Chapter 3 A Blueprint for Online Licensed Practical Nurse Training

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ABSTRACT

Estimated at 25 percent of Americans, the number of low-income single mothers is on the rise (Loprest & Austin, 2011). Described as the disconnected, these women are needy in many areas. Most have less education, and sometimes, more learning disabilities. Some have problems of substance abuse, depression, mental illnesses, and other physical health problems (Wincup, 2014; Jayakody & Stauffer, 2000; Tolman, Himle, Bybee, Abelson, Hoffman, & Van Etten-Lee, 2015). These characteristics have called for action on the plight of these women as their numbers become a strain on welfare systems leading to reduced benefits for some, with others being denied altogether (Silver, Heneghan, Bauman & Stein, 2006). The chapter presents a blueprint to train these mothers into Licensed Practical Nurses to reduce dependence on public finances and to enhance their self-images (Atkins, 2010). The blueprint explores how these women learn, and the services they need to complete the program.

INTRODUCTION

Statistically, single mothers on welfare are often referred to as the "disconnected". This description implies a growing number of all low-income single mothers in the United States (U.S.). Loprest and Austin (2011) estimate the number of "disconnected families at between 20 to 25 percent of the U.S. population. According to Blank and Kovak (2008), Loprest and Austin (2011), and Seefeldt and Horowski (2012) women who fall under the "disconnected" category are likely to be needy in a number of areas. In comparing women from this social group to others outside of it, Blank and Kovak (2008) and Loprest and Austin (2011) note that, among the numerous disadvantages facing these women, most of them tend to have less education, and occasionally, more learning disabilities. Some of them may also have higher levels of past or current problems with substance abuse. Some have even been diagnosed with higher levels of depression, other forms of mental illnesses, and significant physical health problems. In addition to the likelihood of these women having and probably taking care of younger children, they

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may be taking care of other members of their extended families as well. Some of these older family members are likely to have health issues. Explaining these characteristics further, Blank and Kovak (2008), Loprest and Austin (2011), Seefeldt and Horowski (2012) note that, some of these women may likely have histories of domestic violence as well.

Drawing from the above, there arises an urgent need to do something about the plight of these women. One approach is to train them for a viable job market. The need for skills training is imperative because most of the women in this category most likely live in central cities most of which have unusually heavy welfare caseloads leading to such women only being able to stay on welfare assistance for specified periods of times (Blank & Kovak, 2008).

In respect of the problem stated above this chapter looks to lay out a blueprint that can be used as a guide to facilitate the training of single mothers into Licensed Practical Nurses (LPN) based on a one year online program. The blueprint is conceived against the backdrop of findings that most of the target mothers have limited education which limits their life opportunities (Blank & Kovak, 2008; Seefeldt & Horowski, 2012). Based on the above, this blueprint is laid out as means to empower these mothers to contribute their quota to national development, while being empowered financially. The program suggested by the blueprint would be online and can be hosted on any Open-source Course Management System (CMS). The suggestion of an open-source CMS option minimizes running costs while offering the requisite platform and electronic tools necessary for delivering an LPN program online. The need for cost effectiveness in the choice of a CMS is important in order to put the cost of training within the means of the target women and their sponsors.

LITERATURE REVIEW

Research on single mothers from the Center on Children and Families (Misraa, Moller, Strader, & Wemlinger, 2012; Vespa, Lewis, & Kreider, 2013) shows that, a significant number of low-income single mothers fall below the poverty line. This exposes them to serious economic challenges that threaten their self-preservation and that of their families. Among other characteristics, these low-income single mothers have been found to face employment challenges at various levels of their lives as a result of them lacking higher education. Most probably, many of these mothers are likely to be taking care of one or more younger children in addition to one or more elderly family members (Connelly & Kimmel, 2003). As a result, most single mothers are likely to have higher rates of mental and physical health problems (Atkins, 2010). Furthermore, these women are likely to be suffering from substance abuse coupled with histories of domestic violence (Jayakody & Stauffer, 2000). Most women in this category likely live in central cities, where there is excess pressure on welfare services (Silver, Heneghan, Bauman, & Stein, 2006). In response to these pressures, the Personal Responsibility and Work Opportunity Reconciliation Act was passed in 1996 to constrain States from keeping families on welfare programs funded by federal welfare funds beyond 60 months. To make the situation even more desperate, about a quarter of States in the U.S. have even reduced this 60-month maximum welfare support to shorter term limits due to scarcity of resources. This adjustment has resulted in more disadvantaged single mothers being sanctioned in one way or another for overstaying on welfare programs; while others are being forced off these programs altogether when they exhaust their term limits (Blank & Kovak, 2008).

The Colorado Center on Law & Policy (2015) notes that, single mothers are among the fastest growing poverty class in the U. S. The center puts the poverty rate for single mother households at twice that of

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