
...Dr. Johnea Kelley

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I believe nursing is the single most important essential component of health care and is therefore indispensable to the furtherance of man's welfare. It encompasses not only the physical aspects to ensure comfort, but the psychological dimensions that personalize and foster humanness as well. In this context, I believe nursing should be the stabilizing force, providing continuity of care and ensuring the holistic approach in promoting and maintaining wellness, preventing illness as well as treat it. In its unique role of health teaching and anticipatory guidance, nursing has an obligation to provide opportunities for people to participate in their own care and exercise options within means of their control.

My own philosophy of nursing supports the self-determination of the patient. I believe that individuals in our society have a right to define their health needs, goals, and aspirations and then seek the type of services from the provider that will serve them best. However, the public can only properly define these needs and goals if the information need is adequate and available. In my view, nurses are the primary sources of health information and teaching. I believe nurses, in this role, have the potential and the knowledge to impact on the health status of the community, whether that community is local, state, or international. The challenge before the profession is to share this knowledge and be a participant in the building of a healthier society.

I believe the nursing profession should mobilize its members to provide opportunities that will effectively influence the manner in which patients perceive nurses and the services they render. As long as nursing remains subjugated to the medical profession without achieving a fee-for-services-rendered status, the public will continue to devalue or undervalue the services we provide. Unless some concerted effort is made to change our public image, society will not believe what we do is worthwhile or worthy of recognition.

I believe the public must demand of the profession accountability in all phases and at all levels of functioning where relatively little has been required in recent years. That this accountability be translated into measurable results is a necessity. Accountability must be manifested in practice and in preparation. In the practice setting, the nurse is seen as accountable to the physician instead of to the patient. This misguided accountability contributes, I believe, to the misconception about the worth of our services.

I believe it is imperative that we establish cooperation and coordination effect changes in practice and make nursing education more relevant to today's society. Education must insist that the curriculum offering-especially the lower division, which is the cutting edge of the curriculum offering-especially the lower division, which is the cutting edge of the curriculum-exert an influence on students. The profession must take steps to assure the public that students of different programs are different and that they are more different after graduation than they were before. Moreover, the difference must be measurable in terms of basic educational competencies required by the program. I believe it is imperative that we dispel the public's notion that "a nurse is a nurse is a nurse." Not all nurses are prepared alike; nor are they prepared to function in the same manner. It is up to the nursing profession to articulate this difference and support the difference in the utilization of nurses (i.e., the technical prepared nurse as opposed to the baccalaureate nurse).

In summary, my philosophy supports a framework for consideration of nursing on a two-dimensional plane. On the first plane, I see nursing as ministering vital functions of health care, health teaching, and promoting wellness in the health care system milieu. The second plane deals with my belief about nursing as a professional discipline. I believe that nurses are a collective body of individuals who must band together and make things happen in the health arena and at the local, state, and federal governmental levels. I believe, too, that the profession is becoming skilled in health policy formulation and gaining political clout through its lobbying efforts to promote health legislation that affects the practice of nursing. I believe nursing should become self-regulation, gain control over its practice, and fight for third-party reimbursement. We, as nurses, are accustomed to shouldering enormous responsibilities. We must be willing to assume additional responsibility for the continuing expansion of our practice and development of the whole health care structure within which we work. Political strength is a necessary prerequisite for making that structure as efficient and productive as possible.

In conclusion, I believe that the future of nursing depends on the degree of political strength we garner, the demands for our service, and the ability of the profession to provide services to meet the changing needs of society by mobilizing resources for human betterment on a global basis.

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