with God. He wrote, "And when you draw close to God, God will draw close to you." Wisdom, then, comes from closeness to God. From James 3:17-18:

But the wisdom that comes from heaven is first of all pure and full of quiet gentleness. Then it is peace-giving and courteous. It allows discussion and is willing to yield to others; it is full of mercy and good deeds. It is wholehearted and straightforward and sincere.

The Methodist hymns of Charles Wesley often refer to man's relationship to God as "The mystical communion." Martin Buber, Jewish existential philosopher entitled his book on divine relationship, I and Thou. The knowledge of the sages and prophets is the kind which cannot be proven or put to test by "scientific" means. It cannot be perceived through the senses or reasoned by the virtues of logic. Ken Wilber claims that such knowledge is gained only by the "eye of the soul," the eye of contemplation of deep universal meanings and the destiny of the world.

Wilber cleverly summarizes his model for epistemology by using the Biblical metaphor, "three eyes." The "eye of flesh" detects facts. The "eye of the mind" understands logical associations, thinking and conceptualization and reflects on these. The "eye of the soul" understands values, moral dilemmas, but above all, strives to understand the will of God. The three eyes represent three levels of knowledge in ascending order. Confusing one "eye" for another is a

mistake, for once that occurs facts try to replace principles and principles try to replace God (Wilber, 1983, p. 9).

If it is true that there exists knowledge to be known beyond that which empirical research can reveal, and if research is the discovery of knowledge or more cleverly, re-research as if it has been known before, then we can assume that research can include more than making hypotheses, collecting and analyzing data, and reporting results. And if the researcher interprets data, then with what values, basic assumptions, and other unexplained, unwritten knowledge influences the interpretations? Can a student of research then reasonably conclude that research can involve knowledge that transcends facts? It is time now to examine seriously what is meant by research in both the rational, scientific, and interpretive points of view. Such epistemological understanding is necessary in order to validate the significance of the rest of the study.

A Word about Research

The Merriam-Webster Dictionary (1974) definition of research is:

Careful or diligent search. Studious and critical inquiry and examination aimed at the discovery and interpretation of new knowledge.

The high-technology movement occurring in the past thirty years has somewhat skewed the commonly held conception about what research entails. It seems that all research has been narrowly associated with scientific, empirical, or laboratory research. For example, L. R. Gay describes research (in the generic sense of the word) as a scientific endeavor.

The goal of all scientific endeavors is to explain, predict, and/or control phenomenon. This goal is based on the assumption that all behaviors and events are orderly and that they are effects which have discoverable causes. Progress toward this goal involves acquisition of knowledge and the development and testing of theories. (p. 5)

And:

Scientific research involves the scientific method which entails a number of sequential steps: recognition and definition of the problem; formulation of hypotheses; collection of data; analysis of data; and statement of conclusions regarding confirmation or deconfirmation of the hypotheses. (p. 6)

The problem with this particular definition of research is that it implies that only data-based scientific research is the valid way to know truth. Truth, it is assumed, is objective and free of human suppositions. Only the most naive research consumer could believe that any research, even data-based empirical research, is completely free of human motives; yet, rarely are such motives confessed in data-based research. There are comical examples of such omissions. For instance, the consumer would be suspicious, and rightly so, if a research study showing cigarette smoking is not harmful to lungs if the study admitted to having received a \$4 million grant from a cigarette manufacturer. And even the public would laugh at a Harvard University professor who said, "I don't think these statistics really mean anything, I just had to get published this year because my merit raise depends on it." How often do we know the true motive behind the research?

Another unfortunate circumstance resulting from a purely scientific definition of research is that little relationship lies between

the research and the researcher. The product is considered more important than the process and the producer, whereas relationships among the producer, the process, and the product are entirely neglected. Such is the complaint of artists. The consumer merely judges the product, not the effort and inspiration that was involved in the moderation. To judge worth and significance by the product alone neglects a great deal of life, and to neglect life is to neglect truth. Such is the argument of the curricular reconceptualists. Human dreams, struggles, emotions, and imaginings have as much (if not more) of a rightful place in research as young, male, white rats. It is for human life and the human experience that we conduct research, and for that reason alone, human life and human experience should be included in the research. Ross Mooney says it so much more beautifully.

As the poets know, it is out of dreams that the world gets made. It is out of the dream that man has of man that his decisions are born. In these fateful years, the critical element is the nature of those dreams. If the dream is one of bestiality and degradation, so the world will become. If the dream is one of warm humanity, of understanding and fulfillment, so the world can become. (Mooney, 1980, p. 105)

Mooney makes a dramatic appeal for dreamers and artists to focus on studying the art of humans living with humans. If there were more dreamers in the social sciences, and if those dreams could raise the awareness of humankind, how much better the world could be. To Mooney, the world begins with the individual's awareness of himself. And from this awareness, man finds himself not in opposition, but in deep communion with the entire human race. When one believes the

world can exist as a harmonious whole, one can dream it, and then one begins to live it. The role of dreamers is not just one of wild-eyed romanticism, but also one of profound human truths.

The plea of Mooney is similar to the plea of many modern education and curriculum philosophies. James Macdonald, for example, thought more school time should be devoted to children learning about children, rather than carrying out usual rote lessons. He claims that "sitting still" skills only prepare students to become blind obedient to authority. Seeking wisdom and insight does require passivity to God, but not always to human authority. One can learn more about the self and the world through active contemplation and reflection.

The best knowledge a person can have is knowledge about the self. Socrates' immortal quote was simply, "Know thyself." Therefore, the most valuable research is research about the self. For this reason, Dale Brubaker emphasizes the value of writing an autobiography (1982). Understanding one's own values and basic assumptions is essential in understanding how one views the world and makes judgments about it. Brubaker assumes, as do other reconceptualist educators, that the self cannot be completely removed from his observations.

While the data-based researchers of the empirical/technological schools of thought become aghast at the idea that nothing is absolutely objective, the reconceptualists rather enjoy a personal touch to research, as is obvious from their writings. The research becomes a personally meaningful endeavor. And the glory of it all is that once the individual recognizes his or her own significance and uniqueness,

then grows also an appreciation for the value of all humans. In fact, Mooney would argue that such self-realization is the best and perhaps only reason that research should be conducted.

Perhaps the point of every reconceptualist is that research can be soft, creative, romantic. Their ploy is to put back into research, and back into education, back into life, a little passion and joy that the technological race has seemingly stolen away. E. E. Cummings may have said it best in these words:

While you and I have lips and voices which,
Are for singing and to kiss with,
Who cares if some one-eyed son of a bitch
Invents an instrument he can measure Spring with?

Summary

If research, the search for truth, can include personal experience and reflection as well as empirical data collection, then the language used to explain such personal ideas need not be clinical and technical in order to be valid. Empirical validity is only one form of validity that is suitable for one form of knowledge--observable events. Reconceptualist curriculum theorists believe there can be and should be some human warmth in research and in writing. That is, the world can be seen through poetic and artistic eyes as well as through the eyes of scientists. Likewise, nursing can be described and practiced as an art and a calling, as well as a science and a business. Yet for the most part, the technical, clinical, and pragmatic issues are addressed in our most popular journals and largest universities. In a sense, we have sold our souls to technology and money by giving these aspects our full attention.

Nurses must resist the current trend to rest goals on standardization, equalization, and socialization. There is much further to go, much more to do. Nurses have moved from traditional physician handmaidens to semi-professionals with a loose philosophy on man, health, and environment, to more sophisticated care-givers. But often the technical advances have replaced the human concern--the love. The separation of love from the technical skills perhaps is first introduced in the way we teach nursing theory. The concepts of health, patients, environment, and so on, are studied as entities outside of the nurse, rather than a part of her. The concepts are studied as facts and objects, rather than recognizing that the significance lies in their relationship with each other and with humankind. And more profoundly, the most precious relationship, that between humankind and his Maker, is mentioned only in church-related schools, falsely implying that faculty of public institutions do not have religious beliefs. Analogically then, students may come to believe that faculty don't believe in love. Part of the mission of the new paradigm is to put love back into nursing education realizing its significance in nursing's struggle for freedom as a profession.

The next chapter includes the review of literature. It is the largest chapter and covers the process of nursing theory development over the years. Nursing scholars have attempted to build theories and create philosophies of nursing. Other researchers such as Helen Cohen (1983) and Peggy Chinn (1983) have attempted to collect the works of scholars prior to this work. This study does not attempt to repeat Afaf Ibrahim Meleis' (1983) suggestion that nursing is evolving in

scholariness. Instead, a review of some nursing scholars' works offers credit to research conducted this far, and also sets the stage for the paradigm presented in this paper.

CHAPTER II
THE REVIEW OF THE LITERATURE

The Phases of Nursing Conceptual Frameworks
Through Evolution

The progression of nursing toward an autonomous profession follows the path set out by the dreamers in nursing. Recall the quote from Ross Mooney's essay in Chapter I, "As the poets know, it is out of dreams that the world gets made." The dreams can then be conceptualized into frameworks and models, eventually turned into practice, hopefully providing that the dream is one that could benefit the human race.

The birth of nursing conceptual frameworks was probably not so much a product of deliberate intellectualization as it was born from necessity. That is, the first caring was an act of love long before any theory existed. Early mammals cared for their young based mostly on natural instinct. But as pre-humans grew more socially conscious, they cared for other helpless of their kind. The elderly, sickly and orphaned members of the group received help from the well as long as food supplies were plentiful (Bronowski, 1973, p.40).

When nursing became a means of earning a living it was carried out essentially free of theory as we know it today. Wealthy landowners, aristocrats, and royalty employed nurses to care for their helpless family members as best as they knew how. That is, nurses relied solely on "common sense", ordinary unplanned observation, at

that time. With the development of hospitals, nurses then became assistants to physicians, still without a knowledge base of their own. Florence Nightingale made the first recorded attempt in English to create a separate body of knowledge for nursing. Thus began the mission of nursing to identify itself as an independent profession with a theoretical knowledge base. Other theorists have speculated, idealized, and communicated their ideas about what nursing is and what nurses do.

The next section explores the phases of nursing theory development as it has evolved over time. The phases presented here are traditionalism, conceptualization and professional socialization. The gradual progression of nursing conceptual frameworks leads finally to the conceptual framework proposed in this work--liberation. The theories presented not only focus on the development of nursing as a profession but also emphasize the effects theory development has on education curricula. The connection between theory and practice is based on the key supposition that change in practice occurs by change in theory which is disseminated through education.

Revealing the progression of nursing theory, education and practice should bring about feelings of optimism for nurses. Yet it must also be remembered that the greater freedoms we seek, the greater responsibilities we assume. The ascension of nursing follows a path of willingness to accept accountability for ourselves. This theme will become more apparent throughout the unfolding of the growth of

nursing from a profession of traditionalism to conceptualization to socialization and finally to liberation.

Traditional Nursing Education Theory

Finding one suitable definition for traditionalism proved to be a difficult task. The word has several connotations which are applicable to nursing education.

The American Heritage Dictionary defines traditionalism as "the passing down of elements of a culture from generation to generation" and "a body of unwritten precepts." Traditional values and universal laws are based on the inherent knowledge God gives to human beings (Gardner, 1978). Such traditional school of thought is based on the Socratic premise that truth pre-exists man. Few people know the truth and they are given the responsibility to teach it to younger generations. Traditionalism denies the notion that values are dynamic and truth changes as the universe changes and differs from person to person, culture to culture (Harmon, 1979; Rokeach, 1969; Titus, 1974).

Ralph Tyler is accredited with having proposed traditional curriculum models for education which include the steps of planning objectives, selecting learning experiences, the organizing learning experience and evaluating the educational program. Remarkably similar steps are used in planning research and implementing the nursing process. The system serves the purpose, an educational end, and is meant to operate in a society where a number of constraints are present (Giroux, Penna, and Pinar, 1981, p.18). Adjectives such as "linear" and "teacher-proof" have been attached to the Tylerian

learning-by-objectives model. It is like painting by the numbers; not very creative, but it prevents making a mess. It represents learning by following the pattern established by someone else rather than learning for the personal and spiritual meaning of it. Little integrity, save for the satisfaction of "staying in the lines" is involved. Despite the limitations for self expression and personal intellectual growth, the application of Tyler's model based on behaviorist and Skinnerian theory, spread across other disciplines especially through methods such as business management by objectives and to nursing, nursing education and nursing management. Human beings and the care for human life became programmatic. The resulting product is "nursing-by-the numbers." The advantage of programmed care is that one doesn't have to think...someone, presumably smarter, has done that already and the nurse need only follow the pre-planned pattern.

Often, nurses who do their job well because of intrinsic motivation and raw intelligence find nursing care plans and evaluation by objectives silly and sophomoric. One hospital in which the nursing administration was proud of the number of care plans written, also neglected the the viewpoint of the excellent nurses who called care plans and checklist nursing notes "idiot" sheets. "They are," summarized one well-respected RN, "for people who don't know how to do their jobs or just don't want to do it. The good people only need a blank piece of paper for their notes." The excellent nurses do what they do based on one general rule rather than many objectives and that rule is "Do unto others as you would have them do unto you." That one rule epitomizes traditional philosophy, Judeo-Christian religion

and universal truth. Traditional education then, may have valid intention to teach universal values but foolish means learning by objectives. Sometimes teachers fail to remember that learning is more subjective than objective. Because educators overlook the difference between the two, students suffer from boredom and from doing meaningless busy work and consequently, nurses suffer from job dissatisfaction, perhaps through rejection of the mechanical, object-object style of work?

Physician Handmaiden Concept

Traditional nursing is often associated with the physician - handmaiden concept where the physician does the thinking and the nurse helps him by carrying out tasks. In this mode, the nurse is required to use little critical thinking or intellect in order to do her job. Hence, little formal education beyond job skills is needed.

Prior to Florence Nightingale there was no formal nursing education. People were trained on-the-job to care for ill, dying or child-bearing patients. There was little structure, methodology or theoretical background that explained why nurses were taught what they were taught. Seldom was the question raised, "Could we have been taught wrong?"

Because of the lack of standardization and accreditation, hospital based nursing programs sprang up all over the country. The problem became ridiculous; fifty bed hospitals could train nurses. Nursing education was unsophisticated if not barbaric. Students, inexperienced and barely educated, staffed hospitals free-of-charge

(Bullough and Bullough, 1982, p.15). The unsuspecting public entrusted lives to students who lacked theoretical knowledge and mentors. Such lack of sophisticated knowledge and unquestioning respect for physician authority worked fine as long as the physician made competent decisions. However, every human, physicians included, can make unwise choices. The wise nurse has the right and the responsibility to offer alternative suggestions.

