

# A Family Full of Nurses: *Familial Influences Encourage Over 20 to Opt for a Nursing Career*

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The objective of this paper is to tell the story of 1 family with more than 20 registered nurses, and to discuss factors that impacted 33% of 1 nurse's nieces, nephews, and great-nieces and nephews to choose a career in nursing. This paper explores the familial influence on career choices, connectedness, stories, and significant life events.

## FINDING MEANING

"The pinnacle moments of my career have been with medical oncology patients and their families at the most fragile, vulnerable moments in their lives. We come to know and care about these human beings as we move through the phases of treatment. We have the task, perhaps a sacred duty, to tell them we have exhausted all alternatives, and that there is no other cure. After all the education, years of building competencies, and thousands upon thousands of care experiences, the pinnacle moments for me have been at these times. If we are at our best, the ability to simply be fully present with patients and families, often in silence for extended periods, holding their hands, crying with them, and if they ask, praying with them, have been the most important moments of my life as a nurse."

This 36-year-old nurse practitioner's comments are among the most moving of stories told in a tightly connected family of 20 registered nurses (RNs). One aunt, the first registered nurse (RN) of this Acadian family, in the Cajun French area of south Louisiana, influenced scores of nieces, nephews, great-nieces, and great-nephews to choose careers in health care. Natural aptitude leads some to vocational decisions, but family interactions can also play a significant role in vocation selection.<sup>1</sup> Throughout history, families have had the biggest impact on career choices across the globe.<sup>2</sup> Job experiences find their way into conversations at the dining table. The younger generation hears the language of a profession, learns of career implications related to lifestyle, and can seek career advice. Later, one may get assistance with personal connections to help advance in their chosen profession. The media frequently cover families' career influences, such as children following parents into politics, acting, music, coaching, military service, and more.

## FAMILIAL CONNECTEDNESS

Health care careers follow familial patterns. Connectedness, relationships, and conversations are all factors, as daughters follow their mothers' career paths 1.8 times more often than the general population.<sup>3</sup> However, women whose mothers are nurses, are 3.75 times more likely to pursue the profession than women choosing nursing overall.<sup>2</sup> Lawyers and plumbers follow parents into careers at 36 times the rate of the general population. In health care, physicians' children are 50 times more likely to be medical doctors (MDs), than others whose parents are not MDs.<sup>2</sup> Outside of health care, if one is a legislator, it is 354 times more likely than the general population, that one's father also served in the legislature.<sup>4</sup>

Genealogy charts provide valuable visuals of our ancestry. In this 1 Acadian family of 7 children, 4 opted for health care professions and 3 became RNs. As we anticipate the future shortage of nurses, a family's career genealogy, the roots and branches of one's family vocations, could provide valuable information. And having a matriarch, or patriarch, who champion nursing, impacts future generations.

When Stella Soileau Schmitt (*Figure 1*) graduated from St. Joseph's Nursing School in Houston in 1951,

### KEY POINTS

- **Nurses make an impression on younger family members. We impact career choices by being present with the next generation.**
- **Connect with other nurses, family, and otherwise; we are more resilient when we share and reflect on our stories.**
- **Celebrate nursing accomplishments, and stretch your circle of influence.**

she would not have dreamed she would be the main trunk of a family tree of 20 nurses and 30 health professionals. Stella was St. Joseph's Most Popular Senior Student in 1951. She was vice president of the school's dramatic club, secretary of the school choir, and again, the first RN in this Cajun family. Stella's jovial personality, and her reputation as a prankster, endeared her to nearly 80 nieces, nephews, great-nieces, and great-nephews. Activity gravitated to Aunt Stella every year at the family's annual weekend gathering at Louisiana state park cabins, now in its 46th year. Connectedness to family was essential to Stella, and her Cajun *joie de vivre* was tangible to all she knew.

