Incentives and Barriers in Pursuing a BSN
By Regina Phelps, PhD, RN-BC, NEA-BC
Executive Director, Mission Health Nursing Education and Research
Asheville, NC

Why should we pursue BSNs and higher degrees as nurses today? What has caused the shift of focus onto academic degrees? What is the background of the controversy that continues about the role preparation of the nurse? What incentives and barriers exist for modern nurses seeking to advance their careers and gain personal satisfaction by achieving academic degrees? This article will explore a bit of history and the current incentives to pursuing Bachelors degrees, and higher, while acknowledging the barriers in doing so!

Legacy of Nursing Education
Nurses have a long legacy of being educated in both diploma and associate degree programs. Florence Nightingale, herself the product of a hospital based nursing education program, began her career during the Crimean War, leading a team of 38 nurses to transform wartime hospitals and improve clinical outcomes for soldiers in the war (O’Connor & Robertson, 2003). Her early, liberal arts education and her love of mathematics and social sciences helped her become a recognized researcher by 1878. Recognized as an epidemiologist, researcher, writer, and nurse, Florence’s influence remains important.

Associate Degree programs emerged as nurse leaders tried to make diploma education more efficient and to increase the number of nurses available following the second world war and the emergence of a major nursing shortage during the 1940s and 1950s (Mahaffey, 2002). In 1952, the community college based Associate Degree Nursing Program was born. Bachelor’s degree programs were established late in the 19th century and early 20th century.

Advanced education, at the masters and doctoral degree levels, for nurses has increased enormously since the 1990s. Additionally, a number of controversial reports and recommendations have suggested that bachelor’s degree education is required for effective nursing practice. The ANA’s first position paper on the topic, published in 1965, has been a source of controversy since then.

Education Impacts Patient Outcomes
The ANA’s Magnet Recognition program, established in 1990, is based on earlier study by the American Academy of Nursing that identified 14 characteristics of health care organizations that excelled in recruitment and retention of registered nurses (American Nurses Credentialing Center, n.d.). Since then, additional research by Linda Aiken and Estabrooks and their colleagues, provided the evidence that the higher the numbers of nurses prepared with BSNs or greater degrees, the better are patient outcomes (Kovner, Brewer, Katigbak, Djukic, & Fatehi, 2012). That research led the Institute of Medicine (2010) to recommend that 80% of all registered nurses obtain BSNs by 2020.

Incentives to Return to School
Are there incentives for your return to school if you have a Diploma or Associate Degree in Nursing? Most nurses across our own system believe that obtaining higher degrees are necessary to advance their career. Indeed, in the last three to five years at Mission Health, the number of positions that require at least a BSN, like the Nursing Unit Supervisor, the Nurse Manager, and the Nurse Educator, among others, has increased. Obtaining the BSN will help prepare you to advance your career.
The Clinical ladder at Mission Hospital also recognizes the BSN as an element for advancement, and the MSN is necessary for level five. The positions are often associated with higher pay or salary differentials. Other incentives for returning to school include personal and professional growth, role modeling for our children, and improving our clinical outcomes at Mission Health.

**Disincentives in Returning to School**

There are, of course, some disincentives. It is time-consuming and costly. Returning to school requires us to identify new ways to balance our lives. Peers and our leaders can help us identify how to balance our lives and be effective learners, remain connected with our families and community, as well as maintain our work schedule. Mission Health education assistance, federal and state grants and loans often help decrease many of the financial burdens.

**Options That May Reduce Barriers**

One way nurses have found to reduce the schedule impact of the return to school is to use online programs. Several North Carolina based state universities have such programs. There are also many other schools available nationally if you have a particular need or focus. Many schools let you “try out” an online course to “try on” the online environment. Another tactic is to go to school with a peer group. Several groups here at Mission Hospital have used this approach in returning for a Master’s degree or a BSN. (Kovner, Brewer, Katigbak, Djukic, & Fatehi, 2012).

If you have a Bachelor’s Degree in another field, you might want to consider looking for a program where you can go straight to a MSN from your diploma or associate’s degree. You can pursue a MSN if you have a BSN, as well. Consider what field you want to pursue if you decide to return for a MSN. Education, administration, and clinical specialties like Nurse Practitioner or Nurse Anesthetists are options. Different programs have different clinical requirements. For most clinical programs, your school needs to have a clinical affiliation agreement in place and meet other requirements to practice at Mission Health organizations.

**Personal Note**

Returning to school is a big decision but an important one for career growth. I began my nursing career as a Diploma nurse and had a difficult time deciding to return for my BSN. It was only the beginning of a long and very rewarding career, and I kept going back to school! I have watched many nurses return to school over the years, and while they may be reluctant in the beginning, they have usually experienced huge personal and professional satisfaction from this journey.

**References**