Differentiating Handmaidenism from Traditionalism

However, the analogy commonly made between traditional nursing and unsophisticated nursing is not always correct. Traditional school of thought is associated with Socratic philosophy; some people know the truth and some do not. Those who know the truth teach those who don't. Some students "get it", and they also become teachers, and so on. The confusion with the phrases "traditional nursing" and "physician-handmaiden" rests in the wrong assumption that only physicians can know truth and hence it is their responsibility to teach, guide and dominate nursing.

Florence Nightingale, founder of professional nursing, determined that nurses can also have a sophisticated body of knowledge, separate but interdependent with medical knowledge. Nightingale's theory can be called traditional, although it was radical for her time, because it emphasizes traditional values such as cleanliness, orderliness, warmth and quiet to aid healing (Torres, G. 1980). Nurses were expected to conduct themselves in a mannerly and self-disciplined way. Teaching and management of students was authoritative and stern, very British, very civilized and very traditional.

Following the Socratic notion, Nightingale supported traditional thought. She not only practiced nursing as a professional, but also philosophized, taught and recorded her ideas for future generations. As a result, Nightingale became the model nurse and a household name. Because she was a model nurse she has also become a role-model for nurses. Plutarch claimed that models and heroes made the best teachers because they demonstrate successful living. Hence, a traditional nursing teacher could essentially describe the life and works of Nightingale and say, "There she is, the model nurse. Now, go be like her." Plutarch would also stress that teachers themselves should be role model for their students. Like Nightingale, nursing faculty must demonstrate independent and creative thinking if they expect students to do the same. Traditions, then, are handed on to younger generations.

The point is that traditional nursing is not necessarily ultra-conservative and prudish. Nor should traditionalism imply being blindly obedient and passive to authority. Instead the traditional values nursing cannot afford to lose are those of caring, responsibility and being of service to humankind and our Maker. In Martin Buber's I and Thou, Walter Kaufman translates, "We are not so rich that we can do without tradition" (Buber, 1970, p.31). The values of traditionalism are worth keeping. The need for change rests in the method of teaching them. Dictating values and prescribing expected behaviors may produce overt positive results, but without internalization of them the result is resentment and frustration. The teaching must be creative, inspirational and artistic.

Key Factors Affecting the Progress of Nursing

Three significant factors have retarded the recognition of nursing as a profession. First, nursing is predominately a woman's profession and in Western culture women have been slow to expect or demand equal rights, participation and comparable pay. Change has been slow, sometimes unbearably slow.

Secondly, nursing continues to have three levels of entry into practice. Whereas most professions have at least baccalaureate education, registered nurses may enter practice with associate degrees or hospital diplomas. The debate to establish one entry level of education has gone on without resolution. But there is little denial that the destiny of nursing aims toward one level of entry. To require a baccalaureate degree is one example of the attempt to standardize nursing in hopes that standardization will promote the professional image and practice in nursing. Arguments flair as to whether or not a college degree makes any difference in competency of practice. Demographic studies have shown that diploma and associate degree nurses tend to lower socio-economic backgrounds, have lower SAT scores and tend to stay in their hometown after graduation. By contrast, baccalaureate nursing students travel away from home to attend four-year university schools of nursing, have higher SAT scores and consider many options in nursing job opportunities (Wren, 1971).

Because of her more liberal education, the BSN student is perhaps a little more free than the other students. Despite the accusations that BSN graduates have "a lot of book knowledge," but not enough experience to function competently after graduation, research

shows that they are not only as competent, but also display higher degrees of professional behavior (Meleis, M. & Farrell, K., 1974). Because she has invested more time and money into her education and may come from a more elite background, she expects more from her job. And because she expects more, she demands more and will eventually get what she demands. Such behavior is a threat to the status quo; hence, she is met with resistance by conservative persons in power, particularly institution administrations and political officials who may fear changes that might set precedents for economical and political or social revolution.

As nurses began to understand the key factors retarding the maturity of nursing, theorists conceptualized frameworks in an attempt to enlighten colleagues to these problems. They hoped that increased awareness of the problems would stimulate an interest to make changes in these areas. The next phase is called Conceptual/Empirical Education Theory. Emphasis was placed on empirical data collection, analysis and interpretation with the belief that more information and more theory would guide the profession toward positive goals.

Conceptual/Empiricist Education Theory

Henry Giroux and William Pinar coined the expression conceptual-empiricist to describe education curriculums that emphasized policy-making and innovating. The launching of the Soviet satellite, Sputnick (1957) resulted in the rise of technology (Giroux et al, 1981, p.4). Science and mathematics rose in importance. Coinciding with this rise of technology, baccalaureate and masters nursing

programs entitled themselves the "Science of Nursing." During this period the art of nursing, the art of healing and caring acquired the label of "traditionalism", which was a legitimatizing way to say silly romanticism. Empirical research took precedence over human philosophy. Also during this era, economics, perhaps because it can be quantified in terms of dollars took precedence over ethics.

During the empiricist era, knowledge had to be proven by facts and numbers. It was assumed that if a phenomenon existed it could be measured. Tyler's learning by objectives model was taken to the extreme. Everything was to be evaluated in terms of objectives and numerical value. Accordingly, nursing care became highly standardized as evidenced by checklist nursing notes and performance evaluation forms. Documentation became as important as human practice. Those nurses who showed on paper that they were excellent were rewarded as such. Even then the rewards were miniscule. The assumption was that putting a numerical value on nursing service would eventually lead to distinct price tag for care and that would be nurses' economic liberation.

To counterbalance the rigidity of standardization and legal, technical documentation nurses, often to the dismay of image-conscious administrators, developed a more relaxed dress code and working atmosphere. The guiding philosophy became "humans helping humans" rather than "do as I say or else" authoritarian approach. Nursing scholars developed more humanistic conceptual frameworks in attempt to explain this changing social attitude.

Humanity-Oriented Theories:

Humanity-oriented theories of nursing explain nursing as an intervening force to help human beings with health concerns. Dorthea Orem developed a theory of self-care. A patient is a person with a self-care deficit and the nurse intervenes to teach, treat and restore the patient toward being able to help himself. The deficits are related to man's physical, intellectual and emotional needs throughout his entire life, beginning with the embryonic state. Humans struggle to deal with environmental and developmental conditions and the nurse provides knowledge and assistance for the universal self-care requisites--air, water, food, elimination, activity and rest, solitude and social interaction, prevention of hazards and desire for normalcy (Orem, 1985, p.91).

Orem suggested that nursing should involve community service, technology and artistry. She defined the art of nursing as the "ability to assist others in the design, provision and management of systems to improve or maintain human functioning at some level of effectiveness" (Foster and Jansen, 1980, p.91).

While Orem developed self-help theory, Martha Rogers professed that nursing historically has meant service to humanity. Thus, the history of humanity is reflected in the evolutionary development of nursing (Falco and Lobo, 1980, p.165). Rogers bases her theory on the principles of the General Systems Theory which is a way of looking at the universe as a whole, whereby the human being is a subsystem of the cosmos. She purports that humans are unified wholes consisting of

integrated parts and possessing integrity. Life is continuous, creative, evolutionary and uncertain (Rogers, 1970, pp.ii, ix).

The individual and the environment exchange energy and matter because they are both open systems. In this way humans are creative and dynamic--just as is the universe. In addition to matter and energy, humans have imagination, thought, language, emotion, sensation (Falco and Lobo, 1980, p. 166-167).

Conclusions of Humanity-Oriented Theories

Humanity-oriented theories by authors such as Orem and Rogers did not come into view until some nurses sought to apply scholarship to nursing ideals. Nursing education began to move from hospitals to colleges after World War II. This was a result of a study conducted by Esther Lucille Brown, an anthropologist, who recommended that nursing have stratified levels of education (Bullough and Bullough, p.15.) For the most part registered nurses continued to take training in the hospital, but also took classes in a building that served as a dormitory and school. Students slept, ate, took classes and studied together; essentially unexposed to other curriculums and schools of thought for either fear of contamination or economic efficiency. Although baccalaureate programs were growing in popularity, by 1977, hospital-based diploma programs still out-numbered them. Yet, the emergence of baccalaureate programs resulted in more scholars and nursing theorists. Usually these people became educators like Rogers and Orem. As a result of such educators nursing became more aware of its complex knowledge base. Skills in physical assessment and task-oriented interventions remain important; however, it was assumed that

theory added breadth and depth to the students' thinking. The profession itself became more complex as nurses looked critically at themselves as compared to physicians, pharmacists and other health-care providers. Nurses desired the professional status and economic rewards that the male professions had over nursing. This desire brought about a new framework for nursing education called professional socialization.

Professional Socialization Nursing Education Theory

Ada Jacox, (1973) sociologist and nursing educator, claimed that nursing education involves socializing nursing students in a way that they internalize the values of the profession. Nursing educators present and teach the values of the profession in such a way that nurses prove they have met the requirements society demands of a profession, i.e., autonomy, distinct expertness and control over practice and education (Cohen, 1981). Professionally socializing students became the modern goal and methodology of nursing education, particularly on the baccalaureate and masters levels.

Even before nursing education found a place on the university campus, the enculturation process thrived in hospital-based diploma programs. Students trained together, studied together, even ate and slept together--the same people, every day, every hour. Nursing students had little opportunity to mingle among art, science, literature, or history students. Hence, a very narrow view of the world existed--except for a few bold students who ventured out on their own.

Defining Professionalism:

The concept of professional socialization implies an enculturation or more dramatically, an initiation to an accepted set of values. It comes to reason then, that professionalism is defined by certain values, at least according to Jacox. Traditionally it was thought that medicine, law and theology possessed those attributes which determine a true profession (Jackson, 1970). However, broader definitions evolved to include any commitment that has unique body of knowledge which is learned through many years of intense study. Professionals are granted special power and privileges by clients and community because they have special knowledge and responsibility for their clients.

Carol Lundrigan did extensive study on professionalism for her master's thesis (1982). She summarized the criteria of a profession as:

1. A service orientation to the community compatible with an established code of ethics.
2. A formal, standardized and rigorous educational program that emphasizes independent intellectual functioning and is eventually based in an educational institution of higher learning, e.g., a university.
3. A specialized body of knowledge that is constantly updated through research, therefore, life-long education is necessary to gain this new knowledge.
4. A sanction of autonomy by the community and self-regulation in defining policies and functions of practice. This is carried out through a cohesive professional organization empowered to set standards and discipline its members.
5. A commitment to and active engagement in the occupation throughout most of one's life.

Lundrigan concludes that professionalism is embodiment of the spirit of a profession and is exhibited in the behavior of its members.

Individuals who possess professionalism are called professionals.

The Works of Socialization Theorists

The research of sociologists and anthropologists offer insights about the development of personalities within cultures. The culture of the nursing school creates the climate in which students learn. The two leading nursing education theorists who used professional socialization/enculturation frameworks were Ada Jacox and Marlene Kramer. Jacox's framework describes stages of professional socialization. Summarized, the stages are:

Stage I: Dependence. Faculty are mentors and students accept their knowledge on faith. However, the student is expected to realize the relationship between theory and practice.

Stage II: Negative/Independence. Students test the limits of the environment. Peer groups and even rebellion may occur. The faculty must have sound philosophical and theoretical basis for the values they stress.

Stage III: Independence/Mutuality. Students learn to select relevant information, set priorities and how to maintain a professional facade. Students can curb inappropriate behavior such as premature professional behavior that appears presumptuous (Merton, 1968).

Stage IV: Interdependence. In the final stage the conflict between the need for interdependence and the commitment to mutuality is resolved. The student takes responsibility for his or her decisions and actions (Jacox, 1973 and Cohen, 1981).

Several other sociologists reveal findings from which nursing schools could learn. Cohen (1981) stated that the cultural climate determines how the student feels about the values and behavior demanded. For example, authoritarian climate causes students to react

with silence and even passive aggressiveness. Margaret Mead, founder of psychological anthropology, noted universal resistance to authority and students perceive their faculty as authority figures because they possess the power of evaluating the student. Seymour Sarason, educational theorist, says the climate of a setting depends on how the leader creates it (Sarason, p.232). The effective leader attempts to create a climate of mission and enthusiasm, trust and openness. Helen Cohen, a sociologist who studied nursing school cultures extensively, asserts that nursing educators must become less authoritarian and more capable of understanding and accepting their own and students' aggression. That is if students are to become autonomous and determiners of their own behavior, then nursing educators must trust that students are capable of doing this. But the problem is severe, as Cohen points out.

Most people are capable and willing to see authoritarianism in others and suggest changes; few are ready to see it in themselves and volunteer to change. The problem of authoritarianism is so deep-rooted in nursing that it has the strength of early group identifications involved in ethnic prejudice (the socialization of women). If nursing is to change as a profession, the leaders within the group must come to grips with authoritarianism and their lack of trust, which is not just a lack of trust of outsiders but of each other (p.155).

Judith E. Meissner (1986), a published staff nurse, describes authoritarianism in both the classroom and on-the-job quite graphically. Students and young nurses are subjected to what she calls "insidious cannibalism" because both nursing faculty and nursing administrators expect students and young nurses to fend for themselves early. Because most students are naturally timid, the threats by drill sergeant teachers spiritually devour students. The students

become obedient without question or challenge for fear of being belittled for lack of insight and understanding. James Macdonald, curriculum theorist, claims that such authoritarianism in the classroom which leads to blind obedience is part of the "hidden curriculum" which prepares students as blue-collar workers. Ironically such behavior is the antithesis of professionalism.

The intent of professional socialization is to help students internalize the values of the profession. However, as both Cohen and Meissner point out, few faculty members are sophisticated enough in their knowledge and teaching skills to do this well. Besides, to say that one is going to socialize students to a certain set of values sounds as though the teacher knows the right values to have and the students do not. Students may not perceive this pendency as authoritarianism, but instead a kind of parentalism or patronizing. Ken Wilber, a modern philosopher who believes in evolution of the consciousness, describes parentalism as "we know what's best for you" social engineering. That is, slightly fascist. He cautions against this kind of thinking, saying:

No, because in this paradigm transcendence cannot be forced. There are only participants in emancipation. You can only force slavery; you can't force a person to be free (Wilber, 1983, p.196).

