

# Early History of Associate Degree Nursing

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The associate degree nursing program: ". . . presents a new type of nursing program in a new setting; a program carefully designed to fit within the pattern of community/junior college education, to meet the needs of interested candidates who might otherwise be lost to nursing, and to prepare nurses for a specific range of nursing functions-those embodied in direct patient care. (Lewis, 1964)

## **Why a Two-Year Collegiate Nursing Program ?**

The urgent needs that came to the forefront of the public consciousness and the immediate occasion for the development of the associate degree nursing program were primarily due to a shortage of nurses after World War II as well as the reform movement in nursing intent on moving nursing education into higher education. (Haase' 1990).

During the World War II (WWII), there was a severe shortage of registered nurses (RN) as they answered the military's call for service. Further compounding the nursing shortage was the siphoning off of RN's to work in wartime industry. While student nurses continued to provide the majority of patient care in hospitals with a training school, hospitals also employed RN's as general duty and supervisory staff. The hospital nurses who remained increased their hours to make up for short staffing but the loss of registered nurses on hospital units meant that the incompletely trained novice nurse worked under the direction of an overworked supervisor..(Haase, 1990, p.2)

In an effort to find a solution to the acute nursing shortage during the war Congresswoman Frances Payne Bolton introduced a bill in the House of Representatives that, in 1943, created the U.S. Cadet Nurse Corps. The Bolton Act reduced the normal 36 month training program to 30 months. However, the individual state boards of nursing demanded that students should have an additional six months experience, either in their own institution or a government institution. (Kalish & Kalish, 1995). While the major impetus was to alleviate the nursing shortage, the Cadet Nurse Corps indicated that nursing education could be successfully completed in less than three years. After WWII, hospitals expected the nursing shortage to end when 'their' nurses would return to staff the hospital they had left. War changes many things...

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## **Post WWII Nursing Shortage: A Matter of Supply and Demand**

### Decreased Supply

When WWII ended, some nurses choose the remain in the military; those that were discharged found many options open to them. Some of the discharged nurses chose to marry and start families after their discharge. According to questionnaires returned by 31,000 members of the Army Nurse Corps, only one in six expected to return to her prewar hospital position. The nurses stated that they had a great deal of responsibility and greater satisfaction in the flexible, autonomous roles that military service provided in contrast to their pre-service roles. Other factors leading to the continued shortage of general duty hospital nurses, these were:

- Poor pay for hospital nurses compared with pay in industry or physicians' offices;
  - Shorter hours in non hospital positions;
  - Working conditions – the hospital nurse, although referred to as a ‘professional’, was not treated as such by physicians, hospital administrators or the public
  - Stiff competition from other career fields which were opening up for women. Since women had more options, and as the life of a nursing student or a nurse was quite arduous, there were many other choices that were considered a better career choice.
- (Kalish & Kalish, 1995, p. 325)

### Increased Demand

The demand for the services of nurses rose sharply after World War II. Three major developments led to the increased demand:

1. Medical and surgical advancements in the ability to treat disease;
  2. Expansion and upgrading of hospital facilities;
  3. Growing number of Americans enrolled in private healthcare insurance programs.
- (Haase, 1990, p 1)

### Educational Reform

A reform movement in nursing, intent on moving nursing education into the general system of American higher education, played an important role in the start of the associate degree

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nursing program (Haase,1990). According to Haase (1990), by the end of the 1940's conditions were ripe for the emergence of a new way to educate registered nurses. Some of the models created by the emergency situation to educate the increased demand for nurses during World War II provided insight into educational models that might be followed post WWII. A major goal was the movement of nursing education away from the apprenticeship system of the hospital training school into the general system of American higher education. Nursing leaders felt that with the chronic nursing shortage there was better chance for educational reforms (Haase,1990, p. 12).

