



# Nursing: As hopeful students rack up more debt, odds are against them

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many students is the high cost of providing specialized programs such as nursing. At Lane Community College, nursing costs \$5,000 more per student each year than what it brings in through student tuition, state and local taxes and other support, including donations.

Colleges would love to expand the program and help the state address what is expected to be a critical shortage of nurses in coming years. But they're reluctant to raise tuition so high it could price many of their traditional customers out of an education. And they haven't been able to get enough taxpayer dollars to fund nurse training expansions.

## Who should pay?

In some ways, the dilemma over nursing education is part of the larger question of who should pay for higher education. That in turn raises the question of who benefits most: the individual who gets a better job at higher pay, or society in general by having skilled workers who pay more in taxes and use fewer government services.

"Implicit in that question is this whole idea of whether education is a public or private good, and of course I'm going to be on the side of it being a public good," said LCC President Mary Spilde. "Our society benefits from having an educated citizenry, and we all benefit from having skilled health professionals, including nurses. We should be investing in that."

But that raises questions that go far beyond the issue of community college funding. If community colleges are unwilling to charge more, or if students are unable or unwilling to pay more, that leaves it up to the state to decide if it wants to increase its spending to create an adequate work force.

But that would mean increasing revenue through some kind of tax increase or taking money away from some other need. While the Legislature has acknowledged the need for more health care workers, it remains divided over any effort to increase revenues and has little room to redirect existing revenues without simply shifting the pain to another program.

Gov. Ted Kulongoski has supported additional funding to train health-care professionals, and he won legislative approval last year of a \$20.5 million plan to boost the number of graduates in fields from physicians and dentists to nurses to lab technicians. Anna Richter Taylor, the governor's communications director, said he is working on additional funding for his 2009-11 budget proposal.

"Oregon's not alone in this crisis, and it's not something anyone can expect us to solve in one legislative session," Taylor said. "So this has to be a continued effort."

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## Staying within reach

Community colleges are key to nurse training in two ways: they charge low tuition, especially compared to pri-



BRIAN DAVIES/The Register-Guard

**Nursing students** Rebecca Montgomery (left) and Donna Grant practice patient care in a simulated hospital environment at Lane Community College. A nursing degree at the school now costs students about \$13,000 in tuition, fees and other expenses.

vate universities; and they offer two-year programs that in most cases don't require students to move. The latter benefit is especially important because many of those applying to community college nursing programs already live in the community and don't have the money or desire to uproot themselves and move.

"My whole life is here," said Catherine Diederich, who's been trying to get into Lane's nursing program for four years. "I'm not going to go anywhere else and try to get in. That's why I keep trying."

It's also an open question how many could afford the tuition if it was raised to cover all the costs. Attending one of the four private universities that offer a four-year bachelor's degree in nursing, where tuition is closer to the actual cost of education, can run \$27,000 a year, or more than \$37,000 when fees and room and board are included.

No private schools in Oregon offer a two-year associate's degree in nursing, although at least two have licensed practical nurse programs. LPNs generally receive a one-year course of study and work in a variety of support roles, usually under the supervision of a registered nurse.

Spilde said Lane Community College's board of education has considered raising tuition and decided it's too high a burden to place on students. Spilde said that kind of tuition increase would limit who could sign up for nursing and put it out of reach of those whom community colleges were created to serve.

"What it will do is really discourage people who might be our traditional population," she said. "We want to be careful we don't displace our traditional student for whom this is their first stop on the higher education ladder. It's a balance that we're trying to maintain here."

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leges graduate half of the state's nurses, they only got \$2.2 million of the \$20.5 million the governor championed to boost the number of health professionals.

At community colleges, tuition has risen an average of 60 percent statewide over the same period. But some colleges have had to raise tuition much more than others due to changes in how the state distributes state funding.

That's led LCC to more than double tuition, from \$35 a credit hour in 2001 to \$73 this year and \$75.50 this fall, putting tuition and fees for a full-time student at about \$1,000 a term. In addition, students in a dozen LCC programs that are particularly expensive to offer, including nursing, pay an additional surcharge on top of tuition to help cover costs.