Individual freedom and integrity is important, but as young professionals enter bureaucratic institutions, they may find that their freedom is limited. Unlike being a student where responsibility and decision making usually only effects the self, the nurse's decisions effects patients' lives and relationships among specialized professionals as well as the image of the institution. A nurse educated

with professionalism employed by a fixed institution creates a dichotomy of values called biculturalism.

Biculturalism

The basic problem with professional socialization theory rests in the paradoxical nature of the profession. Although nurses may perceive themselves as professionals, they are also subjected to the authority of the bureaucracy in which they work. Nursing educators are left with the problem of teaching a dualistic value system; the values of the profession and the values of the bureaucracy. Students socialized to the high ideals of the profession find much resistance to their ideals in the health care setting. Reality, they claim, is kept a secret from them. The exasperation of new college graduates spilled out to Wall Street Journal staff reporter, Jennifer Hull in March of 1986.

Nurse Bernadette Moran will handle four patients today, one of whom is near death. By mid-morning Ms. Moran is racing. A dying lung cancer patient is grasping for air. Ms. Moran grabs another nurse to help suction the man's trachea so he can breathe.

She wants to suction the man more often, but three other patients need attention. She whisks a wastebasket from the room and moves on. "There is nothing more frustrating than to know you have to do patient care and can't because you don't have the time," she says.

Marlene Kramer (1974) attributes the high level of nursing attrition to culture shock. The difference between the professional ideals of nursing school and the blue collar treatment nurses receive in hospitals "shocks" the student. Resulting feelings are frustration and despair, and often the decision to leave nursing as a profession.

Kramer pleads for nursing schools to prepare students for reality shock by teaching them bicultural values. Ideal professional values help lead to improvement and change in health care delivery systems. Teaching students to cope with everyday employment reality means also teaching job skills to help them succeed at their first job after graduation. Kramer stresses the importance of examining one's own values. The nursing student must be encouraged to explore her values and discuss conflicts she may have experienced. Clarifying students' personal and professional values influences nurses' perceptions of their professional role, and such clarification requires careful communication.

Kramer's recommendations for nursing students are:

1. If you first don't succeed, keep trying.
2. People are unpredictable.
3. There are always at least two alternatives.
4. Conflict is healthy and creative.
5. Work that is meaningful is of paramount importance.
6. Develop a tolerance for uncertainty.
7. Development of interpersonal competence in several social contexts is necessary for maximum effectiveness.
8. Learn to recognize when outside help and support is needed and find someone who can provide it (Cohen, 1982 p.146).

Probably the greatest contributor to the understanding of the problems of nursing is Helen Cohen. Cohen taught and counseled nursing students for twenty years. Her book, The Nurse's Quest for a Professional Identity (1981) is an accumulation of nursing research,

case studies and her one-to-one contact with students and nurses. She concludes that most complications in nursing stem from a lack of theoretical bases and the socialization of women to authoritarian cultures. If nurses are to become professionals, there must be a universally accepted theoretical base to guide decisions and professional behavior. Unfortunately, most people know what professional behavior is, but they just don't do it. Secondly, both faculty members and managers need to "loosen the reins" on students and young nurses. More trusting and open environments will lead to better understanding and communication of values and perceptions. Finally, all medical personnel need to learn to deal with medical uncertainty. No one can know the absolute outcome of medical intervention in every case. Knowledge is based on research and historical experiences yet individuals are unique not everyone will respond to intervention the same way. But overall, the one word to lead to professional behavior is autonomy. The ability to make decisions and determine courses of action, and assuming responsibility for both. The hope for women and nursing is that they will grow to this level of maturity, that they will be autonomous rather than to wait for someone to make them autonomous. And that is professionalism.

Problem Arising from Professional Socialization Model

The works of many researchers have attempted to uncover the problems in nursing and most of them to date have been concerned with the professional identity of nurses. Despite the sincere effort of scholars to close in on the definition of professional, it seems that

anyone and everyone claims the title of "professional" these days. "Professionalism" has turned into one of those bandwagon terms that although conceived by intellectuals, infiltrated the world of academics, and then made its final descent to marketing consumer products and services. Flipping through the yellow pages reveals "Professional Dog Trainers," Professional Janitorial Service," "Professional Hair Replacement." An even more profane use of the word is found in journal advertisements recruiting nurses for hospital employment. "We will make you into the professional you dreamed of being," claims one hospital. A sophisticated graduate would think, "Right. That's why you have to advertise in national journals for nurses, because you treat them like professionals." Because recruiters are up-to-date on nursing education theory, they use latest jargon such as "professional" as bait to lure unsuspecting new graduates. In doing so, marketeers have made the word cheap and cliché. It is almost blasphemous.

Along with the growing shallowness of the meaning of professionalism came the popularity of the "professional image". A well groomed and mannerly exterior took precedence over internalized values. Although at one time the meaning of professionalism meant depth of knowledge and social responsibility, the overuse and misuse of the word resulted in superficiality. As the problems of the socialization framework for education become more obvious, so do the indications for a fresh paradigm for nursing education.

The evolution of nursing education has stalled at the socialization stage for almost fifteen years. Even before nursing found a

place on university campuses, hospital based programs enculturated students. Certain behaviors and attitudes were expected and rewarded. Unfortunately the very characteristics nursing needs, such as assertiveness, risk-tasking, curiosity and open communication are the same characteristics squelched by faculty as Helen Cohen concluded (1981).

The universe and society are evolving and nursing too unfolds slowly and sometimes painfully. So far nursing education has evolved from discrete skills learned on-the-job, to Tylerian-based objective-oriented programs, to professional socialization. The concept of professional socialization implies enculturation or initiation. One premise of socialization is that the culture exists apart from the individual. Therefore, the education process is one of molding and shaping the individual to "fit" into the culture. Nursing school curriculums based on socialization brings to mind a modeling clay toy that presses out uniform little nurses. Granted, the works of Kramer, Cohen and Jacox clarified some of the problems in preparing professionals to work in bureaucracies. But is the goal of education to socialize students for the culture of health care agencies? This challenge to Jacox's socialization theory and Kramer's biculturalism theory is deeply perplexing because the underlying question remains, "What is education?"

Socialization and the Consumer Orientation

The premise of socialization "that the individual is molded to suit the culture" is a key concept in some educational ideology. The assumption carried out becomes the curriculum preexists the student

or even more profoundly, truth exists outside the student, as noted by Ross Mooney (1975). Mooney, Professor Emeritus at Ohio State University, claims that such consistent dualism results in "consumer orientation". The consumer orientation results in passive behavior; the teacher gives out information and the students consume it and then return the information on a multiple-choice test. Mooney presents the picture as such:

Let the student come and be pitted against the stabilizing core of the subjects. Hire as teachers those who know a subject well and let them teach that subject. Group the students in convenient numbers and send them to a given teacher to 'get that subject.'

If a student doesn't get a subject, mark him down, for, of two things, the subject and the student, it is the student who is in error and needs to be disciplined to suit the discipline. The subject is the basic, elementary construction to which the student submits. The subject is the creator; the child the created (Mooney, 1975, p.185).

The consumer orientation is well-bred into students throughout their education, and as a result, even graduate students have difficulty switching over to becoming a "producer" of research and developing an action orientation. Mooney also says:

He (the student) can't give himself because there is no substantial place to put himself which is good and hopeful and natural and freedom-giving to his mind and spirit (Mooney, 1975, p.186).

Socialization and the Hidden Curriculum

James Macdonald, Michael Apple, Henry Giroux and Anthony Penna and others have written extensively on the "hidden curriculum". Phillip Jackson (1968) coined and named the concept to explain the relationship between schooling and the larger society. That is, the student is assumed to be submissive to the teacher, the school

policies, and the subject matter in order to prepare her for the submissiveness of blue-collar occupations.

Giroux, Penna and Pinar (1981) cite three traditions in educational theory which have helped to illuminate the socializing role of schools and the meaning and structure of the hidden curriculum. They are (a) a structural-functional view of schooling, (b) a phenomenological view characteristic of new sociology of education and (c) a radical critical view, often associated with neo-Marxist analysis of educational theory and practice (p.212). The structural-functional view relies on positivism, the notion that there are absolute rights and wrongs. The object of education is to socialize the student to accept unquestionably the values, beliefs and rules dispensed by the larger society. Students become passive recipients by going through the process of socialization. The result is conformity by training and students lose the ability to make meaning for themselves (Giroux, Penna and Pinar, 1981, p.213). This theory of socialization is very similar to the Tylerian structure of curriculum development, which is often called "traditional."

Social-phenomenologists present a model of socialization in which meaning is offered by situations of social interaction as well as created by the students themselves. Thus, knowledge is both pre-existent of the students as well as created by them. Though students' language and social interaction is heavily emphasized, the authors argue that this model overlooks the students' perceptions of the external world and the way it does not always correspond to the actual structure and content of the world.

Thus this position not only fails to explain how different varieties of classroom meanings, knowledge, and experiences arise, it also fails to explain how they are able to sustain themselves. By focusing exclusively on the microlevel of schooling, on studies of the classroom interaction, the new sociology falls short of illustrating how political arrangements influence and constrain individual and collective efforts to construct knowledge and meaning (Giroux, Penna, and Pinar, 1981, p.214).

The social-phenomenological theory closely resembles the humanity-oriented theories for nursing. Although humane treatment of patients was adopted by nurses, the humane treatment of nursing students failed to materialize in some schools.

The Neo-Marxist theorist assumes that students have equal potential, but have come from a variety of home backgrounds. The objective is to create a community of individuals who openly share their experiences and perceptions of the world. Each student is recognized for his or her uniqueness and significance.

The Neo-Marxist approach is an effort to liberate the mind and spirit of each student. When such liberation occurs, the classroom becomes alive with sharing creative ideas and cooperative action. In the words of James Macdonald, "The school should be life, not just preparation for it."

It is my appeal for nursing schools to come alive. Seldom have I heard a student exclaim, "I loved nursing school! It was fun and interesting and I met so many neat people...teachers and students!" Whereas most people have fond memories of college, it seems that the fondest memory of nursing school for many was getting out. Does learning have to be predominantly painful? Even the Proverbs say, "A wise teacher makes learning a joy; a rebellious teacher spouts

foolishness." So for the teachers who build up student distaste for physicians, or who insult women for putting their children ahead of their job, take heed to the words of the prophets. Learning can be enjoyable, meaningful and have a personal reality.

On to Liberation

Nursing is outgrowing the concept of professional socialization. Surely we need to assume the sense of responsibility and knowledge that is characteristic of professionals. Yet, socialization implies that one does what the society expects. The truly great and interesting people have gone beyond what society expected of them. If they didn't do something more than the average person, then they certainly did something different. It is said that Albert Einstein couldn't talk until he was five years old and as a young man, he arrived at his girlfriend's house without his pants on. No, he had no common sense. The sense he had was incredibly uncommon. His mind was on higher and greater ideas. If all people were perfectly socialized, there would be no new ideas, little or no imagination and little creativity. Socialization theory stops short of mental and moral liberation. Daring to take this next step is crucial in the education of nurses. Whereas we usually produce competent clinicians, we fail to stimulate the minds of the dreamers. The words of Ross Mooney ring in my ears:

As poets know, it is out of dreams that the world gets made. It is out of the dream that man has of man that his decisions are born. In these fateful years, the critical element is the nature of those dreams. If the dream is one of bestiality and degradation, so the world will become. If the dream is one of warm humanity, of understanding and fulfillment, so can the world become (Mooney, 1980, p.105).

My dream for nursing education is that educators will find a place in the curriculum for the dreamers, the truth-stretchers, the sages and story tellers to offer their view of the world and how they think it should and could be. Because they seldom limit their minds and hearts according to society's rules, the dreamers season the world. But because we concern ourselves with students stuffing their brains with the latest facts and nursing theories, we rarely help them rely on inherent knowledge and wisdom, much less speculate upon the future through the virtues of their imaginations. Frankly, we bore them to tears. I recall a personal anecdote:

One day when I was desperate for inspiration to help me plod along with my dissertation, I decided to drop into an undergraduate nursing class. It happened to be a senior level research course. The class was an auditorium and the teacher stood behind a podium on the stage. It was 8 a.m. on a cool March day. The students were wearing sweaters and sitting still in the slightly darkened room. That teacher didn't stand a chance.

She opened the textbook and began to write on the board. She opened her mouth to speak and out came, 'There are four kinds of research.' Her voice had the irritating edge of someone scratching her fingernails across the blackboard. Besides that, the entire lecture was obviously a summary of the textbook content. Two people on my row fell asleep. I was one of them.

No wonder graduates often roll their eyes when the word 'research' is mentioned. Students conclude that research itself must be as boring as studying about research. The dreamers and the students who enjoy research are probably a little different from the typical nursing student. Besides just learning the technical skills and fundamental knowledge to do the job, they also have an insatiable curiosity. Questions such as, "I wonder why?" and "What if?" and "Could it be?" float through their brains while other students merely

ask, "Will this be on the test"? Squelching the spirit out of students by overloading them with tedious technical assignments only reinforces the status quo in nursing. As Ross Mooney said, "It is out of dreams that the world get made." To squelch the dreamers is to assassinate ideas. Such assassination does not appear as blatantly immoral as the assassination of Abraham Lincoln, Martin Luther King and John Lennon but as culpably wrong. The way teachers kill is much more painful and slow, as if the suffering will prepare them for the suffering they will confront as nurses. This pressure on students to suffer is called "professional socialization," and we act as if it is really good for the student. And if we are successful at this kind of conformitory education, then the existential moments in which a person sacrifices everything for an universal right or freedom is made rare in nursing and nursing students. The relentless unselfishness of nurses can be illustrated by Kohlberg's hierarchy of moral development.

Kohlberg's Hierarchy of Moral Development

Level I: Preconventional Level of Moral Development.

Stage I: Punishment and obedience orientation. The physical consequences of the action determine its goodness or badness. Avoidance of punishment and unquestioning deference to power are valued in their own right.

Stage II: Instrumental relativist orientation. Right actions are those that satisfy one's own needs and occasionally the needs of others.