In the 1940s nursing students in the majority of the nation's hospitals were providing the major share of care of all patients. With the advances in medical practice, and the new skills and knowledge required of the nurse, it became apparent that the apprenticeship method of educating nurses was not only a disservice to the education of the students but negatively affected the standard of care provided patients.(Haase, 1990)

### Accreditation and Educational Reform

At the 1950 convention of the National League for Nursing Education (NLNE) the entire membership formally adopted the stand that "nursing students should have the opportunity to use educational facilities equal to those of students preparing for other fields of 'social endeavor'". However, faced with losing their grip on the supply of employees as well as a subservient assistant, the American Hospital Association and the American Medical Association opposed this motion (Haase, 1990).

In 1951 the National Nursing Accrediting Service introduced a nursing school improvement program with plans for self-study by individual schools, consultation for schools seeking to become accredited, and the identification of common problems. It was felt that the system for educating nurses in the hospital programs utilizing an apprenticeship system was archaic and did not meet the standards of modern teaching theory and practice (Haase, 1990, p. 19),

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## **Mildred Montag: Education of the Nursing Technician**

In 1950 Mildred Montag, then a doctoral student at Columbia University, completed the research for her dissertation "The Education of Nursing Technicians" published in 1951. In her dissertation Montag developed the philosophy and plan for an entirely new kind of nursing program, a two year program located in a community/junior college setting. Her plan also included the design for research that would test the viability of the idea.

When considering the issue of quality secondary to the shortage of nurses after World War II and the creation of other ancillary nurse helpers, Montag (1963) stated:

"quality nursing care can never be obtained by purely quantitative measures. Nursing leaders must look at the kind of workers needed, how they shall be prepared, and how they shall be used. . . This is particularly true today when nursing finds itself in a peculiar position. There are more employed registered nurses than ever before, and at the same time, there is much concern over the shortage of nurses. Hospitals and other health agencies are being forced to curtail their services to people. Auxiliary workers with many names--practical nurses, vocational nurses, aides, nurse assistants--serve only to further confuse the public. . . there has been a growing realization that the functions and activities of nurses are changing and becoming more extensive and more complex. There has been less realization of the need to adjust nursing programs to equip the graduates for these changing functions. It should be obvious that the demands made on nursing personnel make an improved education mandatory."

Montag's plan had the support of faculty members at the teacher's college, Columbia University, in particular Dr. R. Louise McManus, who was the director of the program. It was McManus who, through her contacts, made available the funds that made the initial pilot program possible.

The Cooperative Research Project (CRP) based at Teachers College, Columbia University saw the formal beginning of the project in Junior and Community college education for nursing begin in January, 1952. (Haase, 1990). The CRP project was based on four assumptions:

1. The practice of nursing is not static, on the contrary, it is constantly changing and is also becoming more complex. If nursing could be viewed on a continuum then nursing functions could be viewed from a simple to the complex. Nurse aides might be viewed as working at one end,-the simple end, and nurse clinicians at the other,

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complex end. The CRP staff assumed that the majority of nursing functions lay in the intermediate level.

2. An educational program could be developed to prepare a new nurse at the intermediate level. The precise functions assigned to the new role would define the content of the educational program.
3. The nurse functioning at the simplest, basic level, i.e. the nurse aide, could be prepared on the job and would not be a concern of the project.
4. The educational program should be conducted in an educational institution whose mission included the preparation of other technical workers-namely a junior or community college.(Haase, 1990, pp27-28)

Montag's plan for education through a two-year program broke with the 75-year-old stereotyped pattern of preparation for nursing, which was work and hospital centered. The plan took into account the changing needs of society for nursing service as well as the changing emphasis in medical care. Montag proposed a technical worker in nursing, more limited in scope than professional nursing, but broader in scope than that of a practical nurse. Montag's proposal also took into account the development of the community colleges and the need for nursing education to be within a collegiate educational framework. Technical education in nursing, according to Montag, must include the curriculum courses in general education, courses dealing with the specialized content in nursing, and such courses which are related to and support for specialized content, as the biological, physical, and behavioral sciences."

### What was meant by a technical nurse?

Registered nurses and nursing educators were confused and upset regarding the use of the term 'technical' in conjunction with a registered nurse. Where did this leave the diploma graduate? How did this affect the strong push for the baccalaureate nurse to be the basic education of a registered nurse?