For nurses, that extra fee is now about \$2,000 each year of the two-year program. Nursing students also pay \$525 a year for lab and equipment fees and about \$500 a year for room and board are included.

That adds up to a minimum cost of about \$13,000 for the two-year program and the prerequisites. But that figure understates the cost for many students, who pay to take certain courses more than once to improve their grades and thus run up a bigger tab.

Could nursing students pay even more to cover or at least reduce the annual \$5,000 per student gap between tuition and fee income and what it actually costs to educate nurses? That's a course no community college in the state has chosen to pursue.

Many students already struggle with the cost. Although nursing itself is a two-year course of study, stu-

dents first have to take 18 credit hours of prerequisites. That can take a year or more because the fierce competition for the limited openings each year pushes many students to try to raise their grade-point average by re-taking classes and the re-applying.

That can leave many students deep in debt even before they start the two-year nursing program. Toby Miller-Catlin, a single father of one, made it into LCC's nursing program this year and said he already has \$14,000 in loans with more than a year to go, even with state and federal grants and some scholarship aid.

Some students even exhaust their financial aid and run up a pile of loans without ever getting into nursing. Lisa Nelson, who's spent three years trying to get into LCC's nursing program, already has amassed 150 credit hours of class time, almost enough for a bachelor's degree. But she still hasn't made it in.

But after summer term she'll have used up all her federal and state financial aid because of all the classes she's taken. A single mother with four children and two jobs, she'll have to start paying back her loans next year if she's not in school. She estimates that she owes about \$30,000 now.

"I thought I was going to better my life," she said. "I thought I'd be able to get a degree and be able to have the life I want. Now, I feel really hopeless because I feel that I've wasted my time."

## Some recent gains

Community colleges have tried to do more with less. In spite of the steep budget cuts, the number of nursing graduates from two-year programs in Oregon increased by 76 percent from 2001 to 2006.

That was during a time when state funding for community colleges fell from \$428 million in 1999 to a low

of \$375 million before climbing back to \$429 million in 2005. The current biennium's budget of \$500 million represents the first significant gain for community colleges since 1999, but most of the increase has been used just to catch up with inflation rather than expand programs.

LCC's proposed general fund budget for next year is up only about \$2.5 million, to \$76 million, not enough to cover inflation.

One reason nursing program enrollments increased in recent years is that community colleges sought outside funding. Hospitals and large health-care companies worried about a nurse shortage chipped in, students paid more through additional surcharges and in some cases faculty even agreed to teach more students with no boost in pay.

For example, PeaceHealth, which runs Sacred Heart Medical Center and the soon-to-open RiverBend complex, gives LCC \$200,000 a year to pay for two additional nursing faculty it otherwise wouldn't be able to afford. The surcharges community colleges such as LCC levy on nursing students also helped pay for the expansion.

Nursing faculty at LCC even agreed to increase the teacher-student ratio — from 8:1 to 9:1, the maximum allowed under state law — with no increase in pay in order to shoehorn a few more students into the program.

"They get no more pay, no more nothing, and they deserve big kudos for that," said Julia Munkvold, LCC's nursing program director.

Colleges also are improving their labs and classrooms through a combination of private fundraising and bond votes. LCC is trying to raise enough in private donations to match a state appropriation of \$6.75 million to build a new health and wellness building.

The building will provide more room for nursing and other health-care programs,

but the college won't be able to increase nursing enrollment without an increase in state funding, because bond money can't be used for operations.

Other community colleges also are trying to update and expand nursing facilities. Portland Community College, the state's largest, has decided to put a \$374 million bond measure on the November ballot to finance a major expansion that will include new space for nursing and health-care professions.

But Preston Pulliams, PCC's president and a member of the state Board of Higher Education, said increasing enrollment and replacing retiring faculty won't happen without help from the state.

While community colleges can appeal directly to their district residents for construction bonds or donations, all of the state's community colleges depend on state allocations for the bulk of their general funds, which fuel operational expenses.

That means they compete with universities, K-12 education, prisons, public safety and other needs for state dollars. Those allocations determine how many students the colleges can enroll, especially in programs such as nursing that can cost thousands of dollars per student per year more than colleges receive in tuition and state support.