A person in Level I, according to Kohlberg, maintains "good behavior" only to avoid punishment. The implication is fear of authority. Hell, fire and brimstone ministers use the fear of eternal burning to frighten sinners into obedience. Likewise, tyrant leaders

motivate workers by scaring them with physical pain. The Roman Emperors used such authority and indeed it was effective in building massive architectural structures. Nurses who work for fear of losing their job or present status hover in the realms of Level I, Stage I. Possibly, nurses who work only for money to live on are in Level I, Stage II.

Level II: Conventional Level of Moral Development. Expectations of family and group are maintained. Conformity and loyalty to the group is important.

Stage III: Interpersonal concordance or "good-boy, nice-girl" orientation. Good behavior is that which pleases or helps others and is approved by others. (Nurses are usually in this stage.)

Stage IV: "Law and order" orientation. Authority, fixed rules, and maintenance of social order.

A student who chooses nursing because it is a socially acceptable role for a working class woman upholds the expectations of her family. She is likely to stay home and go to a nearby college or technical school, eventually graduate, work, marry and raise a family. Dreams to become the first astronaut or congresswoman from her hometown may be buried under years of teasing and joking by her family and neighbors. A great number of nurses fall into this category.

Level II, Stage IV nurses often become effective bureaucrats. They enjoy committee formation and policy writing. They like being in charge and have their title displayed on their name pin. They may be likely to say, "That's not our policy," much like a waitress would say, "Sorry, not my table."

Level III: Post conventional, Autonomous or Principled Level. There is a clear effort to define moral values and principles that have validity and application apart from the authority of the group or persons holding these principles and apart from the individual's own identification with these groups.

Stage V: Social-contract legalistic orientation. This stage has utilitarian overtones. Right action tends to be defined in terms of individual rights and standards critically examined and agreed upon by the whole society. The possibility of changing laws in terms of rational considerations of social utility.

Nurses in Level III, Stage V are not afraid to bend the rules in order to maintain a higher principle they hold. She may let the husband of a dying cancer patient sleep with his wife, even though rules strictly prohibit it. She may restrain a confused person before she has the physician order to do so. She does what she thinks is right, practical and moral despite the technical complications. Malpractice insurance, she thinks, exists for those times when someone disagrees with her judgment.

Stage VI: Universal ethical principle orientation. Right is defined by the decision of conscience in accord with self-chosen "ethical principles" appealing to logical comprehensiveness, universality and consistency. These principles are abstract and ethical. The universal principles observed are those of justice, reciprocity, equality of human rights and the respect for the dignity of human beings as individual persons. The Golden Rule (Kohlberg in May, 1980, p.30-31).

It sounds so easy--the Golden Rule, the teachings of Moses and Jesus in a nutshell. Yet it is so difficult to practice. Our anxious search for an overarching philosophy of nursing and education can be summed up in the profoundly simple words, "Do unto others as you would have them do unto you." The pounds of care plans and paperwork, the volumes of books and journals, the numerous theories about nursing practice could be saved if we only spent more of our energies doing unto others as we would have them do unto us. I have often thought that the best nursing theorists were not those who published book

after book, but those lived by the Golden Rule day after day, moment after moment. And they did it not because they want to go to heaven, but because it simply was the right thing to do. And for them, for those rare and wonderful people, there is no alternative for doing the right thing.

The Educational Thought of John Dewey

Even in the Kohlberg model there is a paradox evident in Stage VI. The paradox lies between the self-chosen "ethical principles" and "universality." Transcending the paradox is of paramount importance to nursing and nursing education. Studies show people who choose nursing as a profession have high social and religious values (May, 1970; O'Neill, 1973). According to Eduard Spranger (1928), people with social values tend to be kind, sympathetic and unselfish. Politically and economically, nurses are victims of their own nobility. The rewards they reap are from the satisfaction of helping fellow human beings and the belief that their work is good and right in the eyes of God. The reward for love is love.

John Dewey addressed the dilemma of societal versus individual perpetuation. His conclusion is that the culture perpetuates as a result of individual perpetuation. That is, liberation of the individual leads to a liberated society. Socialization would then represent an enculturation of the masses rather than liberating them. Dewey proposes that education should focus on the liberation of individuals so that they may live more happily and freely among others.

In sum, I believe that the individual who is to be educated is a social individual, and that society is an organic union of individuals. If we eliminate the social factor from the child, we are only left with an abstraction; if we eliminate the individual factor from the society, we are left with an inert and lifeless mass (Dewey, p.237).

To Dewey, education is not socialization although schools are social institutions and education is a social process. It as Dewey who said;

Education, therefore, is a process of living and not a preparation for future living (Dewey, 1897, p.237).

There must be life in the school in order to have learning. The exercises and lessons a student experiences should be for its own living value at the moment, rather than preparation for some future endeavor. The important moment is now and the focus is the community life in the school.

Ross Mooney support Dewey's notion that education is a social institution for the purpose of generating life. He says it poetically in these words:

Man's mind flourishes when it is used as a life-generative system, that societies and cultures are creations of man's mind whose basic function is also to generate life, that education, as a social institution, is ultimately governed by the nature of life-ordering systems, and should be so governed, consciously (Mooney, 1980, p.43).

Mooney claims over and over that the most exciting forms of intellectual endeavor is self-revelation. The student's revelations generate life both in herself and the culture. Through revelation, the student is liberated from unconscious and subconscious fears and desires, and soon learns that she shares the same feelings as many other humans. The artistry of teaching is to bring about these revelations, creating life in the student and the school, liberating

humans to be human, and helping humans seek after God. This way we are not only helping students find a more meaningful life on earth by giving them a vision of the eternal and infinite in the here and now which also leads them heavenwards. In essence then, education not only increases knowledge and understanding about this world, but also increases faith.

You can never please God without faith, without depending on him. Anyone who wants to come to God must believe that there is a God and that he rewards those who sincerely look for him.

Hebrews 11:6-7

The solution to nurses dilemma, the question of ethics versus individual freedom can be explained also by faith. According to Martin Buber:

It is said further that the 'religious' man steps before God as one who is single, solitary, and detached insofar as still dwells in duty and obligation to the world. The latter is said to be still burdened with responsibility for the actions of agents because he is wholly determined by the tension between is and ought, and into the unbridgeable gap between both he throws, full of grotesquely hopeless sacrificial courage, piece upon piece of his own heart. The 'religious' man is supposed to have transcended this tension between the world and God; the commandment for him is to leave behind the restness of responsibility and of making demands on himself; for him there is no longer any room for a will of one's own, he accepts his place in the Plan (Buber, 1970, p.157.)

When the individual resigns her soul to God, she becomes a child of destiny, free from ethical judgments, yet "calmly decides ever again in favor of right action (Buber, 1970, p.157)." This ultimate liberty is both the transcendence of Dewey's individual versus societal liberation, as well as the explanation of Kohlberg's Stage VI. A perfect world would be when everyone wants to do what is right and good, and they are happy. William James said in his famous book,

Varieties of Religious Experiences, to be liberated means to be liberated from being earthbound. And so it is a goal for education and nursing education, to teach love, give life, and lead students toward the option of life eternal.

Nursing Research in Epistemology

At this writing, there has not yet been an epistemological framework developed for nursing, nor has any been applied to nursing. Scholars such as Fawcett (1983) and Meleis (1985) have researched nursing theories, philosophy, and conceptual models in attempt to combine threads such as man, health, environment, and nursing. Most conceptualists have mentioned these four concepts in their definitions and explanations of nursing. Understanding that humans have physical, psychological, and spiritual attributes offers the nurse insight into planning and giving care to them. Most theorists agree on these central ideas, Fawcett (1983) determined.

The problem of attempting to define nursing by connecting a few concepts such as man, health, and environment, is that a young learner may not understand how these concepts fit into an entire world view. Even the baccalaureate student who has taken art, literature, and mathematics may ask, "So how does it all fit together?" Or more simplistically, "If only these concepts are true about nursing, then why all of the other courses?" An epistemological framework would help the student integrate all subjects, all knowledge. That is if the world can be broken down into four concepts, and only technical, scientific ones at that, then nursing education may as well move out of universities and back into the hospitals where it began.

Meleis (1983) studied the evolution of nursing scholarliness (1983.) No doubt that nurses have more degrees than ever before. More education moves both the individual and the nurse toward maturity and wisdom, according to Meleis.

Meleis equates increased formal education with greater maturity. While it is probably true that higher degrees have added to the sophistication of nursing theory and practice, formal education alone does not make one more intellectually sophisticated nor more emotionally mature. Experience and attentiveness also yield increased intelligence in decision making. For this reason, associate degree programs argue that a good nurse does not have to attend liberal arts classes in order to function effectively in hospital settings. An appreciation of the arts develops little practical insight compared to clinical experience, according to diploma and associate degree advocates. And their point is well-taken.

The most recent nursing research in the study of knowledge has been conducted by Benner and Tanner (1987.) They interviewed expert nurses to investigate the use of intuition in clinical practice. Expert nurses rely on a "sense of salience," meaning that the nurse functions in a meaningful world in which observations and events can be quickly judged according to their importance (p.27.)

A sense of salience works better than a checklist if the understanding of the situation is correct. A checklist is not possible to list all the possibilities for each patient. In philosophy, the problem of being unable to list all the possibilities is called the problem of infinite regress, or the problem of limits of formalization (p.27.)

Benner and Tanner's findings support the need for an expanded paradigm. Attempting to analyze nursing into standardized,

measurable skills not only is limiting, but perhaps even blasphemous in its reductionism. The problem goes back to the assumption that the entire world can be explained by "scientism." Whereas science does provide knowledge, and even a world view (Wilber's World View I will be discussed in Chapter 3,) not all phenomenon can be reduced to terms of "behavior" or "atoms" or other physical, observable things. Intuition, faith, wisdom, and love are all things that exist, yet cannot be reduced to standardized behaviors.

Nursing researchers who have attempted to study nursing as an art realized that more than behaviors make a nurse good or bad. Artists tend to view the world in another way (Wilber's World View II in Chapter III,) but have not been taken seriously by the scientists. The best nursing, as shall be argued in this paper, is that which transcends both art and science. However, a synopsis of the art versus science dispute will lead toward Chapter III, where in it will be shown that an expanded epistemological framework provides a place for both of them.

Nursing: Art or Science?

The debate that has emerged over the past decade as to whether nursing is an art or science can be answered with a better understanding of epistemology. Within the all-inclusive realm of knowledge exists the human ability to think and create thought. That is, the work of the human mind is to think. As mentioned in the discussion on thinking and the work of the mind, Marc Belth describes thinking as making metaphors and analogies. That is to say, associating two or more ideas or experiences is the process of thinking.

The expression of thinking is language. And as we understand in nursing from communication theories, language can be expressed verbally or non-verbally. Perhaps the part we ignore is that other forms of expression exist, such as art, music, dance, theatre, sports, work, and play. Likewise, when the nurse expresses her thoughts, and even her spirit through her work, nursing becomes an art.

Thinking also has a scientific component. W. E. Moore, in his Creative and Critical Thinking describes five steps of thinking. When closely examined, the steps are much like the steps of research, and also the objectified nursing process.

1. Recognition and defining the problem.
2. The gathering of information.
3. Forming the tentative conclusions.
4. The testing of these tentative conclusions.
5. Evaluation and decision (or judgment making.)

Therefore, when we teach the nursing process, we are merely teaching students a model of thinking. The intent of teaching a model of thinking is to offer a roadmap that will improve thinking by helping students think about their thinking.

The nursing process, the steps of assessing, planning, implementing, and evaluating is the scientific way to think about nursing. Like scientific thinking, the nature of something is studied by breaking down the whole into parts. The people who predominantly use the left side of their brain tend to think analytically and scientifically. The nursing process works well for them. However, sometimes in the process of their scientific analyzing, they lose the

spirit of nursing. The scientific approach to nursing is efficient, yet carries with it a tone of clinical technology that sees humans as bio-physical beings more than spiritual ones. Right brain-thinkers reject such reductionism, and seem to create a model of their own, almost in hopes of avoiding being dominated by left-brain thinkers. Turning to wholistic health frameworks helped the right-brain thinkers by providing them with a whole-to-parts approach to thinking. Whereas scientific left-brain thinkers examine the parts and main inferences about the whole based on their observations and investigations, the more artistic right-brain thinkers look at the whole being almost as a spiritual entity, and then makes observations of the parts. Perhaps, only in the extremes are individual so "limited" to right or left-brain options and habits.

The studies that Benner and Tanner (1987) conducted concerning the growth of nurses from novices to experts touches on epistemological premises. The novice is very structured, technical, and by-the-book in her approach to patient care. She attempts to conduct her assessments, plan her care, and implement it step-by-step, inch-by-inch. Although some may call that the scientific approach, it is probably more the need for structure than anything. The expert nurses seem to glide from patient to patient using intuition, the research claims. The expert nurses speak about "picking up vibes" about patients. "Bad vibes" means something is wrong, and the nurse then quickly checks out all possibilities to find the source of the problem (p.27.) The thinking style of experts, then, is largely more who-

listic and artistic. They have more experience to which their observations can be connected. Therefore, their thinking is quicker and their reactions to their observations are more elegant and sophisticated. They become experts, they become artists.

Not every novice nurse becomes an artist, nor is it important for every nurse to become an artist. Some people, the left-brained dominant people in particular, simply function better using a scientific model of thinking and working. All brains are not alike, nor should all nurses be expected to think alike. However, all nurses do need to care about their work and about the welfare of their patients. All nurses are expected to base their decisions on doing what is right and good for the patient. Sometimes the artist/expert nurse will attach his observations to his interventions so automatically that he may not stop to think about what is the best intervention for this patient at this time. It is possible for an artist in an act of carelessness to be inhumane.

To draw conclusions as to whether nursing is an art or a science poses a dichotomy not wholly useful. Perhaps one can say that it encompasses both types of thought and expression, depending on the experience, genetic brain-type, and the style of the particular nurse. Regardless of the model of thinking, professional ideals assert that the nurse's judgment should rest on doing what is right and good and helpful for the patient. And in the moment of the decision the nurse stands in loving relationship with the patient, the world, and the presence of the Almighty. For in the Ultimate state of relationship,

only relationship is real. All thought, all knowledge, all art, all science, all things of creation, merge that moment in a joyful, loving oneness in which no cruelty nor ignorance can exist. Nursing in its ultimate transcends both art and science. And the nurse herself transcends social norms, time, and space in a gracious act of love to help and heal. Thus, an expanded epistemological paradigm asserts that nursing at its Ultimate is Love.

