

Editorial

So, what's in a title – the paradox of nursing professors!

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We have witnessed a recent proliferation in the UK, Australia and Hong Kong especially of honorary professorships in nursing and the widespread use (and misuse) of honorary and visiting titles. Indeed, in the UK at least, it seems the norm to award honorary or visiting professorships of nursing to a variety of Registered Nurses who hold strategic leadership positions. The recognition of significant achievement in a subject area or profession is a long-standing and legitimate use of an honorary title. However, we are conscious that it seems to have become normal practice in nursing and even an expectation! Previously, Thompson and Watson (2008) argued that awarding such titles helps to advance individual careers through engagement in academic activities, the demonstration of expertise to future nurses and advancing collaborative partnerships between the academy and healthcare organisations.

Our contention, however, is not with the awarding of honorary degrees *per se* in recognition of and reward for excellence (where this can be evidenced). Rather that it is not uncommon for the holders of honorary titles to ‘drop’ the honorary part of the title and assume that of ‘Professor’. So why does this matter? In the academy, the title of Professor is normally reserved for academics who have earned it through demonstrable and evidenced achievement of academic work that makes a unique contribution to knowledge. We say ‘normally’ as there is, sadly, evidence of professorships being awarded within the academy where achievement – certainly in terms of publications – is low (Watson, McDonagh & Thompson, 2016). Such title holders are also required to demonstrate academic leadership (as opposed to management) of a programme of work that builds capacity and capability in a subject area or profession. The profligate

use of such a title by non-academics devalues leading scholarly work and misleads other academic staff, students and the public.

The title Honorary Professor is appropriate for a strategic nurse leader worthy of a chair position at a university i.e. someone very eminent or distinguished in their field (see University of Nottingham (<https://tinyurl.com/y4w5as4u>; accessed 5 March 2019) and University of Sheffield (<https://tinyurl.com/y5725dls>; accessed 5 March 2019) websites, for example). The title sometimes permits non-university employees to enjoy the privileges available to regular academic staff members, such as access to facilities and libraries. However, it is expected that an Honorary Professor makes a significant academic contribution, for instance to research, teaching, scholarship, and enhance the student learning experience.

Whilst some high-profile dubious appointments have been made for celebrities and politicians, there are some questionable appointments also being made in nursing. We pose the question, therefore: why are these awards made and who benefits from them? The balance appears to be tilted in favour of the health service, with titles tending to be conferred invariably on Chief Nurses and often on Directors of Nursing (particularly if their hospital or health facility is linked to a university). Such awards may be made because the awardee can demonstrate outstanding professional achievement, are recognised as a leading expert in the profession and have qualities that are valued by the university and which will add to the experience of students and academics. However, honorary titles are always awarded for a fixed-period and most universities who award such titles have strict criteria for the use of the title – especially that of NOT

dropping the honorary part of the title! It is interesting to us however, that there is little (published) evidence of the contribution of honorary professors in nursing to the overall quality of provision to student learning, leadership development, knowledge generation and translation, or indeed the creation of opportunities in healthcare organisations for academic staff, e.g. Honorary Chief Nurse or Honorary Director of Nursing!

Importantly, if we believe that awarding honorary titles to nurses is important and worthwhile to do for the advancement of knowledge in the profession, then there are particular questions that should be addressed in the award of such titles, such as: what academic qualifications does the person possess that merits such a title? What do they contribute to the academy in terms of research, teaching and/or scholarship? What academic impact do they have: do they contribute to quality, rigour, originality? What is their contribution to the academic environment, strategy, capacity and capability and performance? Do they conduct and publish research, secure research income, for example, and do they contribute to the visibility, impact and reach of academic nursing? Of major importance; do they publish? There is little evidence in nursing of criteria such as these being used to award honorary titles and even less evidence of such contributions being actively made by awardees. So it seems that the title is awarded without a clear expectation of contribution by the honorary title holder or any accountability framework.

At a time when (especially in the UK) there is an explicit expectation of partnership working between universities and health care providers in nursing

programmes, then it seems to us that we need to question how we make honorary appointments and what is expected from title holders. We need to be clear as we progress nursing education programmes, that having honorary professors of nursing helps to shape and inform innovative nursing curricula and not be a mechanisms for nursing leaders to enforce their own agendas and impose managerial type 'training' rather than thinking, questioning and challenging (Darbyshire et al. 2019). Watson and Thompson have previously debated at length the purpose and role of professors of nursing (Thompson & Watson, 2006; Watson & Thompson, 2008, 2010a, 2010b), and have been critical of the growing practice of awarding such titles as Honorary or Visiting Professor for political or personal gain (Thompson & Watson, 2008). However, there is a need for a clear accountability framework governing such titles by universities including, sanctions for mis-use of the title, the period of time for which the title can be used, and evidence of significant contribution expected. Whilst we welcome nurturing and forging partnerships, networks and collaborations between academic and health service colleagues this has to be mutually beneficial and respectful and demonstrate a useful contribution to the academy.

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