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Practical Considerations in Establishing Sustainable International Nursing Experiences

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PRACTICAL CONSIDERATIONS *in* Establishing Sustainable International Nursing Experiences

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MARY WILLIAMS, ERIN D. MAUGHAN, JAMES KOHL, AND SHERI PALMER

I NCREASINGLY, NURSES ARE RESPONDING AT THE PROFESSIONAL AND EDUCATIONAL LEVELS TO THE CALL FOR HEALTH CARE PROVIDERS TO THINK GLOBALLY. As the largest group of

health care providers, nurses must understand the cultural, political, economic, and environmental influences on health and health care across the globe. Amidst technological advances, global communication, the threat of terrorist activities, and the spread of communicable disease, nursing education is challenged to prepare nurses to meet these expanded responsibilities (Carlton, Ryan, Ali, & Kelsey, 2007). • International experiences provide outcomes for nursing students that cannot be accomplished in any other way. Students have opportunities to learn of other cultures, adjust to unique environments, and ultimately develop cultural awareness and sensitivity (Lipson & Desantis, 2007; Ruddock & Turner, 2007). Such experiences influence their understanding of world health issues and facilitate growth in the areas of personal values, beliefs, and decision-making (Bosworth et al., 2006; McAuliffe & Cohen, 2005; Sloan, Bower, & Groves, 2008). • A growing number of nursing schools and colleges are providing international experiences to enhance students' understanding of global health, culture, and diversity. However, even in schools that are committed to global involvement, there are significant challenges in building a sustainable international program. Some of the challenges include integrating a global health course into an already crowded curriculum; funding international travel; accounting for extensive preparation time in faculty workload; and lack of sufficient numbers of qualified faculty. • Over a period of 16 years, the authors' program at Brigham Young University has involved more than 628 baccalaureate students and grown from one international site annually to three or four. International sites have included Argentina, Australia, Ecuador, Ghana, Guatemala, Jordan, Tonga, Taiwan, and the United Kingdom. Students who have been unable to travel internationally have been sent to various locations in the United States, including the Navajo Nation, the Ibabah Indian Reservation, Hawaii (for Polynesian culture), and certain settings to work with at-risk populations, including state prisons, local jails, and rural hospitals. Sites in Israel are currently being explored.

ABSTRACT An understanding of global health and the development of cultural competence are important outcomes of today's baccalaureate nursing programs. Thoughtfully designed international experiences can provide excellent opportunities to achieve those outcomes. Based on 16 years of providing international experiences within a baccalaureate curriculum, components are identified that contribute to the development of a sustainable international program. Areas addressed in the article are evaluating the fit with university and college mission, establishing the program within the university operational structure, selecting faculty and students, developing sites, designing a course, and program evaluation.

THIS ARTICLE focuses on essential factors in establishing sustainable international experiences as an integral part of the curriculum. It is based not only on available literature, but also on the authors' years of experience. Factors to be considered in developing a sustainable program include finding a fit within the mission of the university; the college and the university operational structure; selecting faculty and students; developing the site; designing the course; and evaluating the program.

Finding a Fit Within the Mission A review of the literature on international nursing programs uncovered few articles that are research based and few that provide clear direction for curricular design. Based on the authors' experiences, the first step in planning is to determine congruence between the proposed international program and the mission, vision, and values of the parent institution. It may be difficult to gain support for international activities in state-supported colleges and universities, whose missions are to meet the needs of the citizens of the state. In private institutions, a limited scope and/or budget may hinder international involvement.

If the philosophy and mission of the college/school of nursing (CON) support international activities, it is important to articulate the specific ways in which the international experience will enhance the school's mission, vision, and values, as well as desired learning outcomes. Without congruence at these levels, international experiences will likely be dependent on the interest, time, and resources of individual faculty and become an optional enrichment activity, rather than an integral part of the curriculum.

Selecting an Appropriate Model When both the parent institution and the CON are supportive of international work, the logistics of fitting a study abroad program into the operations and administrative structure can begin. Experience has shown that international studies are usually structured in one of three ways: a) A college/department manages its own study abroad program using university guidelines (college/department model). b) A university study abroad office manages all international experiences with input from departments (university model). c) The university study abroad office is responsible for the oversight of all study abroad programs, but provides expertise and support as departments develop and implement specific programs (combined model).