Conclusion

Like the universe itself, nursing was born from Love. Just as the Creator created life from love, so is the calling of nursing to create life through love. So as the world is being created, we too, are both creating and being created. If one accepts the notion that creation is the poetic form of evolution, then there should be little alarm to one's soul to think about the world evolving, and humans evolving, and nursing evolving. And in this evolution, nurses find a constant shifting between technology and human dignity, and the struggle to obtain balance between the two.

Ever since humans looked beyond their individual survival and helped another of their species to survive, love and caring have existed. Mammals feed and protect their children; they nurse their young. Pre-humans also put forth a community effort to care for children and orphans, because pre-humans had childhoods of ten years and an average lifespan of twenty years (Bronowski, 1973, p.40). Early man's care for orphan children reveals a humanistic tendency to help the helpless, to feel responsible for one's one kind.

As man evolved into a being with consciousness of God, the love for one another took on new and greater significance. Ken Wilber (1983) proposed the paradigm the evolution of the consciousness to remind modern man that in the midst of his high technology he is still human, a child of the universal hologram. Yet our raised consciousness leads us ever toward the ultimate to the fulfillment of human potential. The Absolute truth of love and caring for humankind is ultimate. Wilber, like Bronowski, claims that evolution is ascending. Such an optimistic attitude helps explain the increasing respect for nurses who at one time were physicians' handmaidens, have become more and more in control of their own destiny through education, administration and credentialing.

Economically, nursing had humble beginnings. Early humans volunteered to nurse orphans as Bronowski (1973) points out. As social hierarchies formed nurses served to care for the young and dying of wealthy public leaders. The Greeks had philosophic support for this class structure. Plato proposed that in the perfect society female Guardians (upper class) should breed with male Guardians, and the children would be cared for by nurses. Child-rearing would be an easy job for Guardian wives. They would be spared the responsibility, but also some of the joys of motherhood. Plato did not address the notion that people may want the freedom to choose their career and whether or not to bear children.

The contingency between freedom and responsibility represents another paradox facing humans. The greater responsibilities, the greater the freedom, and the greater the freedom, the greater the

responsibilities. As nurses strive for economic freedom through comparable worth, then their responsibility will also become greater. Nurses shall reap the rewards of their choices, but wise and mature choices lead to greater responsibilities. As nurses strive for economic freedom through comparable worth, then their responsibility will also become greater. Some rewards are gathered now, but the greatest reward according to Christian tenets, awaits the nurse in the afterlife. And no money can replace that. Yet as nurses are on the earth, and economic injustice exists, they are equally wise to remain persistent in our struggle for equity, for it is part of nursing's creation and coming to be.

CHAPTER III
EPISTEMOLOGICAL PARADIGM FOR NURSING EDUCATION

The development of the present paradigm, begins with the beginning--the creation of the world. The creation and evolution of the world is relevant to nursing and nursing education because the viewpoint presented in this discussion integrates religious and scientific thought under a single epistemological framework. Whereas the two points of view are often considered contradictions of each other, they merely represent two ways of describing the same occurrence. Their language and their intentions differ, they see through different "eyes" according to Ken Wilber, but both reveal truth.

The "three eyes" analogue used by Wilber forms an epistemological framework which explains the levels of knowledge, thus becoming the foundation of education. The work presented here is of utmost importance to nursing education, but scarcely known by nurses and nursing educators. Whereas there exists a hierarchy of knowledge, there is also an evolution of knowledge. As the universe itself evolves, so does our society and our profession. Nurses are gradually moving toward more sophisticated knowledge and toward more sophisticated social consciousness. Nursing research and thinking, is a search for truth as much as it is a search for equity and freedom. Helen Cohen (1982) claims nursing is in quest of a professional identity. Yet, the quest of nursing is much deeper. It is a quest for

independence, dignity, and uniqueness. Our goal is freedom of self-expression, and freedom from automatic association with hospitals, physicians, bedpans and white caps. Nursing's struggle for freedom is also a struggle for equality of economic and political rewards. Yes, nursing is indeed in quest of a professional identity, but at the very root of the struggle is the longing for liberty.

The struggle for liberation is much more than a sociological problem, as is currently believed, but also a theological one. Clearly a basic assumption of liberation theology is that freedom, justice, and equality for all of mankind is God's divine plan for the world.

Nurses, as instruments of God, help the world unfold as He wills, for the good of humankind, for the good of the world. Great people have always felt responsibility not only for their own welfare, but all of mankind's, with special concern for the weak and the oppressed. For example, Abraham Lincoln's personal theology reflected his understanding of mankind's yearning for freedom. A student of Lincoln's theology wrote:

As Lincoln advanced in his religious thinking he put greater and greater emphasis not upon details, but upon the magnitude of the historical unfolding. Whatever criticism might be made of his faith, it could not be truly said that his God was too small. God, as the Bible revealed Him, seemed to Lincoln to be One who dealt not merely with isolated individuals for whom He cares, but for liberty and justice for the entire human race. (Trueblood, 1973, p.62).

Liberation ideology is largely humanistic, offering people the opportunity to seek happiness and freedom. It also involves sacred convictions; that is, Divine will does exist, and we as children of

God and of the universe surrender individual will in order to fulfill the will of God. Those who make this commitment become children of destiny, destined for divine Providence. Liberation ideology in nursing and nursing education includes theological concepts such as grace, will, and destiny. Scholarly pursuits to explain the nature of the profession must not exclude spirituality, but incorporate it into the hierarchy of knowledge.

To understand more clearly the evolution of nursing knowledge, it is helpful to understand the earth's evolution. As the universe unfolds according to design, the place and purpose of nursing also unfolds. Following the integration of scientific and religious thought, Ken Wilber's epistemological model of "three eyes" describes the levels of knowledge mentioned in Chapter I. Briefly, the eye of the flesh sees empirical facts, the eye of the mind sees logical connections, and the eye of the soul sees moral paradoxes. Though men judge using the vision of all three eyes, the Divine Judge judges by the vision of the third eye, the eye of the soul. Humans are tested by their moral choices. Liberation for the human race also is gained by these choices. Therefore, educational curriculums must include social and moral consciousness building, even though it is by far the most difficult educational endeavor. Therefore, it is the intent of this paper to present a framework for nursing and nursing education that will extend the meaning and source of knowledge and truth from the empirical and theoretical to include also spiritual revelation.

The Evolution of the World and the Social Consciousness

In the beginning God created the heaven and earth. And the earth was without form, and void; and darkness was upon the face of the deep. And the spirit of God moved upon the face of the waters. And God said, "Let there be light: and there was light." and God saw the light, that it was good; and God divided the light from the darkness.

Genesis 1:1-4

When I was eighteen, a freshman majoring in Biochemistry, the bishop from the church confronted with the question, "Since you are both a student of science and the Bible, tell me, which do you believe, Divine Creation or Evolution?" I was puzzled a minute thinking, "Why should he have to ask me? At eighteen am I supposedly wiser than an elderly bishop?" But then I focused on the question and answered. I can still hear myself thinking aloud:

Certainly God created the world, and created the beings that are. But I think the world is in a process of creation, and in science we call that 'evolution'. I'm not one to limit God's power, He could have created the world literally in seven days as Genesis tells us. But I guess I think much like the intellectuals do, that Genesis is a poetic description and evolution is a scientific one. To me whether you believe God snapped his fingers or whether he let the world evolve itself doesn't matter much. What matters is which belief makes you marvel at God's glory. Either way is pretty awesome.

Scholars and philosophers have struggled with the problem of creation for some time. Two views prevail: that of orthodox religion and that of modern science. Historically, the views have often been seen as diametrically opposed to each other.

Phaedo and Phaldrus, two of Plato's colleagues, accepted the rather pessimistic view of the world. Man's life is a kind of imprisonment due to "the fall", meaning, of course, disobedience from God. Ken Wilber, a modern philosopher, calls this World View II.

World view two sees development moving from a spiritual source to a culmination in a "low point" of alienation, that of a sinful humanity or of individual and personal ego. History is thus the history of a falling down, not a moving up, and mankind is at the end of the fall (Wilber, 1983, p.207.)

Another colleague of Plato, Timaeus, had a more optimistic perception. He believed that souls have been sent into the corporal world with the mission of importing to it the beauty of the intelligible world: the mission of forming it into a cosmos meriting the title of "Blessed God" (O'Connell, 1978, p.23.) This corresponds to the modern science view, which Wilber calls World View I.

World view one sees development moving from a prepersonal source in nature, through a series of intermediate advances, to a culmination is the "high point" of evolution, that of human rationality. It recognizes no higher source or goal of development and it vehemently denies the necessity of ever mentioning such supposedly "higher" levels. Man is a rational being, and rationality is all that is necessary to comprehend and order the cosmos (Wilber, 1983, p.207.)

Neither view is entirely correct. In world view one the assumption that man is a purely rational being is quite naive. In the words of Wilber, "we possess a prepersonal, irrational, and subconscious component" and "we are all in sin", living alienated and separated from a supreme identity with the Spirit. The fallacy of world view two lies in the supposition that "rational thinking personhood is the height of alienation from the Spirit" (Wilber, 1982, p.207.)

The significance of the two world views for nursing education illustrates a universe polarized by opposites. Students entering nursing often come with strong religious beliefs are confronted with mostly the scientific, political, and economical issues in nursing. The students are expected to have the intellectual prowess to connect the economic inequities of the profession with liberation theology and

a basic morality that all men are created equal. Yet, few students have the sophistication to make such connections. Instead of transcending the paradoxes by trying to relate the given information with her own ideas, there is confusion and stress. The student may or may not resolve the conflict. If she does, learning has taken place. If she comes to no resolution, she may reject all new knowledge, hence no learning has occurred. The issue of transcending paradoxes and resolving conflict, then, is crucial to education.

Ross Mooney, poet and philosopher, says that helping students transcend paradoxes is a basic objective of education. Concerning the paradox between one's uniqueness and universality, he states:

Transcending it, he can also become a more integrated self, a better and more constructive social being among other men, and more aesthetically in tune with the universe. I seriously doubt that he can become substantially transcendent of the paradox as a research man unless he is also transcendent in these other aspects as well, and thus integrated in respect to many facets of his life. (Mooney, 1980, p.94.)

Ken Wilber wrote vigorously on the subject of transcendence of the consciousness. Transcendence is similar to Maslow's self-actualization, Sullivan's integration, Fromm's autonomousness, and Kohlberg's Stage 6. The integrated self, where mind, body, and spirit are harmoniously one is often referred to as "being centered". Center comes from centaur, a mythological being with an animal body and human mind existing harmoniously (Wilber, 1983, p.90.)

The remedy for transcending paradoxes, and helping students do the same, is a clear understanding of epistemology. That is, how knowledge is formed. Wilber's model explains knowledge in three modes, empirical, logical, and contemplative, which he calls the

"three eyes". The three eyes represent the levels of consciousness: the eye of the flesh, the eye of the mind, and the eye of the spirit. Wilber did not originate the concept of "eyes of knowledge", but rather converged the writings from many philosophies. In the Old Testament the metaphor is used frequently such as this passage where Job bewails his condition to God.

Has thou eyes of flesh? Or seest thou as man seeth? Are thy days as the days of man? Are thy years as man's years? (Job 10: 4-7.)

The impression Job gives us is that man and God judge men by different aspects. Lesser men judge beauty and worth only by the eyes of the flesh, that is, outward appearance. Better men judge by their eyes of the mind, focusing on intellect and contributions of others. The greatest men judge as God does, by looking through eyes of the soul. In his humility to God and his love for others he sees that all people are created equal and in one image. Therefore, he cannot judge at all.

In nursing education teachers may rely too heavily on judging students by their outward appearance and discrete factual knowledge. Such fallacy lies in assuming that if an attribute cannot be visibly seen or objectively tested then it must not exist, which negates such qualities as compassion or healing spirit. Learning, as the Christian mystics tell us, is not the consumption and regurgitation of information, but rather the emergence of their deep center that it may liberate another deep-seated power, to bring the deep self out of hiding so that the kingdom of God within us can be made the dominant element around which the personality is arranged. "Know thyself" lies at the foundation of Christian contemplation (Tart, 1975, p.403.)

Teachers rarely help students "know themselves" in nursing education. A few lucky ones from stable and supportive homes know and love themselves, and hence fly through school with little difficulty. They are able to see nursing from its many aspects--scientific, religious, economical, political, and theoretical--without becoming confused or disintegrated. Few teachers have the scope and depth of knowledge to help students reach into their souls and release the inert wisdom and energy that lies within. It is the release of this inner spirit that motivates one into action, like Jesus who turned the fisherman into his apostles. From inert energy came a fiery and contagious love for God.

Evolution of Consciousness: The Wilber Model

My education has often caused me to recall insights I had as a child:

I was either 5 or 6 years old when a friend of mine invited me to go to Sunday school with her. Always willing to try something different, I went with her. She was Presbyterian and I was Episcopalian, which matters little to children because to them kids are kids and God is God and they seldom get confused about such things. But I did notice that her Sunday school was really school, whereas mine was playtime. The teacher began the story about Adam and Eve and the creation of the universe. One little boy, very bright and articulate for his age (son of a university biology professor) chimed in and gave his two bits about the Neanderthal man, etc. A debate was soon underway. I listened and thought, "Maybe God waited until humans were human enough to think about God before he let Himself be known to man. And perhaps Adam was the first man who knew God, the first man with a soul".

Wilber describes knowledge using the metaphor of three eyes, of which, the eye of the soul, the contemplative eye, is the eye which sees God. His model takes on a traditional pyramidal shape. At the base lies the eyes of flesh, which absorb knowledge about physical,

tangible things. The middle level represents the eye of logic and reason, that which understands concepts rather than only things. Finally, at the summit, the eyes of the soul "sees" phenomenon of morality, eternity, and infinity. Diagrammaticall, the three eyes metaphor looks much like a triangle (see figure 1,) whereas graphically, it may look like the pyramid and eye symbol seen on the back of a United States one dollar bill (see figure 2.)