### NURSING CHAMPIONS

Stella and her physician husband, Dr. John Schmitt, were more than just family favorites; they were role models for their 11 nieces and nephews. Seven selected careers in health care, and 6 either chose nursing or married nurses. Seventy-eight percent of those families' sons, daughters, and their spouses are in health care professions; 33% are nurses. New Orleans-based Charity Hospital School of Nursing (CHSN), and the Daughters of Charity nuns, provided education to 4 of the family at the same time, from the early to late 1970s. Two sisters from Stella's Cajun hometown of Ville Platte attended CHSN, as did a soon-to-be sister-in-law and brother-in-law. From these 4 RN parents, 4 children are now nurses. One is a family nurse practitioner for a nationwide home health company, another is a certified registered nurse anesthetist (CRNA), and 2 others work in labor and delivery and a neonatal intensive care unit.

Stella's older sister had 4 girls and 4 boys, and 3 of those 4 sisters are RNs. A significant life event is one of many factors in career choices and alteration of behavior.<sup>1</sup> The eldest of the 3 RN sisters watched her father holding her dying 14-year-old brother in his arms, rocking him gently back and forth. She was 20 years old when her baby brother was accidentally shot, 2 days before Christmas, in front of their home. At that moment, she sensed that she had to be a caregiver, stating that life was too short to do anything other than care for one another.

### SIGNIFICANT LIFE EXPERIENCES

A child may be drawn to a health care profession after experiencing the death of a grandparent, sibling, or parent. Across the world, children assist as family caregivers with insulin injections, oxygen administration, and general assistance with a parent, grandparent, or a sibling who needs care at home. Those with cancer, dementia, heart disease, renal failure, and other illnesses live in their homes, not institutions. A sister of the nurse above expressed the satisfaction of caring for younger siblings and helping her mother with the family of 10's household chores. Besides the tragic death of their 14-year-old brother, both of these siblings' parents



**Figure 1.** A family nurse champion, Stella Soileau Schmitt.

succumbed to cancer, other family members dealt with dementia, and 1 sister had a child with Down syndrome. Whatever the motivation, family relationships have significant influences on career choices.<sup>2</sup>

Rurality and local culture are also primary drivers in one's choice of vocation.<sup>1</sup> In the 1960s and 1970s, in this family's small home town, professional women almost all worked in education or nursing. Stella and her nieces found nursing an acceptable and attractive option. Another factor in a career choice is past family educational levels. The paternal grandfather of the 8 children was the superintendent of schools for the parish (county), and the first 4-year graduate of the local university in 1913. The children were encouraged to pursue higher education at a time when that was not the path for many in rural south Louisiana.

### SHARED STORIES

Oral history—stories—informed and sustained tribal people for millennia.<sup>5</sup> Hunters, gatherers, and early agricultural peoples depending on stories for teaching, learning, and communicating about danger, water, food, shelter, rituals, and celebrations.<sup>5</sup> And as humans evolved, reflecting on the meaning of these situations were part of oral tradition.



**Figure 2.** Celebration of RNs. Bottom L to R: Sandra Fontenot Launey, Chet Launey, Cynthia Launey Rosenberry, Yvette Launey Leblanc. Top L to R: Mia Hebert Rabalais, Brynne Hebert Leleux, Elaine Schexnayder Launey, Laura Launey Lahaye, Claudia Launey Ortego, Jessica Ortego Thomas, Warren Hebert (author).

Nursing stories and communications have been studied by many. One interesting approach is Marie Manthey's Nursing Salon.<sup>6</sup> A Living Legend of the American Academy of Nursing, Marie recognized the critical combination of competence and compassion. Nursing salons offer opportunities to intentionally reflect upon, and together embrace, the intersection of clinical competence and humanity. Connecting and reflecting impact nurses' resilience by nurturing and developing whole, healthy nurses.