That's not the way it used to be. Before the passage of 1990's Measure 5, which capped property taxes and shifted most education funding to the state's general fund, community colleges went directly to district residents for the largest share of their operating money.

Colleges that enjoyed strong local support, such as Lane, did well under that system. Those same colleges now often struggle because the state doesn't provide the same level of support local residents once did.

"Back then, if LCC saw a need we would turn to our community and say, 'Here's what we want to do,' and generally the community would support that. We can't do that anymore," Spilde said. "There's no question going to our local community was part of our solution, and we are precluded from that now."

Legislators already have weighed in on whether the state can, or should, pick up that baton and boost funding for nursing programs. Both the 2005 and 2007 legislatures allocated additional money to help expand health-care career education, which included the governor's \$20.5 million package, but higher education officials say it will take more to make appreciable progress.

Cam Preus, director of the state's Department of Community Colleges and Workforce Development, acknowledged that two-year colleges aren't turning out enough graduates to meet the coming health-care need. She called this biennium's budget increase a good start toward fixing that.

"We have to have a long-term view of what it takes to build Oregon's education system to the level it needs to be," she said. "We haven't met the need. We will make progress with this investment, but it cannot be the end of the investment."

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**"I thought I'd be able to get a degree and ... have the life I want. Now, I feel really hopeless."**

— LISA NELSON, WHO HAS SPENT THREE YEARS TRYING TO GET INTO A NURSING PROGRAM

# Degree: Program ends rivalry between community colleges, universities

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the state's looming shortage of nurses because it doesn't add any new seats to existing nursing programs. But what it can do is help increase the percentage of nursing graduates who have the more advanced training provided in four-year programs.

"What we're doing with OCNE is so big," said Julia Munkvold, director of the nursing program at LCC. "We used to get together and it was beat your four-year graduate." This truly is the most exciting thing I've seen in nursing education."

Munkvold said she expects about 80 percent of LCC's nursing graduates will take advantage of the option and go on to get their bachelor's degree. Jennifer Anderson, OHSU's recruitment director, said 60 percent of all two-year graduates in the first group of students eligible to enter the OHSU's bachelor's program are expected to sign up.

That compares to a national

percentage of only 10 percent to 15 percent of associate degree nurses now completing a bachelor's

Judith Baggs, senior associate dean for academic affairs at OHSU, said that could improve significantly if other states pick up the OCNE model. And she said it appears that many are considering it.

Nursing officials from 19 states have asked for information and advice on setting up similar programs, and several have submitted grant applications to help fund them, she said. Given the long rivalry between the two camps, Baggs said that's amazing.

Baggs said she was stunned by OCNE's success. "I came from New York, and I knew what was going on in other places in the country. Oregon is way out ahead of anybody on the ability of the community colleges and the four-year programs to work together."

With OCNE, once students

have several options. They can take their licensure exam and go directly into a nursing job; they can continue to a bachelor's degree by taking distance courses through OHSU or at a nearby campus; they can work part time while completing a bachelor's degree; or they can work long enough to gain some financial stability and then get a bachelor's.

A four-year degree is becoming increasingly desirable, especially at major hospitals and other settings where advanced medicine is practiced. Baggs said nurses are being called upon to work in team settings with ever more advanced medical technology and with patients facing complicated illnesses.

"The need is for leadership and the ability to manage very complex patients because as the population ages, people tend to have not one disease but mul-

tiple diseases," she said. "That really requires a bachelor's education."

OCNE also helps with one other important need: putting more nurses on a track to become educators. Colleges are facing the same exodus of retiring nurses as hospitals, but because a nurse needs at least a master's degree to teach, colleges have an even more limited pool to draw from.

OHSU's Anderson said coming out of nursing school with a bachelor's degree puts a nurse that much closer to the advanced degree needed to teach.

"Having more bachelor-prepared students means that we have more nurses who are prepared to get a master's or doctorate in the nursing field to help regenerate the faculty work force," she said.

— Greg Bolt

Eight of the 14 Oregon com-