Montag, writing in the AJN (1963), responded to concerns in her article: *Technical Education in Nursing*? She discussed her meaning when she used the term technician in conjunction with nursing.. According to Montag, too many nurses equate the term technical with

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rote performance carried on without knowledge or understanding. Montag defined the technical worker as opposed to the professional worker by stating that graduates of technical programs as semi-professionals " are expected to perform both on-the-job and off the job as persons of near professional status. . . the technician then, is "one who operates at a level somewhat below the professional but above the skilled worker". . .furthermore "the incorporation of the word "professional" in licensure laws, Montag states, "is to differentiate this worker from the practical nurse, not to confer on that person's status as that person professional status in the true sense of the term." (1963, p.101).

"If nursing is like other occupations, and there is no reason to believe it is different, than the work of a professional is greatly dependent upon the supporting and collaborative work of the technician."... It has been found in other areas that for every professional worker there needs to be several technical workers. It follows then, that the nursing technician is needed in large numbers if the professional nurses to make the contribution expected and demanded of her.

The professional nurse must have a truly professional education, if the services she renders are to be truly professional. This education can be achieved in no less than the baccalaureate degree program.

It was for the preparation of a nursing technician that the associate degree program was initiated.... Its placement in the community/junior college was deliberate. It was believed that education for nursing, should be geared into the system of higher education of the country. The community junior-colleges have had considerable experience with the preparation of technical workers in many occupations. Furthermore, the junior-college is a two-year institution. The program in nursing was projected as a two-year program with the belief that if it were indeed education-centered it could be accomplished in two years. The rapid growth of the community college as an educational institution and its accessibility to students were additional factors in placing this new nursing program in the community college."( Montag, 1963, p.101)

### **The Cooperative Research Project (CRP)**

After discussing the reasons for these problems Montag (1963) goes on to state:

"The Cooperative Research Project in Junior and Community College Education for Nursing of the Department of Nursing Education of Teachers College was carried on with a cooperating institutions:Seven colleges, and one hospital. Since 1952 when this project began, programs have steadily increased until now.[1962] There are nearly 121 programs. The number of students enrolled in these programs has increased from 26 in

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1952 to over 3000 in 1962. Because of the length of the program, graduates are produced at a faster rate than in traditional programs."

### The Program

As originally envisioned the program had several different characteristics that differentiated it from the traditional programs. Montag (1963) summarizes these as:

- The curriculum includes general, supporting, and specialized (nursing) courses. The nursing courses constitute about one half of the curriculum.
- The specialized or nursing courses have been designed and planned in a sequence different from those in more traditional programs. The content is grouped into broad areas.
- Many facilities are used to provide the learning experience is desired. No one hospital or health agency is sufficient.
- The learning experiences in the hospital or other agency are developed as laboratory experiences. The college facility is responsible for developing the curriculum and for teaching the students. The nursing faculty is employed by the college and with the same privileges and obligations as other faculty members.
- The program is 2 years in length. Some programs are two academic years, while others use one or two summers in addition.
- The student meets college admission and graduation requirements. She enjoys all student privileges and meets all student obligations.
- The college finances the entire program. Tuition and fees are the same for nursing students as for all others in the college.
- The associate degree is granted.
- The graduate is eligible for the licensing examination of the state in which the college is located.

No two associate degree nursing programs were alike as each was developed by the college faculty in the light of the philosophy and objectives of their nursing program. Each colleges had specific requirements for all candidates for the associate degree. General education requirements

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varied with similarities: All required courses in communication skills, social sciences, physical, and biological sciences, but the organization and sequence of the courses could be different and all had some opportunity for electives

### The Students

Montag commented that students who chose the associate degree nursing program presented an interesting picture. When the program started, there was a hunch that the new program would attract those interested in preparing for nursing, but not attracted to the traditional programs. While the great majority of the students entering the program of came from high schools, there were a substantial number that are over 35 years of age; most of the older students were married. Men were admitted in somewhat larger numbers than expected.(Montag, 1963, p. 102).