Although this RN family (*Figure 2*) isn't quite a nursing salon, the RN children have said having family in nursing made their decision to be nurses a natural choice. They also add that they made career decisions based on the benefits of the profession. One stated that nursing offered limitless opportunities in a caring job, one that has meaning. A second RN child spoke of the career stability nursing provides. A third indicated she based her decision on her desire to be a working wife and mother. She noted that her RN father's home health career offered a fully engaged family life. Another RN's child selected nursing en route to becoming a CRNA. He indicated a CRNA role model in his community seemed well compensated with a predictable schedule. His having an aunt and a first cousin who were CRNAs provided sources for more information about nurse anesthesia. When this CRNA's father had a severe myocardial infarction while at a rural camp, the air evacuation medical team could not find a vein. The CRNA son intervened, providing critical life-saving intravenous (IV) drugs that impacted his father's positive outcome.

A family with 20 story-telling RNs of Acadian descent offers many exciting tales. As a third-generation nurse said, when I tell a work story I don't have to explain. And if we nurses want the non-nurses to leave the table, we bring up a Health Insurance Portability and Accountability-compliant story of an unpleasant detail or 2 about work! One CRNA tells a tale of working in interventional cardiology. The relatively simple removal of a patient's pacemaker one day resulted in the unexpected extraction of a piece of the myocardium. Her quick intubation, inserting extra IVs, and pushing fluids helped get the patient to the operating room for a successful repair of the damage. Two days later, she watched that gentleman walk out of the hospital.

The same CRNA noted one day that there were no patients on her case schedule. She immediately went to the chief anesthetist, wondering if she had done something wrong. When he asked her to come in and close the door, she was worried. With a smile and laugh, he indicated that on the contrary, she did many things exceptionally well. The reason there were no patients on her schedule was that the president of the United States was in the city. Her hospital was selected by the White House Medical Unit to serve the president if he required medical treatment. The hospital's operating room leadership team had designated her as the CRNA if the president of the United States were to require anesthesia.

An RN mother with years of intensive care unit (ICU) experience has an RN daughter whose first job was in an emergency department (ED). One day a

patient in the ED waiting room collapsed with an ST-segment elevation myocardial infarction (MI). While the patient was undergoing a code procedure, his wife stood calmly in the corner of the room, observing the disturbing process. The young RN briefly walked to the wife, expressing concern for her. The wife assured the young RN she was aware of the severity of the situation and would be okay. The code was successful, and within an hour the patient had undergone a successful cardiac catheterization. The young nurse indicated she sought out the wife in the patient's room 2 days later to offer the wife an opportunity to discuss the code experience. The wife told her that her first husband had died of an MI, and she recognized the symptoms and knew to get him to the ED.

After a few years in the ED, she moved to obstetrics, where one day, a young mother in labor was short of breath, confused, and incontinent. An attending physician refused her request for a respiratory consult, so she waited an hour for his shift to end, and met the patient's obstetrician as he walked in the door, leading him immediately to the patient's room. He recognized she was in congestive heart failure, found her oxygen saturation in the 70s, quickly got her to ICU, had her intubated, and the patient stabilized within a few hours. She was discharged a few days later, after giving birth to a healthy baby girl.

She also shared the story of a 45-year-old who presented in active labor, 22 weeks into her pregnancy. This young RN was thankful that the attending was an obstetrician who had a solid history of helping mothers to extend complicated pregnancies, rather than ending them. Their action resulted in the delivery happening at 25 weeks. She speaks of the joy it brings her when that mother brings the now 18-month-old little girl to visit and thank the staff.

Another nurse, now retired, recalls a 70-year-old farmer riding his horse; when it reared up, the man's bottom landed on the pommel of the saddle, fracturing his pelvis. His injuries were severe, and he was in the ICU. As his nurse, only in her early 20s, she would kindly explain the importance of observation each time she had to observe his pelvic surgical wound. He would, in turn, apologize to her, and each time, he would say, that's a bad place to get hurt. Her face lit up when she spoke of the 70-year-old farmer returning to ICU, fit and active, a few months later to thank her for her compassionate care. He again apologized that she had to examine him *down there* and repeated, that's a bad place to get hurt. The same nurse recalled as a student in the early 1970s accepting a brownie from a patient who wanted to thank her for being so kind. The patient didn't tell her that there was marijuana in the brownie.