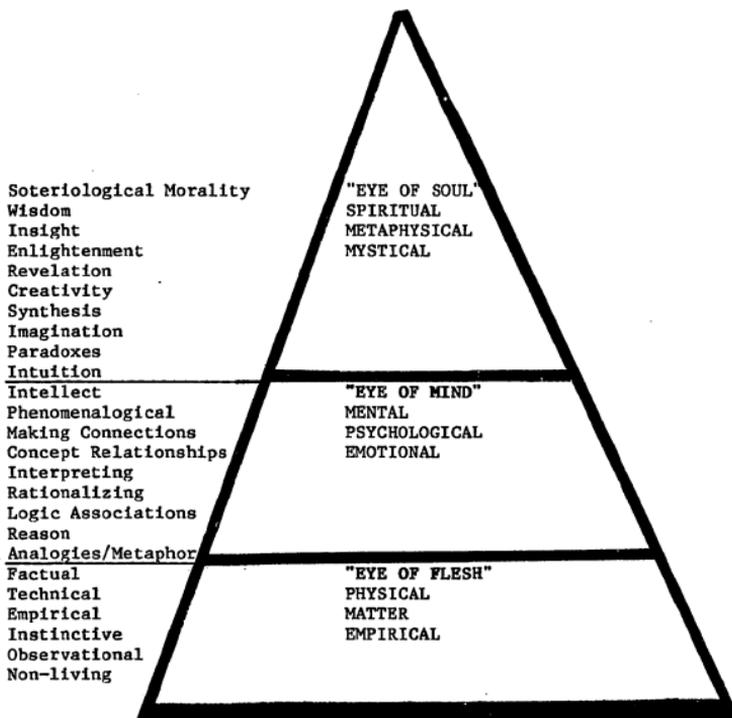


Figure 1: Diagram illustrating Ken Wilber's Three Eyes Model

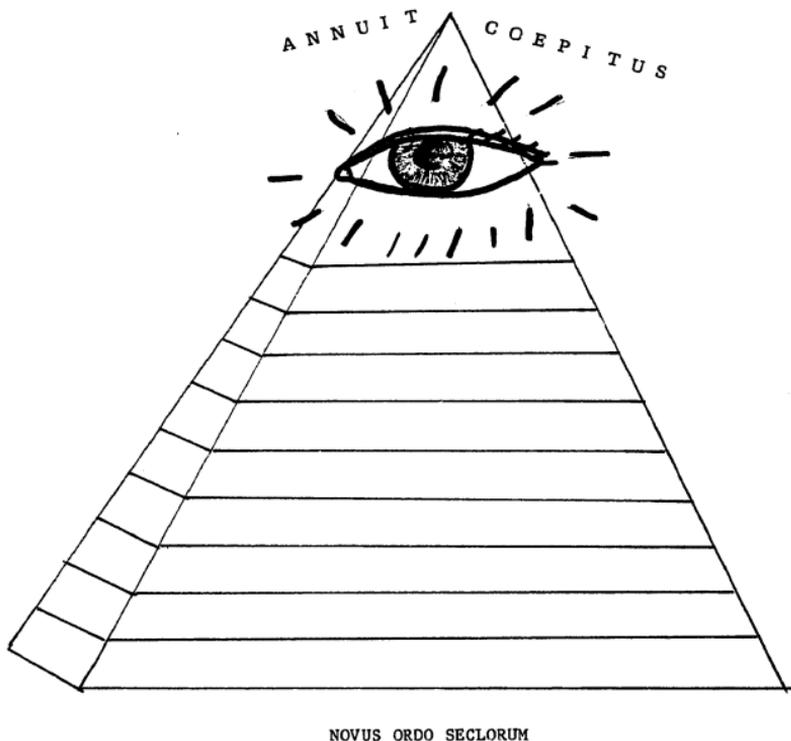


Figure 2: The Pyramid and Eye Symbol on the U.S. One Dollar Bill

Above the pyramid are the words ANNUIT COEPIUS which is Latin for "HE (GOD) HAS FAVORED OUR UNDERTAKINGS". The motto is taken from Aeneid (IX.625). Below the pyramid is written NOVUS ORDO SECLORUM, a Latin phrase meaning "A New Order of Ages".

The functions of the three eyes depends upon the vision of each. Since each sees a different level of knowledge, they each are used to conduct different kinds of research. The kinds of research were discussed in Chapter I using illustrations from the Adventures of Sherlock Holmes. Holmes employed his "eyes of flesh" to gather data and facts about his assailant and the critical event. Data-based research is referred to as empirical research. Purely empirical research gathers data and reveals the findings. The next step in research Holmes describes is to draw "theories from the facts".

Formulation of theories requires brain work, making associations between the observations. Detective Holmes not only uses present data, but also links information from past experiences with the new information in attempt to make sense of the problem. Holmes' success as a detective could not have been possible if he had merely gathered numerous unconnected facts. In the words of Leslie Hart, failing to make meaning from the data is "brain incompatible". Hart accuses formal schooling of this very blunder; to present voluminous information without relating the material directly to the student only creates a myriad of useless facts. The material must have some meaning to it. Our clever detective, then, made meaning from the data he collected by arranging them into a theory that hopefully represented the true occurrence. Likewise, every theory attempts to recreate and represent the truth.

An avid reader on Doyle's stories would recall that Holmes sometimes became perplexed about some seemingly unrelated information that stumped his theories. At these times, Holmes would listen to

music, play his violin or puff on his pipe. Sometimes he would refer to a problem as a "three pipe" problem if it were particularly puzzling. But eventually he jumped up yelling "Ah ha!" A revelation had finally come, through the third eye of contemplation, and the pieces finally fit together in a bursting creative moment. The eyes of his mind had once again been successful.

My favorite Sherlock Holmes example of this epistemological framework are the few times the arrogance of the detective mellowed into compassion and sensitivity. In "The Boscombe Valley Mystery" Holmes promises to keep secret the wrong doings of a remorseful dying man. Holmes said, "You are yourself aware that you will soon have to answer for your deeds at a higher court than the Assize." And later, "God help us!" said Holmes after a long silence. "Why does Fate play such tricks with poor helpless worms?" Holmes transcended the principles and law in this story, turning the judgment of the old man over to the highest court, the judgment of the Lord.

Such compassion and wisdom is also required in nursing where over-intervention on the dying person may cause only more suffering. Wisdom is the understanding by the eyes of the soul. As one intelligent woman said, "It is the ability to abstract from the abstract". Meaning, of course, that wisdom, love and other creative endeavors transcend general understanding, principles and logic.

Wilber's Model Applied to Nursing Education

Few people reach the summit of knowledge according to Wilber. Those that do are well-remembered. They are the geniuses, the

prophets, the saints and poets. Their knowledge is highly mystical, inspired, and revelatory.

He becomes one with God and all of creation simultaneously through direct and first hand human experience: an intuitive act welling up out of his deepest center where God touches him. The deep self sustains and inspires the whole thinking-feeling man but cannot be identified with God, the empirical ego or the subconscious (McNamara in Tart, 1975, p.396.)

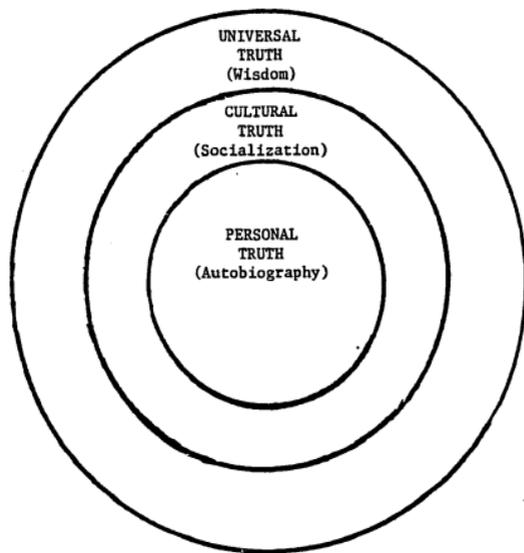
And so it seems quite evident from the writings of mystics and the biographies of geniuses that in order to have intelligence and harmony in one's life, there must be a relationship with and reverence for a higher source. Christ prayed:

"Father, may they be one in us as you are in me and I am in you...may they be one as we are one. With me in them and you in me". (John 17: 21-23).

It is this "oneness" which is seen through the eyes of the soul. The universe would live up to the Greek origin of its name, "turned into one". So not only does the individual become one with himself, if one is Christian, one in Christ, he also becomes united with the universe, eternal and infinite, both here and now and in everlasting destiny.

The world is in a state of unfolding, in creation and evolution, while social consciousness rises collectively as each individual consciousness creates and unfolds the inner self. The release of the inner self represents the educational thought of Ross Mooney and John Dewey. Although at times both philosophers gazed out into the heavens with dreams and imaginings for the world, they also wrote about individual discovery and revelation. So while there is evolution, which is an unfolding and growth from one point to another there is individual unfolding of the inside to the out.

The concept of involution and evolution may be easier to grasp with the following illustrations (see figures 3 and 4.) The circles within circles represent the levels of knowledge (or consciousness,) which is not only an epistemological way to look at the universe, but also a model for education. More specifically, the figures illustrate in model form the evolutionary epistemological paradigm for nursing education which is the foundation of this paper. It may be helpful to consider figure 3 as a bird's eye view of a cone, which if viewed from the side would also look like figure 4. The cone also could look like a spiral which John Dewey described, the triangular shape of Maslow's hierarchy of needs and Bloom's taxonomy of learning and even Ken Wilber's pyramidal model of knowledge (figure 1.)



Model 3: Model of Knowledge

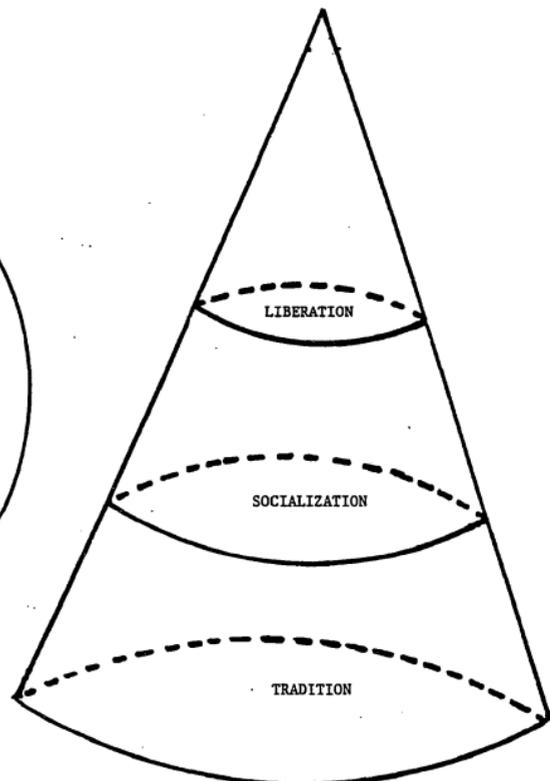


Figure 4: Model for the Evolution of Nursing Education

Wilber writes that involution is movement from the higher to the lower, rather than the way that I have used the term here. That is, he sees involution as suffering and sadness. Such sadness occurs when one is only involved in himself, and expecting only to be loved rather than their searching the self in order to better understand and love others. Therefore, self-reflection and internal discovery should be the essence of education. The discovery of the self leads to the wisdom of the universe and love for humankind. Through such searching the student discovers great joy and meaning in life. Likewise, nursing students find joy and meaning in the profession they have chosen. Self discovery, at its best, can lany nursing students to realize that "God has favored our undertakings," as the Great Seal of the United States reads.

The plight of nursing is that nurses see so much human suffering in their patients that they tend to suffer right along with them. Nurses are intensely aware of the human condition. And though we know that what we do is highly "favored", and often feel the presence of God with us as we work, we loathe people saying, "Isn't it rewarding work?" Yes, it is for most part. But nurses like anyone else want some rewards for their noble work before they die. The truth is they wholeheartedly deserve it, but working in hospitals they will be slow in getting it. What they get are other freedoms: health insurance, steady employment, paid vacation, potential for advancement. And if these freedoms are important, then they will happily reap their rewards. However, the greatest reward is doubtfully gathered in this life at all.

freedom to love openly, freedom from fear of death, freedom from feeling earthbound.

Solitude of the Relationship

Buber distinguishes between two kinds of lonesomeness.

Lonesomeness means the absence of relation: if others have forsaken us after we had spoken the true you to them, we will be accepted by God; but only if we ourselves have forsaken other beings (Buber, 1970, p.152.) In our relationship with God, we are truly alone. The relationship is deep, personal, and fully appreciated and understood by the person who dwells in it. For the relationship alone is our salvations, redemption, and direction. We dwell in the relationship, as God embraces us and dwells in us. That is not to say that we have God within, because such belief implies that we can possess God, which is blasphemous (Buber, 1970, P.54.)

Buber alleges that a relationship with God happens in solitude, therefore, this kind of solitude and aloneness are sacred. On the other hand lonesomeness can also result from God's rejection of us because we have forsaken others. At this point Christians may disagree with Buber. At least I do. Certainly it is not a Christian act to forsake others, and such acts do not meet God's approval. But the significant difference between Jewish existentialism and Christianity lies in the Christian conviction that Christ died for our sins and his resurrection makes redemption ever possible. That is, Christ was not only an example of how to live but also the Savior, because the Father understood human shortcomings. Whereas Buber

vital signs, are determinants of the patient's wellness, while the spirit as sensed by the intuition, is the determinant of the patient's being. There are many physically sick people who have happy souls and many well people with troubled souls. Hence, vital signs are facts as seen by the eyes of the flesh, offering information about the body. Intuition, born of love and caring for the patient, the eye of the soul, offers information about the patient's spirit.

The importance of developing the eye of the soul does not end with patient care. Nursing managers and teachers need intuition and wisdom, too. However, the most crucial wisdom, again, is knowledge about the self. Being able to see ourselves clearly is a trait everyone needs to improve. But such education requires intimacy in student-teacher relationships and freedom of expression. These elements are often lacking in nursing education. Instead of extracting revelation from them through dialogue and intense questioning, nursing education usually consists of lectures and reading assignments. The assumption of teachers is that knowledge is something outside of the student, and the only way for them to acquire it is to pour it into their minds. Yet, the greatest teachers built intimate relationships through dialogue and openness and good humor. The attitude is almost that students are somewhat less intelligent and less human than teachers (Murphey, 1982.) The danger is that students may then adopt this way of thinking and eventually treat patients as less human than themselves. And such attitude breaks the ultimate law of love, "Do unto others as you would have them do unto you."