Reasons given by students for choosing the associate degree program were:

- College location;
- Length (2 years) and.
- Easy accessibility

Montag concluded that the associate degree program seemed to have attracted students who otherwise might not have chosen nursing as a career.

### How successful were the early programs?

Results of the licensing examination indicated that the graduates were successful in passing their state board examination; frequently with distinction.

### How well did the graduates carry out the functions for which they been prepared?

The associate degree program aimed to prepare students for those functions which lie in the technical area rather than the professional. They prepared students to give direct care to patients with knowledge and understanding as well as with technical skills(Montag, 1963).

"The question of who shall give nursing care to patients must be answered by the patient's best interests. The skilled technician has a place in the direct care of patients along with a professional nurse. The nursing technicians prepared in the associate degree program in the community junior-college is prepared to give patient care, is interested in giving patient care, and enjoys giving patient care." "It must be remembered that they do not

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prepare the students after graduation for management or for supervision" (Montag, 1963, p. 103).

## **Impact of the associate degree nursing program on nursing education**

At the start of the Cooperative Research Project (CRP), associate degree nursing educators had to negotiate with state boards of nursing to set aside the detailed educational regulations with respect to the numbers and sequence of nursing courses be waived. (Haase, 1990). As the regulations were adjusted, the associate degree faculty was able to create new educational designs and teaching methodologies. In the early years of the associate degree nursing program faculty had to be willing to challenge traditional practices, to experiment and to take risks. (Haase, 1990).

## **Influences and Innovations: Early Associate Degree Programs**

### Curriculum:

Associate degree faculty were influenced by Tyler<sup>1</sup>'s basic principles of curriculum and instruction, Bloom's taxonomy, and Mager<sup>2</sup>'s work on measurable objectives. The use of objectives was actually innovative, because until the mid-1950s, most educational objectives were teacher or subject oriented rather than student oriented; learning activities were prepared and carried out after which students were tested-all without the establishment first of what was to be expected of students who have completed the activities. (Haase, 1990) Faculty now had the means for measuring the practices and activities that took place in the program. Units of instruction and courses could be fine-tuned on the basis of results judged in the light of well-defined goals.

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<sup>1</sup> Tyler, Ralph, (1949) Basic Principles of Curriculum and Instruction, University of Chicago Press

<sup>2</sup> Robert Mager, Criterion-Referenced Instruction methodology: Books include Preparing Instructional Objectives; ; Analyzing Performance Problems (with Peter Pipe), and What Every Manager Should Know About Training

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### The nursing content.

The model provided by the Cooperative Research Project established the assumptions upon which all the early ADN programs were based. The most basic assumption was that nursing had two clearly defined components -- technical and professional -- the technical component was the mission of the ADN program. Nursing content was organized around common patient problems and nursing interventions to form a comprehensive basis for defining courses. Ruth V. Matheney declared, "basic nursing education must be patient centered and to accomplish this, the organization of the curriculum in all its aspects should be such that the patient and his care constitutes the goals of learning." (Haase,1990). Because the associate degree nursing program was carried out in the collegiate setting, rather than a hospital setting, the nursing experiences were educationally defined, rather than determined by the needs of the moment on any given hospital ward. Nursing faculty now had freedom to select agencies outside the hospital setting where students could have appropriate experiences. (Haase, 1990 p 44).

### Educational methodology:

Several new techniques were used in conducting the clinical conferences and in the laboratory component of the nursing program.

Clinical conferences were based on educational objectives: Preconference enabled students and the faculty to discuss the learning objectives of a planned clinical experience. Post conference provided the opportunity for students to describe their experiences, ask questions, and clarify the relationship between theory and practice.

ADN educators were innovative in the way they organized clinical and laboratory assignments:

- One method .for clinical assignments that addressed complex patient problems to assign several students to the same patient during the same laboratory time.