This oldest sister selected a path that has blended nursing with art, youth ministry, working as a float nurse in an acute care setting, and working in a

Catholic clinic for the poor. One clinic colleague referred to her as the Good Shepherd's sheepdog. She celebrates the roles of all health care partners, pointing out to the housekeeping personnel that their mops were like artists' brushes, making the facility beautiful for patients.

Em was very excited about her BSN commencement in 2015. She had no idea that she would be the 20th RN in her family, with a new RN sister-in-law soon to be the 21st. Em's mother had been a neonatal intensive care nurse. Em is due to complete a nurse practitioner program in 2020. She will join 6 other advanced practice RN relatives, 1 a family nurse practitioner, 3 CRNAs, and 2 in leadership settings with a doctor of nursing practice (DNP) degrees.

This author's most memorable health care experience, over 30 years ago, was with 18-month-old M.T., who at the time was the youngest bone marrow transplant recipient in history. Memorial Sloan Kettering in New York City referred M.T. for follow up with Memphis-based St. Jude's Children's Research Hospital. M.T.'s father's bone marrow donation had been successful, and M.T. was seen to provide care to her Mediport and to administer IV antibiotics when needed. Her Pancretec ambulatory pump had about 48 inches of tubing, and M.T. knew precisely how far she could crawl or walk before she needed to get the pump, strap it over her shoulder, and move to another place. This nurse cringes, even 30 plus years later, but neither the line nor the needle ever dislodged.

About 17 years later, the author received a call from M.T.'s family, inviting him to a high school commencement party. M.T. had completed secondary education, and as a teenager rode horses and had been a rider barrel racer, following in her bull-rider father's footsteps. The family celebrated M.T.'s life, cherishing their daughter's infancy, toddlerhood, primary and elementary school ages, and her teenage years. Three years later, M.T.'s mother called, asking friends to join in remembering M.T.'s life, which ended with cancer at age 21.

This author entered a radiologic technology program at age 17, 1 year after leaving a Catholic seminary. At age 19, already an X-ray technologist, friends in nursing school suggested nursing as my next career option. It was clear that nursing would offer closer patient contact. The Charity Hospital School of Nursing's diploma program was a beautiful crucible of a place to learn. Nurses engage patients and families at their most vulnerable, fragile, and sometimes most humiliating moments of their lives.

## NURSES OF THE FUTURE

Nurses are best as healers when providing compassionate, connected care.<sup>7</sup> As a profession, to perform at

our best, we must be better educated; collaborate more effectively between professions; be proficient at data collection and robustly use information infrastructure to base decisions on data and evidence; and practice to the full extent of one's education and training.<sup>8</sup>

In his inaugural address, President Abraham Lincoln wrote of accessing the “better angels of our nature.” Nurses, the nation's most trusted profession for most of the past 20 years, have accessed those better angels. Having been so recognized, society has provided nurses with the gravitas to elevate and transform health and health care. However, only 15% of those who trust us feel that we have the ability to make a difference in health policy. The 3.3 million professional nurses must do more to address patient safety, a system that drives patients' families into bankruptcy, and many other inequities, injustices, and moral issues across health and health care today. Donna Shalala, former Health & Human Services secretary, past president of the University of Miami, and current U.S. congresswoman, said nurses are in the best position of any profession to transform health care.

## SUMMARY

Being with, connectedness, support, caring, trusting, hearing, and reflecting on one another's stories, are all significant ingredients in 1 nurse matriarch's influence on 20 family members who followed in Aunt Stella's footsteps. Those same elements will play a critical role as nursing continues to evolve from 2020 to 2030. The African proverb is true; if one wants to go fast, go alone. If one wants to go far, go with others.

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