This understanding the value of love, determines the worth of the soul leads us to the ultimate liberation which we seek. So we as individuals grow in social and moral consciousness on the route towards liberation, so does our world and our profession follow the pattern. The cry for nursing education is to help students find their path and help lead the way to liberation. And liberation at its ultimate means being a nurse for love, in perfect relationship with mankind, the universe, and the Creator.

So rather than reaching a dull existence of carrying out mindless technical tasks upon other humans, the nurse enters into a state of total consciousness...aware, in the present, and with confirmed love for humankind. In this state of ultimate being, the nurse can teach, heal, and create in joy and glorification of God.

Reaching this state of being may be poorly understood by the nurse who has gotten in the trap of believing that only carrying out all the technical tasks within the given time frame is the key to success. Yet, the epistemological paradigm presented here demands a spiritual reality--an essence of love and caring--that give the tasks meaning. Reaching this state of being requires a consciousness of a higher spiritual being, as seen by Wilber's third eye. Wilber refers to this higher being as Godhead, while Martin Buber calls it the Eternal Thou. Buber's classic book, I and Thou describes how we can come into a ultimate and eternal relationship with God, thus leading to ultimate and eternal relationships with each other.

CHAPTER IV

THE REACH FOR THE ULTIMATE: DEVELOPING A SPIRITUAL REALITY

The model of nursing presented in Chapter III recognizes the complexity of humans due to their physical, mental, and spiritual qualities. Hence, in the course of working with human lives on a day-to-day basis, the question of which comes first, human life or human spirit, confronts the nurse. To the experienced nurse, whose years have resulted in both wisdom and compassion, the answer is simple; spirit is more important than physical life. For given the choice between death and a life without spirit, without dignity, without freedom, a nurse would choose death. For most part, nurses, having confronted mortality on countless occasions, become essentially unafraid of dying. In their humility to serve God and mankind, they receive in return the greatest freedom of all, freedom from fear of the hereafter. The freedom from fear reflects the wisdom born from love and a relationship with God. Such wisdom, the vision of Wilber's third eye, rests in the pinnacle of the epistemological model for nursing (figure 1, page 67.) The divine relationship between man and his maker is element which leads a person to her destiny. Life, then, becomes divine fate.

I and Thou: The Philosophy of Martin Buber

Beyond the technical skills and theoretical knowledge requirements in nursing, there also exists the spiritual relationships that grow between the nurse and other people, and the nurse and God.

Martin Buber, Jewish existentialist philosopher, wrote the book I and Thou, which is the name he gives to relationships between people and between people and the Eternal Thou.

Martin Buber's definition of man differs from the definitions accepted by most nursing theorists. While nursing conceptualists have explained the nature of mankind in terms of observable physical, psychological, and spiritual aspects, nurses rarely study what exists between man and man or between man and God. Buber defines man in terms of relationships rather than individual characteristics. The definition of man is what lies between he and another, and Buber refers to this as the "between" or the arc of the relationship. The arc occurs between man and man, and man and God.

In the face of God, man stands in relationship in grace, by having chosen and been chosen, being both passive and active (Buber, 1970.) From grace, man finds direction, purpose and meaning to his existence.

Imagine that at some dreadful midnight you lie there, tormented by a waking dream: the bulwarks have crumbled, and the abysses scream, and you realize in the midst of this agony that life is still there and I must merely get through to it--but how? Thus feels man in the hours when he collects himself: overcome by horror, pondering, without direction. And yet he may know the right direction. And deep down in the unloved knowledge of the depths--the direction of return that leads to sacrifice (Buber, 1970, p.97.)

Sacrifice is service, and thus the call of nursing is both service and sometimes sacrifice. But it is not sacrifice of deep pain, but one of deep joy, and the joy is in maintaining the relationship.

The Difference Between I-Thou and I-It Relationships

Buber distinguishes between I-Thou and I-It relationships. Man lives in both types of relationships, because Buber says I-Thou is so all-embracing that it is impossible to stay in it indefinitely. A person has to function on a day-to-day basis as well as live in relation. Thus, the I-It is more or less a practical relationship, where the individual perceives reality outside the self, and exists for use and ownership. The "I" in I-It see other people as things of utility as well. This attitude comes clear when a nurse refers to a patient as the "cholecystectomy in room 501." The mode of I-It among nurses whose major goal is efficiency. But even better time management will not allow for more I-Thou's. Other examples of I-It are the attitudes of patients, physicians, and hospital administrators toward nurses who view nurses only as task-doers, employees, or handmaidens. Nurses prefer to be understood as human beings who serve for love.

These examples are extreme illustrations which show abuse to the I-It, but I-It relationships are not always negative. Nurses expect people to depend on them and they like to depend on others. In fact, man is encouraged to depend on God, that is, to use God for personal ends. Yet, Buber reminds us that God also needs us, which means that the I-It relationship goes both ways. Humans, nurses included, need God and He needs them. Because there is a mutual needing of each other, the I-It has potential to become I-Thou. And according to Buber, man is a man only when he enters into the I-Thou relationship. And when the I-Thou relationship is with God, the person enters into spiritual reality, or in the words of St. John, "born of the spirit."

Accompanying the rebirth is liberation. Freedom from human made rules and expectations, freedom to love openly, freedom from fear of death, freedom from feeling earthbound.

Solitude of the Relationship

Buber distinguishes between two kinds of lonesomeness.

Lonesomeness means the absence of relation: if others have forsaken us after we had spoken the true you to them, we will be accepted by God; but only if we ourselves have forsaken other beings (Buber, 1970, p.152.) In our relationship with God, we are truly alone. The relationship is deep, personal, and fully appreciated and understood by the person who dwells in it. For the relationship alone is our salvations, redemption, and direction. We dwell in the relationship, as God embraces us and dwells in us. That is not to say that we have God within, because such belief implies that we can possess God, which is blasphemous (Buber, 1970, P.54.)

Buber alleges that a relationship with God happens in solitude, therefore, this kind of solitude and aloneness are sacred. On the other hand lonesomeness can also result from God's rejection of us because we have forsaken others. The caution to nurses is never to forsake a patient or anyone for any reason. This is not to say that behaviors and beliefs cannot be disciplined, but that whole persons can be rejected. However, even if a nurse should err, and of or treat another unkindly, redemption is forever possible and advisable for both happiness and health. Whereas Buber asserts that God could and would reject man, the Christian believes that God will never forsake a Christian as long as forgiveness is sought in the name of

Christ. Because of His love for us, He is always willing to forgive when man is willing to seek forgiveness, because the price of forgiveness has already been paid. God does not desire for us to be alone, instead, He is constantly drawing us into a deeper relationship with Him.

Buber On Love and Liberation

According to Buber the I emerges from I-Thou relationships. The emergence of the I is the liberation of one's wholeness and uniqueness. In this liberation the I experiences love. Not until the I has been liberated does one have the capacity to be a service to others.

Love is a cosmic force. For those who stand in it and behold in it, men emerge from their entanglement in busyness, and the good and evil, the clever and the foolish, the beautiful and the ugly, one after the other become actual and a Thou for them; that is liberated, emerging into a unique confrontation. Exclusiveness comes into being miraculously again and again—and now one can act, help, heal, educate, raise, and redeem (Buber, 1970, p.66.)

Liberation, then, is releasing oneself to others and freeing oneself to love. Yet such freedom does not liberate the I from responsibility. Instead, Buber defines love as responsibility.

Love is responsibility of an I for a Thou: in this consists what cannot consist in any feeling—the equality of all lovers, from the smallest to the greatest and from the blissfully secure whose life is circumscribed by the the life of one beloved being that is nailed his life long to the cross of the world, capable of what is immense and bold enough to risk it: to love man (Buber, 1970, p.67.)

Buberian thought suggests that humans find in their relationships with other humans, the liberation of their own identity, responsibility for others, and love. Relation, then, is what gives meaning

to life. In the nurse's daily activities, in her usual encounters with humankind, she offers not only skills and knowledge to prolong life, but she also offers an attitude that gives life significance. And in her dealings with human spirituality, how dear that significance becomes. Because without belief that life has meaning and significance, few patients would ever recover from illness. The love and kindness a nurse projects, her intentions to heal with love is life-giving. And this intentionality is an explanation for the success of spiritual healing methods such as Therapeutic Touch. The arc of I-Thou, the energy between two people is not only healing, it is life-giving.

The Eternal I-Thou

The nurse's loving and reverent relationship with God not only guides her relation with others, into peaceful and healing acts, but such love also offers wisdom, insight, and creativity. Despite the number of theories and writings about creativity, few writers accredited love of God as their inspiration for ideas. Says Buber:

All who, like myself, mean by "god" him that, whatever else he may be in addition, enters into direct relationship to us human beings through creative, revelatory, and redemptive acts, and thus makes it possible for us to enter into direct relationship with him (Buber, 1970, p.181.)

Thus Buber supports Ken Wilber's epistemological terminology. Revelation, the pinnacle of knowledge and the essence of creativity, healing, and wisdom results from the vision of the eyes of the soul is a valid form of knowledge as well as incorporates all types of knowledge.

Whoever is sent forth in a revelation takes with him in his eyes an image of God; however supra-sensible it may be, he takes it

along in the eyes of his spirit, in the altogether not metaphorical but entirely real visual power of his spirit (Buber, 1970, p.166.)

The power of the spirit provides the nurse with endurance to carry on with her work, making the world evermore a little better. The evolution of the world is not only God's doings, but also man's. Likewise, the evolution and liberation of the nurse and nursing relies heavily on the relationship between the nurse and God, and the efforts of both. The nurses' liberation is unfolding, but not without much hard work.

It is not man's own power at work here, neither is it merely God passing through; it is a mixture of the divine and the human (Buber, 1970, p.166.)

Nurses simply cannot defy God. Instead, nurses must play an active part in His will by striving to liberate themselves individually from intimidation, the profession from oppression, and their fellow man from illness and suffering. And it is the arc of the relationship between nurses and patients as well as between ourselves and the Eternal Thou that offers us every virtue nursing entails--wisdom, compassion, courage, creativity, healing. Essentially, our relationships with an Eternal Thou offers everything that nursing is...Love.

Potential for I-Thou Relationships

Every relationship has the potential to become an I-Thou, yet Buber confesses that man's natural tendency is to remain in the I-It. People put up barriers because they know that entering into a relationship also involves risk. The greatest risk means surrendering

control of individual will for that of God's. One must sacrifice the self and the will of the self for Thou.

The religious man is supposed to have transcended this tension between the world and God; the commandment for him is to leave behind the restlessness of responsibility and making demands on himself; for him there is no longer any room for a will of his own, he accepts his place in the Plan; any ought is dissolved in unconditional being, and the world, while still persisting, has lost its validity; one still has to do one's share in it but as it were, without obligation, in the perspective of the nullity of all activity. Thus men fancy that God has created his world to be an illusion and his man to be real. Of course, whoever steps before the countenance has soured way beyond duty and obligation--but not because he has moved away from the world; rather he has come truly close to it. Duties and obligations one has only toward the stranger: toward one's intimates one is kind and loving (Buber, 1970, p.156-7.)

The preceding passage has an important message for nurses. Nursing should be done for love, because nursing is love. For no other reason could nursing be enjoyed, but to do it for love. To choose nursing for money is a folly, because there are easier ways to make money. To become a nurse for duty and obligation is self-enslavement. But nursing for love is liberating. As nurses free others from suffering and pain, she also frees herself. Christ said, "It isn't your sacrifices and gifts I want--I want you to be merciful" (Matthew 9:12, Hosea 6:6.) From mercy toward others, mercy is obtained, as Christ promises in, "Blessed are the merciful for they shall receive mercy" (Matthew 5:7.)

Buber spoke of intentionality in the coming of an "I-Thou" relationship. Similarly, the work of the nurse carried out with the intention of love and mercy is likely to bring comfort and healing than that carried out with automation. If one only attempts to do his or her work in the name of mercy, then mercy is also the reward. If

one makes her decisions based on love then with love her own judgment will be made. It is the law of reciprocity. It is the promise of the New Testament.

Conclusion

Nurses from a purely scientific frame of thinking which Wilber calls World View II may find the religious language of Buber too prudish, when it is intended to be liberal and open. To speak of God's will creates thoughts of determinism, that humans have no choice. However, man does have choice, between right and wrong, good and evil. Wilber asserts that by his good choices man grows higher in spirit, closer to morality, closer to God. Buber adds that as man continues to grow closer to God, his relationship becomes I-Thou with the Lord and more so with other people. Standing in the I-Thou relationship, humans acquire the ability to teach, influence, create and heal. Thus, the destiny of nurses and nursing as a profession is directed toward generating a greater humanity. And such destiny occurs by nurses making good and right choices for mankind, and not the profession alone. Surely the profession will benefit from every right choice made by nurses in any role. Among all the professions few require the compassion, the patience and the caring demanded by nursing. And those who do it, and do it well, are surely stewards. These are the heroic nurses. Again, from the book of Matthew we encounter those who serve as a choice:

The more lowly your service to others, the greater you are. To be the greatest, be a servant. But those who think themselves great shall be disappointed and humbled; and those who humble themselves shall be exalted (Matthew 23:11.)

And with this knowledge, we can go forth and do our work with deep joy.

CHAPTER V
PROSPECTS FOR THE FUTURE AND CONCLUSIONS

In the beginning, as it will be in the end, is God. And from God comes the call to relationship, the calling to be. Nursing educators have been reluctant to speak of God or even let students speak of Him and His role in nursing. Yet, most likely the best nurses have not denied His presence. And because of such negligence educators are denying students the right to express feelings about the most significant part of their profession--their reason for choosing it. If they chose it for money certainly they will soon realize that many other jobs pay more and require less knowledge and responsibility. To be truthful, no one could pay a nurse enough for what she or he does. If they chose nursing because it seemed pure and good and free of political corruption, they will be disillusioned even more. But if they chose it for love, because they were beckoned to serve mankind, then they will be fulfilled.

Early in their curriculum and lastly before they graduate, nursing students must have opportunity to reflect on their motives for choosing nursing as their career. Either through writing or discussion, nursing students deserve the chance to integrate all the theories, facts and skills into a healthy philosophy for themselves. Open expression of values, dilemmas, anxieties and paradoxes will help them clarify their own beliefs, and be open to the beliefs of others.