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- Early on, another instructional innovation was programmed instruction in 1963 Marie Seedor<sup>3</sup> published a research on its use of the community college nursing programs. Programmed instruction is self-paced and actively involves a student and provides immediate feedback and evaluation.
- Nursing faculty at Orange County Community College. New York experimented with what was called the "walk around laboratory practical examination". Solutions required the student to observe closely, manipulate equipment, and make judgments. The system placed each student taking the examination in the same situation with the same variables therefore making it possible to systematically evaluate students behavioral achievements
- Faculty also identified "critical elements" used for evaluating performance. At first they used checklists for the evaluation of specific nursing skills; eventually, the method was refined as faculty identified critical elements such as behaviors that must be demonstrated by student performance of the skill. The clinical simulation laboratories of today may be considered descendents of these teaching methods.

### **The California Experience (Hiatt. 1961)**

California was one of the early states involved in the new associate degree program. In 1957, in order to develop an associate degree program in a community college or a two-year program, the California legislature modified the law governing educational programs and nursing, which allowed the junior colleges to offer the basic nursing curriculum within their two-year lower division college pattern. The change in the law provided that, during the experimental five-year period which was the initial period of change, the programs were able to provide a curriculum of two academic years and two summer terms or their equivalent. Because it was a new program, and because the length of the program was different than current three-year diploma programs or

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<sup>3</sup> Marie M. Seedor, Ed.D, R.N. was an associate professor of nursing education at Teachers College of Columbia University. Dr. Seedor was the author of textbooks on nursing and a pioneer of programmed learning in nursing..(See Seedor, Marie, 1962, Can nursing be taught with teaching machines? AJN, vol.63, No. 8)

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the four year baccalaureate programs, the legislature subjected the programs to careful supervision and evaluation by the state board of nursing examiners. The experimental legislation was initiated by the state nurses association and supported by the state league of nursing, as well as by the state coordinating committee on nursing education. Even though the period of time required for the students to complete a junior-college program was 24 months, they had to meet the state's minimum curriculum requirements for all programs of nursing. The national state board test pool licensing examination was used; the same passing scores held for all candidates for licensure.

Prospective students for nursing needed to apply for admission to the college the same as other students. The junior colleges had an open door policy; anyone who could profit from study could enter the college. The prospective nursing students, when accepted by the college were then screened for addition to the nursing program in. In general practice, high school transcript, scores on college admission tests, and personal interest information were used jointly to indicate to the admissions committee that nursing applicant would have a reasonable likelihood of success. According to Hiatt (1961), students with markedly superior records were counseled concerning the advantages of enrolling in a four or five year college or university nursing program.

### Nursing curriculum:

The associate degree nursing programs varied in content; each program was administered within the policies of the college and classes were scheduled so that the students could be free for clinical practice at the optimum time. The hospitals that served as an extended campus were accredited institutions approved by the board of nursing examiners. The distance from the college to the cooperating hospitals was a factor in the amount of time which had to be allowed for travel to clinical practice. Teachers of nursing are with students whenever they have classes in nursing theory or giving nursing care. As faculty also had to travel to the cooperating college with the students faculty schedules had to be considered.

### Faculty

Faculty who teach in California junior colleges must be certified for teaching by the state Department of Education. Faculty also had to meet the requirements of the Board of Nursing

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Standards for teachers in a program of nursing. According to Hiatt (1961) there was a shortage of faculty which was not a problem in most fields of education. The challenging teaching opportunities of the nursing program and the college setting were some of the aspects which the junior college teachers of nursing found rewarding and satisfying. Salaries were comparable with those of other teachers in the college.

### Graduates

The average performance of California's first associate degree graduates on the state licensing examination scores were equal or above the state's total average figure for all types of programs. Employer were generally pleased and were anxious to employ these graduates is registered nurses. Employer comments stated that ADN graduates:

- Have a strong sense of their potential nursing role;
- Sought employment to give patient care;
- Have evaluation and problem solving abilities;
- Were question seekers and learners.
- Persons who had education emphasizing the patient and his need for emotional support.
- Enthusiastic

It was felt, that with staff experience as nurses, such as recommended for all new graduates, that nurses from the junior-college programs would be ready to accept added responsibilities, according to individual capacity. The graduates from the associate degree programs seem to prefer positions where they give patient care. Hiatt (1961) believed that the junior-college education for nursing was here to stay in California.

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