Each model has advantages and disadvantages. The main advantage of a college/department model is that the CON has control of curricula, faculty selection, and student expenses. Such structure allows integration of the international program into the CON curriculum as part of the requirements for graduation. On the other hand, energy and resources of individual faculty and the entire CON may be heavily taxed, even when individual faculty have prior international experience. Additional challenges include issues of liability and security; financial support for faculty and students; contractual agreements with foreign institutions, if feasible; and travel and housing arrangements.

With the university model, issues revolve around management and finances. Typically, study abroad staff have limited experience with nursing specifics such as curricula, clinical licensure, and liability. Potential financial concerns include: who pays the study abroad office overhead; who pays faculty salaries; will faculty be paid at the same rate as for other courses; do study abroad participants qualify for university scholarships, and are scholarships and/or grants available through study abroad; and, finally, will program costs be affordable to the average nursing student?

Working within the combination model involves resolution of the same issues as the university study abroad model, but the process is more likely to be one of negotiation. Potentially, the CON will work with the study abroad office in establishing nursing-specific courses while gaining expert advice related to international and transcultural study. If the study abroad office is not subsidized by the general funds of the university, there may be a cost associated with the assistance. There are usually general policies as to who pays and how much is charged by whom and to whom. Recovering the overhead costs of the study abroad office from students' tuition monies or program fees is common. If no policies exist, the CON may be able to negotiate a fee dependent on the degree of assistance received.

Selecting and Developing Faculty Once congruence between the international experience, the mission of the CON and university, and the fit within the operational structure is established, the critical issue becomes obtaining faculty support. No program can be sustained without such support. Because international work involves a year-round commitment, heavy workloads, and periods of time away from home, establishing a cadre of faculty who share responsibilities for a site

increases the sustainability of the program. Ideally, faculty self-select based on such factors as previous international experience, interest in a country, culture, or type of nursing emphasized (e.g., maternal-child health, care of the aged), language expertise, and/or professional contacts.

Each faculty member with interest in international involvement should engage in a process of self-assessment (Cortis, 2003). Faculty who are unable to adapt to a site may interfere with student learning and distract from the experience of all involved. When anticipating an experience with a culture, language, and living conditions markedly different from one's own, faculty should ask themselves a series of questions (Lange & Ailinger, 2001): a) Do I need my life to be orderly and predictable in order to be comfortable and function well? b) Do I need a clean, hygienic environment in order to feel safe and to attend to the needs of others? c) Do I have any health problems that could be aggravated or put me in serious danger by working in this country? d) Will the circumstances of my personal life impede my involvement in this program or, conversely, will the program impede my personal life? e) Am I comfortable enough in my teaching that I can be flexible in achieving the course outcomes when facing the unexpected?

While international experiences may provide opportunities for scholarly endeavors, time away from campus and associated support services can impede progress toward academic goals. If a faculty member is seeking tenure or working toward advancement in rank, serious consideration should be given to the timing of international involvement.

A faculty member's ability to tolerate constant student interaction over a period of weeks is another consideration. Time commitments while on site are demanding, often 24 hours a day. As a result, student/faculty interactions may evolve to a more personal level, creating an environment that is rewarding for some, but stressful for others.

It is important to note that faculty who develop a research agenda in collaboration with nurses from the host site become a core support of the international experience. Such collaboration allows faculty and students to be involved in international work while simultaneously pursuing research. Opportunities are also provided for nurses in the host country to be involved in research they consider important to their patients (Coverston, Davis, & Franklin, 2004; Coverston, Harmon, Keller, & Malner, 2004; Hardy & Palmer, 2006; Kemp & Palmer, 2006).

Appointing faculty to serve on a council to oversee international activities within the CON is crucial. This group can provide direction for the overall program, provide support for faculty, and serve as a liaison between the CON and various community entities. Aside from evaluating proposed and ongoing program sites and developing the global health course, the council at the authors' CON has developed guidelines for the program, short-term and long-term goals, and in-service programs for faculty. A faculty member who serves as council coordinator chairs meetings and acts as liaison to the study abroad office and other campus entities.

Developing the Site There are myriads of ways to develop an international program site. Programs are more sustainable when based on relationships that meet mutual needs of the host site and the CON and involve shared understanding, clear expectations, commitment, and trust (Immonen, Anderssen, & Lvova, 2008). Some schools of nursing have developed partnerships with schools of nursing in other countries (Zheng, Hinshaw, Yu, Guo, & Oakley, 2001).

Collaboration may be invited by a host country or discovered by interested faculty. When the host-initiated proposal is a good fit for the CON, both parties become stakeholders and mutually benefit from the collaboration. Thus, both parties are willing to work toward the success of the partnership.