Of the many paradoxes students will encounter in practice, one of the greatest to resolve is learning to serve humanity without becoming a slave. Nurses enjoy serving people and helping those that need us. But nurses resent being treated as if they chose this profession because they were not smart enough to do anything else. The problems between nurses and management, nurses and patients, and nurses and physicians, arise when the nurses' service is mistaken for enslavement. Most nurses, the best nurses, serve only one Master. We do what we do for Love. If Love is our master, then we must answer only to Love. If we remember that we serve only Love, then we serve God, because God is Love. The service for Love does not enslave us, but sets us free. So on the fateful day, when we face Judgment, and are questioned about the meaning of life, the nurse can say humbly, but confidently, "I think, mostly, it was all about Love."

Emphasizing the Individual

A nursing school that recognizes the importance of Love treats students with dignity and respect. Created in the same image, students and faculty together create life in the learning setting. Both teachers and students are free to be human beings and share problems, puzzlements, humor. Unlike the philosophy of one dean, well-known for her innovations and professional image, who said, "Nursing will progress more quickly in a world where women don't cry." I had to disagree. A better world is one where men cry, too. Remember: Jesus wept.

The teacher/student relationship should celebrate the uniqueness of students rather than pressing them into a professional socialization mold. The socialization process is not only mechanistic, but also slightly fascist. Teachers cannot expect everyone to be identical nor blindly comply for "the good of the cause." Students have the right to find their own cause, which may be no cause, but just to be. Imposing professionalism yields resentment, while unfolding it brings understanding. The power to change, the drive to move forward, the impulse to learn must come from within the student. The teacher's role is to help him unleash that inner power, and direct it in some healthy, creative way. Learning can be fun and it should be. But trying to squeeze individuals through a machine-like process will only cause pain and suffering. I disagree with the contention that suffering is actually good for people. The only good it brings is if it causes people to hold hands. Unfortunately, if suffering is faced alone and without love, it can also result in hostility, bitterness and violence.

Hence, our persistent teaching and pressing students and nurses to be involved with professional organizations, professional literature, and political activity is not at all an act of love. For as Martin Buber, John Dewey, Ross Mooney and Jim Macdonald repeatedly said, what is good for the society is not always what is good for the individual. But if something perpetuates the individual, the society will also benefit. And the greatest people in history sought to free others, such as educators who attempt to liberate minds, and nurses who liberate humans from suffering.

A wiser approach to both education and management is to focus on the happiness and fulfillment of the individual rather than obsession with promoting the profession. The profession will naturally progress toward liberation as numbers of individual nurses liberate themselves. Ironically, most teachers and managers believe they are focusing on the individual, but they stand on a foundation of reward and punishment--grades and merit raise. The implication of a reward and punishment system is that compliance is not only expected, but also enforced. Freedom cannot be forced, only made enticing. As Wilber said,

There are only participants in emancipation. You can only force slavery; you can't force a person to be free (Wilber, 1983, p.196.)

The Portrait of the Good School

Recent studies of schools have shown how improved student happiness and success grows from focusing on liberating students rather than forcing them to conform. In 1983 Sara Lawrence Lightfoot, Harvard professor, published a series of essays describing six happy, healthy high schools called The Good High School. Lightfoot's findings were that good high schools are not perfect but anticipate problems and change, choosing to tackle difficult situations head-on. Likewise, faculty of these schools don't long for the "good old days" when kids were well-behaved and dressed like cheerleaders. But the sensitive researcher recognized the insecurities of the contemporary teenagers beneath their sophisticated outward appearance. And so the education of the students focused on developing the students from the inside out, rather than putting image first.

Likewise, the good nursing school recognizes that intelligence, morality, maturity, and sophistication are not products of perfect class attendance or good grooming. They are products of deep and serious contemplation, but also joyous living. The good school has life, invites life. There is little longing for the "good old days" because the good new days are exciting and exploding with energy. Yet, traditional ideologies of trust and caring are ever-valued. The good school has a positive image of the human potential. The good school lends courage and hope to its students. The good school portrays a feeling of community.

The Curriculum

Reconceptualist curriculum theorists such as Macdonald, Mooney, and Pinar define the curriculum as the learning community. Infinitely abstract, reconceptualists focus on the spirit or atmosphere of the learning setting. If the spirit is one of warmth, openness, and encouragement, then learning will take place. A loving, friendly atmosphere is the curriculum goal of the new age thinkers. Learning occurs, they claim, in trusting, happy settings rather than authoritative ones where the teacher knows the information and feeds it or beats it into students. Within the greater curriculum, then, lies the lesser curriculum, the subject matter. The open paradigm allows room not only for technical skills, but also spiritual ones. Hence, healing arts from other cultures find their place in the curriculum. Students learn to believe in their own healing powers from the energy elicited from their love for mankind.

The language of the curriculum can veer away from strictly technical, clinical language and can include simpler layman's words such as caring, healing, trusting, and loving. Caring does not have to be syrupy or sentimental. Nor does all sentiment need to be replaced with science. A well-known word such as "trust" does not have to be replaced with "rapport" in order to make it sound impressively scientific and sophisticated. To refer consistently to nursing in technical terms only causes our students to believe that nursing can be a predictable science, but it also starves them from learning nursing as an art. Lose the art and you lose beauty. Lose beauty and you lose joy.

I am concerned for the nursing schools that work too closely with hospital nursing administrators. For the goal of the administrator is nearly always organization-focused and thusly, self-serving. While the school strives to make nursing a joy, an art for those who will practice it, the hospital seems destined to become more and more bureaucratic and technological, removing any element of joy. Newer and more complex machines may solve some problems related to human error, but also moves the nurse away from caring for the patient to caring for the machines. Yet, I am convinced that humans need love in order to heal, in order to live. Technological advances alone may prolong physical life, but does little for the spirit. Students need to understand the difference.

The Portrait of the Student

With emphasis on the individual growth and unfolding of the student, each student becomes aware of her worth and significance to the

world. This awareness lends itself to each student coming alive with her uniqueness, her liberation. Such education celebrates students' originality. Carefully, high spirit is encouraged, but also directed. There is such thing as destructive creativity and destructive energy. So within the student swells faith in herself, but also faith in mankind. The creation of her own life, as well as the creation of the universe is not only in God's will, but man and God working together. Liberation, then is taking one's place in the Plan and fulfilling those responsibilities. Liberation means creating one's destiny. Liberation is joy.

Liberating students' minds requires two things; exposure to various ways to express one's ideas, and the opportunity to do so. Nursing educators devote much time to cramming facts and theories into students' brains. Learning facts requires memorization, the lowest form of knowledge. Needless to say, some facts are necessary to know, and teaching them cannot be totally avoided. However, facts memorized without conceptual connecting and persistent use are quickly forgotten. And even if the student remembers them, the facts alone do little good. Referring to the Sherlock Holmes example again, the good detective would have developed little reputation for his talent if he had only collected facts without using them to solve mysteries. Facts help us see the "big picture" of the world, but cannot be confused for the world itself. The creation of the big picture, as the artist realizes, emerges from the meaning of the facts by the observer. Students, then, need constantly to create mental scenarios where the

facts become personally meaningful to them. For example, I can picture a class period with the following dialogue between the professor and the students on the subject of pain.

Imagined Dialogue with a Nursing Student

Professor: What do you know most about pain?

1st Student: I don't like it.

Professor: Right. No one does. It sort of defies definition if we enjoy it, huh?

2nd Student: Some people seem to enjoy it, though. Or rather they seem to like wallowing in suffering.

Professor: Sad, but true. Some artists think you can only know the truth when you are suffering. Why is that so?

2nd Student: I guess because when they suffer they can see everyone's suffering...

Professor: I think you nailed it. Perhaps the birth of compassion is being able to see your own suffering in someone else, or their suffering in yours. Com-*passion*. "Com" means together. Passion means "strong feeling"—often referring to the suffering of Christ during Passover. We suffer together.

1st Student: But what does that have to do with nursing? We just surrender to suffering like artists do?

Professor: In some cases, holding hands is all we can do. But when you have pain, what is it you want more than anything?

1st Student: To get rid of it.

Professor: Right. So what is the nurse's role?

2nd Student: To help relieve the suffering. Help free the patient from pain.

1st Student: And in my case, the sooner the better.

Professor: In everybody's case, the sooner the better. However, some remedies are quick, but only treat the problem temporarily, which may or may not be enough. "Pain" comes from the Greek word for penalty or punishment. Taking away the punishment will keep the pain from recurring. For instance, you can give an

abused child narcotics for his broken arm, but that doesn't do much about the source of his "punishment".

2nd Student: Did the Greeks think pain was punishment for moral misconduct? Like the play Oedipus?

Professor: Some people think that way...that people deserve their suffering. But personally, I think it goes against New Testament teaching. Christ suffered much and he was morally perfect. The martyrs, too.

2nd Student: So our job is to provide comfort rather than casting judgment.

Professor: Well said. Now let's talk about some ways to provide comfort.

I cherish rich dialogue like this, but rarely found it in time-pressured nursing education. Instructors may be distracted by trying to stir anger for the economic and political iniquities found in practice. But dialogue such as this offers positive feelings and deep understanding about the nurse's role. The facts fall into place because they have a place to fall into. The student through his own reflection, gains insight of the nobility of his profession. The student comes to life in finding the joy and nobility of working for love. And joy is liberation.

Conclusions

Nursing has progressed as a profession over the ages. The practice of nursing started perhaps as mammalian mothers caring for their children, and the caring extended to other helpless members of the community. When humans developed health care centers such as hospitals and clinics, nurses become assistants to physicians. Yet, as the health care facilities grew in number, size, and sophistication, they grew more professional. Florence Nightingale is credited with the

first attempt to sever the nursing profession from the medical profession by means of developing a separate theory and standard of practice. From this point, nurses continued to struggle for unity, organization, standardization, and autonomy. The phases of nursing's evolution have been referred to as traditionalism, conceptualization, professional socialization and finally, liberation.

The descriptions of those different phases in the text tend to be lengthy and perhaps even confusing. They overlap in time and content while also contradicting in some places. But in short, I see "traditionalism" as mastery of skills, "conceptualization" as mastery of theory, "socialization" as mastery of professional behaviors, and "liberation" as mastery of joy. Such joy results from choosing to live by universal laws of love, justice and wisdom ahead of meeting the demands of the bureaucracy and a technical reality.

Whereas in nursing education and administration we verbalize our desire for nurses to be professional in attitude and behavior, what we may really want is for students and nurses is the very thing we want for ourselves—the joy in being alive and doing something meaningful with our lives. The assumption we make is that success is measured by meeting the expectations set forth by the profession and this isn't always the case. The theorists characterize professionalism as responsible, knowledgeable, autonomous. Very stern and serious words. Rarely do the theorists describe professionals as wise, warm, kind, fair, friendly, loving people. Such traits are held to meet the expectations of the Lord, a much higher Judge than peers or bureaucrats.

Without teaching love and kindness through example and dialogue, nursing teachers create an image of nursing professionals that eat, drink, sleep and make love with their career. Yet the happiest nurses rarely do this. Eating, drinking, sleeping and making love are parts of their lives, as nursing or being a nurse is a part of their lives.

Similarly, the emphasis in professional socialization is usually on "leadership" rather than "cooperation," as well as "autonomy" rather than "collaboration." We have stressed assertiveness more than flexibility, and factual knowledge more than wisdom and good judgment. The message elicited is not loud, but very subtle. For example, use of "objective" tests such as true-false, fill-in-the-blank and multiple choice are good evaluations of factual knowledge, but rarely give the student credit for compassion of human suffering, intuition of human conditions, or insight of human emotion, or creativity in problem-solving. Even state board examinations fail to evaluate students on much more than the lowest forms of knowledge-facts. But how many nurses have lost their jobs or license because they failed to know a certain bit of information? Or because they couldn't name a certain theory and its application? The answer is none. Nurses lose their jobs for drug abuse, lying, cheating, stealing, absenteeism, and rudeness. Most are fired because they fail to care about themselves, others and the job they do. Most are fired because they are unhappy and yet, the nature of the working conditions and level of self-knowledge often creates unhappiness. Likewise, students who do poorly fail because they are unhappy with their studies and maybe with their lives. Some are unhappy because they are dreadfully bored.

Nursing educators often subtly reinforce unhappiness. It is as though we confuse the seriousness of nursing with unhappiness. The confusion lies in the double message which we expect students to clarify for themselves. The truth is yes, nursing is a very serious business. It involves caring for human lives. It includes life and death situations on a daily basis. It is loaded with decision making when facts are unclear and issues are ambiguous. It is hard work which no amount of money can reimburse. It is service to the poor, sick, and elderly. It is one of the most humble and noble means of earning a living. Yet, despite all of its seriousness and humility, it can be enjoyed. And for all the reasons a person may choose to become a nurse, the most compelling reason given by some of the best nurses I have known is that they enjoy it. Deep inside, beyond the complaining about the schedule and beyond the miniscule paychecks, somewhere inside lies a deep love for helping people. And the nurses who remain in nursing for this reason are Plutarch's heroes. They are my heroes. And they are divinely blessed, following the course of eternal destiny by willfully carrying out the will of God. They are heavenbound.

The paradigm presented, then, is not based on brand new ideas. Contrarily, the pyramid of knowledge (facts, concepts, vision) is as old as man's first relationships with his Maker. The newness of the epistemological paradigm is in its application to nursing and to nursing education. The paradigm of knowledge also serves to explain the progression of the profession. As more nurses reach higher levels of understanding, our intellect grows more sophisticated. As our

intellect grows more sophisticated, so does our profession. We become more sophisticated in fact through diligent research, more sophisticated in theory through creative thought, and more sophisticated in our moral judgments through our own growing relationship with our Creator, and our deepening concern for the welfare of mankind. So in our search for knowledge and understanding, we gather facts and theories, let us not forget the essence of the search...at its Ultimate, Nursing is Love.

While enveloped in our search for knowledge and understanding and in our struggle for economic and social equity, I hope we never forget why we were drawn to nursing in the beginning. Love of others. Because more than economic wealth and more than social status, practicing nursing for love leads to self-worth and uniqueness in the ultimate relationship. This understanding, this highly-valued knowledge is the work of the soul that leads us to the eternal liberation which we seek. So as we as individuals grow in social and moral consciousness on the route toward liberation, so does our profession and our world follow us.

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