A RESOLUTION FOR 2010: RING IN THE TRUE

By Cindy L. Munro, RN, PhD, ANP

Every year brings a fresh perspective, a sense of opportunity, and a yearning for improvement. Alfred, Lord Tennyson captured this spirit of renewal in poetry:

Ring out the old, ring in the new,
Ring, happy bells, across the snow:
The year is going, let him go;
Ring out the false, ring in the true.¹

A January calendar heralds new opportunities for discovering or creating what is true. The clean, blank spaces help inspire New Year’s resolutions, a common expression of our perennial desire for improvement. Resolutions are intentions to act on goals—an echo of AACN President Beth Hammer’s year-long theme, “Act With Intention.” The tradition of establishing goals at the beginning of a calendar cycle is ancient, dating at least to the Babylonians. Each year, about half of all American adults make New Year’s resolutions. Year after year, the 3 most common resolutions for adults are to lose weight, exercise more, and stop smoking. For college students, the top goal is to do better in school. All of these are admirable aspirations.

Resolutions Help Bring Change

We generally begin the new year with great enthusiasm, but frequently struggle to maintain commitment to our goals for a period long enough to see results. This is evident in health club attendance; although there are plenty of energetic exercisers in January, the gyms are considerably less crowded by March. Mark Twain,² commenting on the rituals of New Year’s, wryly observed, “Yesterday, everybody smoked his last cigar, took his last drink and swore his last oath. Today, we are a pious and exemplary community. Thirty days from now, we shall have cast our reformation to the winds. . . . We shall also reflect pleasantly upon how we did the same old thing last year about this time.”

So why persist in making New Year’s resolutions? One reason is that attaining one’s goals provides substantial emotional well-being.³ Not all who make New Year’s resolutions are able to keep them, but one research study found that those who set goals at the New Year were 10 times more likely to achieve desired changes than those who were aware
of a need for change but did not make a resolution. Although the failure rate may be high, resolutions still provide a powerful mechanism for change.

Make “SMART” Resolutions

How does one improve the likelihood of making New Year’s resolutions that stick? Several strategies have been suggested for setting personal goals that are both attainable and associated with long-term successful behavior changes.

First, experts suggest reducing the number of goals to no more than 3. Selecting fewer goals permits increased focus on those goals. Second, having goals that are specific increases the potential for success. When goals are vague, it is difficult to know how to proceed. Vague goals are really wishes, whereas specific goals can be translated into plans for action. Third, resolutions that are realistic in scope are more likely to succeed.

A popular acronym captures many characteristics that make resolutions stick: “SMART” goals are specific, measurable, achievable, realistic, and time-bound. Another important factor is underlying motivation. Resolutions that reflect personal values are achieved more often than those that are adopted based on expectations of others. Even when a resolution is SMARTly written, it can fail if the individual does not intrinsically value the end result. Engaging other people to support efforts to change can be a powerful mechanism for persevering.

If we wish to begin with values as a base for professional resolutions for the new year, a good starting point is the vision statement of the American Association of Critical-Care Nurses, “to create a health care system driven by the needs of patients and families where acute and critical care nurses make their optimal contribution.”

How can you optimize your contribution to a patient-focused health care system in the coming year? Consider making and keeping New Year’s resolutions that might bring you closer to personal and professional fulfillment. Start by reflecting on your current situation and selecting an area for improvement to focus on this year. Do you want to improve your knowledge in a particular area, or develop specific clinical skills? Consider attending a professional conference that will enable you to expand your knowledge and skills.

If you have never attended the AACN National Teaching Institute (NTI), perhaps your resolution will be to join your colleagues at NTI as a first-timer. If you are a regular NTI attendee, you might resolve to maximize your time at NTI by choosing sessions that build expertise in a particular niche. You may resolve to seek advanced training or education, or to strive for advanced certification. Do you already have special expertise? Your resolution might be to share it with others through writing for publication or mentoring your coworkers. Are you passionate about promoting a healthy work environment? Resolve to practice crucial conversations in every encounter.

Give your resolutions every opportunity for success. Pare the possibilities to the most important 2 or 3. Be specific and realistic. Test your resolutions for SMARTness as you finalize them. Be certain your resolutions resonate with your values. Ring out the false, ring in the true!

In this new year, health care providers have a wonderful opportunity to focus on professional goals that will contribute to a patient- and family-centered health care system. Happy New Year! And best wishes for a productive and meaningful 2010.

Endnote: Changes for AJCC

Change and opportunity have become key- words for the American Journal of Critical Care. This new year begins with a change in our editorial leadership as Peter Morris leaves the journal’s physician coeditor position to focus on his clinical practice and research. Dr Morris will continue to make valuable contributions to AJCC as an active member of the journal’s editorial board. AACN has been fortunate to have such an expert and caring critical care physician guide its editorial content during the past 3 years. As the journal seeks a new coeditor, we look forward to the opportunities that our distinctive collaboration of a nurse and a physician coeditor provides. We wish Dr Morris the best as he pursues the many opportunities that his unique insights and clinical expertise will bring.

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The statements and opinions contained in this editorial are solely those of the coeditors.

FINANCIAL DISCLOSURES
None reported.

REFERENCES
2. Twain M. Virginia City Territorial Enterprise. January 1, 1863.
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