The authors have found that faculty-initiated sites are often more difficult to start and maintain than invited opportunities. In most instances, clinical agencies in developing countries have been the most open to establishing mutually beneficial partnerships. Clinical facilities in more developed countries may experience student overload similar to that found in North America, creating difficulty in providing students with hands-on experiences. In addition, establishing partnerships with other CONs can be particularly cumbersome due to issues of tuition, student status, and long approval processes.

Parents and universities are unlikely to support students' participation in an international experience where safety is questionable. For Brigham Young University, safety is the principle that guides the ultimate decision in selecting international sites. The political, economic, geographic, and health situation of the country needs to be stable. State department websites are valuable in assessing potential risks and complications of travel study (www.state.gov).

Even in relatively safe areas of the world, there are inherent dangers, especially for students and faculty not familiar with the local culture. It is advisable for students to travel in groups of three or more and be housed with other students; there is safety in numbers. When possible, it is wise to avoid election years, high tourist seasons, or national holidays where turmoil is likely. Safety issues usually heighten at night, so the least expensive place to stay may not be the safest. It is helpful for faculty to visit the host country during the planning process to secure and ensure safe housing.

The health and well-being of participants are a priority. Thus, it may be necessary to sacrifice some degree of cultural immersion in favor of secure and sanitary living conditions. Students and faculty are advised to receive recommended vaccinations for travel. Certain countries continue to have specific health concerns, such as lack of potable drinking water, unsafe food supplies, poor sanitation, communicable diseases, or endemic outbreaks. Liability waivers, exempting the university from responsibility, should be signed by faculty, students, and others traveling with the group. Based on the authors' experience, four to six weeks in-country provide the nursing student time to overcome culture shock, synthesize cultural insights, and feel good about the immersion experience.

To generate positive experiences for the CON and the host country, it is extremely important to establish contacts and good relationships with governmental and health care entities. Most study abroad programs begin with one in-country contact. When that contact is able to provide government, health care, and logistical links, that is most fortunate.

Interaction with health care leaders is crucial in order to explore possibilities for student learning needs and meaningful ways to reciprocate. Contact with government officials and the recognized organization for nurses in the country is also vital. Even if local health care contacts say they will take care of everything, personally meeting with governmental and organizational leaders can forestall difficulties and is highly recommended.

Months prior to the anticipated travel dates, the challenging, detail-oriented, and time-consuming task of logistics must begin (Immonen et al., 2008). The likelihood of establishing a sustainable program is dependent to some extent on the CON's ability to replicate a previous experience through extensive record keeping of contacts and vendors. These records include information regarding food, housing, visas, immunization

requirements, luggage weight and airport security, and travel to airports, hotels, clinical sites, and cultural experiences.

Student Selection Study abroad is not for everyone. Participating students serve as ambassadors of nursing, representing the sponsoring CON, their university, and their country. Students' actions have personal as well as program implications that ultimately impact the sustainability of the program. Thus, students should emulate characteristics promoting collaboration and mutual respect.

It is important to select students according to several criteria, namely, adequate nursing knowledge and skills, interpersonal skills, cultural sensitivity, maturity, and flexibility. These attributes allow students to adapt to challenging situations and mature professionally and personally. Language skills are important in sustaining programs with significant clinical components. If possible, students who speak the language fluently should comprise at least 50 percent of the group.

One way of assessing whether students possess the characteristics needed is through interviews. Questions to include in an interview may be similar to those asked of program faculty and should also ascertain the student's motivation for a global health and diversity experience. Input from faculty who know students from prior courses may help predict if students will meet expectations regarding safety, appropriate interpersonal boundaries, and other attributes.

Designing the Course Embedding international experiences within a required course in the program curriculum has contributed greatly to the sustainability of international programs in the authors' CON. International experiences are now embedded as clinical options in a four-credit required course entitled "Global Health and Human Diversity." The course focuses on issues of global health and cultural competence regardless of clinical placement, ensuring that all students meet the same course outcomes.

Clinical components may be facilitated in local communities and outcomes met in a variety of settings. While this alternative accommodates students who do not choose an international experience and allows for wise use of faculty resources, international experiences enhance course content and are particularly conducive to meeting course outcomes. It is recommended that international experiences extend over a period of no less than

four weeks. Shorter programs limit immersion in the culture and interfere with the learning of cultural competence.

Evaluation An evaluation plan should be established at the beginning of the international experience. Components that need ongoing evaluation include fit and structure in the university and CON, student learning, clinical sites, health and safety risks, and faculty resources. The authors are analyzing data to examine the short- and long-term impact of international experiences on students' cognitive and professional development (Callister & Cox, 2006).

The impact on faculty in terms of workload and advancement must also be evaluated. Evaluation data, along with research and publications, have been helpful in obtaining support from donors, as well as the college and university administrations.

Conclusion When international experiences are viewed as an enrichment experiences and/or do not fill the outcomes for a specific course, students and faculty must commit to added expenditures of time and money. Without financial support, few faculties have resources to develop experiences over the length

of time needed for students to be immersed in a culture. Likewise, few students have resources to commit to such an experience if it does not contribute to completion of their degree. Developing a sustainable program embedded in the curriculum eliminates some of the burdens of enrichment-only programs. Finding a fit within the institution and building on the strengths of faculty, CON, and university provide sound foundations for such programs.

About the Authors *Rae Jeanne Memmott, who recently retired, was international coordinator at the College of Nursing, Brigham Young University, Provo, Utah, where the other authors are on the faculty. Catherine R. Coverston, PhD, RNC, and Sheri Palmer, MSN, RN, are associate professors. Barbara A. Heise, PhD, APRN, BC, and James Kohl, MSN, RN, are assistant professors. Mary Williams, PhD, RN, is associate dean of graduate studies and faculty. Erin D. Maughan, PhD, RN, is the current international coordinator. Contact Dr. Heise at Barbara-Heise@byu.edu.*

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References

- Bosworth, T., Haloburdo, E., Hetrick, C., Patchett, K., Thompson, M. A., & Welch, M. L. (2006). International partnerships to promote quality care. *Journal of Continuing Education in Nursing, 37*(1), 32-38.
- Callister, L., & Cox A. (2006). Opening our hearts and minds: The meaning of international clinical nursing electives in the personal and professional lives of nurses. *Nursing and Health Sciences, 8*, 95-102.
- Carlton, K., Ryan, M., Ali, N., & Kelsey, B. (2007). Integration of global health concepts in nursing curricula: A national study. *Nursing Education Perspectives, 28*(3), 124-129.
- Cortis, J. D. (2003). Culture, values and racism: Application to nursing. *International Nursing Review, 50*, 55-64.
- Coverston, C. R., Davis, J. P., & Franklin, C. M. (2004). Seeking safe passage: Argentine women's perceptions of routine prenatal care. *Health Care for Women International, 25*, 620-635.
- Coverston, C. R., Harmon, K. Keller, E., & Malner, A. A. (2004). A comparison of Guatemalan and U.S. nurses' attitudes towards nursing. *International Nursing Review, 51*, 94-103.
- Hardy, S., & Palmer, S. (2006, April 6-8). Assessment of hand washing techniques at the Luis Vernaza General Hospital in Guayaquil, Ecuador. *Proceedings of the National Conference on Undergraduate Research (NCUR)*, University of North Carolina at Asheville.
- Immonen, I., Anderssen, N., & Lvova, M. (2008). Project work across borders in the arctic Barents region: Practical challenges for project members. *Nurse Education Today, 28*, 841-848.
- Kemp, M., & Palmer, S. (2006, April 6-8). Explanations for an increased Cesarean birth rate in Guayaquil, Ecuador. *Proceedings of the National Conference on Undergraduate Research (NCUR)*, University of North Carolina at Asheville.
- Lange, I., & Ailinger, R. L. (2001). International faculty exchange. *International Nursing Review, 48*, 109-116.
- Lipson, J., & Desantis, L. (2007). Current approaches to integrating elements of cultural competence in nursing education. *Journal of Transcultural Nursing, 18*(1), Supplement, 10S-20S.
- McAuliffe, M. S., & Cohen, M. Z. (2005). International nursing research and educational exchanges: A review of the literature. *Nursing Outlook, 53*, 23-25.
- Ruddock, H., & Turner, D. S. (2007). Developing cultural sensitivity: Nursing students' experiences of a study abroad programme. *Journal of Advanced Nursing, 59*(4), 361-369.
- Sloand, E., Bower, K., & Groves, S. (2008). Challenges and benefits of international clinical placements in public health nursing. *Nurse Educator, 33*(1), 35-38.
- Zheng, X., Hinshaw, A., Yu, M., Guo, G., & Oakley, D. (2001). Building international partnerships. *International Nursing Review, 48*(2), 117-121.

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