Advancing World Health Through Nursing Students’ Study Abroad Experiences: Shared Insights

Symposium for STTI 28th International Nursing Research Congress
Dublin, Ireland
2017
Disclosure of Content

We have nothing to disclose :)
Symposium Introduction

Preparing Nursing Students for International Learning Experiences
•Presented by Karen Lundberg & Cheryl Corbett

Six Continents: One Undergraduate Public and Global Health Nursing Course
•Presented by Leslie Miles & Scott Summers

Nuts and Bolts of Nursing Study Abroad: Logistics and Funding
•Presented by Sondra Heaston & Gaye Ray

Alumni and Student Outcomes of a Global Health Nursing Course: Does the End Justify the Means?
•Presented by Sheri Palmer & Stacie Hunsaker
BE PREPARED
FOR AN EPIC ADVENTURE
Winter Cultural Preparation Class

- Site specific groups
- Bi-weekly meetings
- Course content
  - Travel logistics
  - Medical requirements
    - Immunizations & physical
  - Consent forms
  - Syllabus review
- Kennedy Center partnership
Winter Cultural Preparation Class

• Common to all site activities
  • Readings
  • Modules (Culture competence, Religious perspectives)
• Ethnocentrism Assessment
• Cultural/teaching presentations
Winter Cultural Preparation Class

• Site specific activities
  • Guest speakers
  • Book reports
  • Interviews
  • Movies
  • Personal cultural reflections
  • Food experiences
  • Partner (NGO, agencies) presentations
Six Continents: One Undergraduate Public and Global Health Nursing Course

Symposium ID # 23184
28 July 2017
Leslie Miles, DNP, APRN-BC
Scott Summers, MS, FNP-C
The learner will be able to ....

• Describe public and global health course outcomes that can implemented into their curriculum and in a variety of settings.

• Compare and contrast learning activities and experiences from diverse (domestic and international) clinical sites.
Global Health Education

1) Global Health as core knowledge area

- “As the world gets smaller, the demand for culturally competent nurses increases.”

  - With globalization of healthcare there is a need for nurses who have an understanding of diverse backgrounds and cultures.
  - Open-mind toward international variances as we care for the whole patient.
Global Health Education

• 2) Address ethnocentric & stereotyped views
• Cultural education deficits lead to closed mindedness and potential for errors to occur or inaccurate assessments

• So how are they addressed?
  • Education modules completed before embarking on cultural experience
    – Allows students to be culturally ready or able to anticipate and react to differences
    – Modules can be tailored to student’s needs and concerns
  • Debriefing with faculty and peers periodically during the educational experience
Global Health Education

• 3) Provide culturally competent care
  – So how are they addressed?

• On Site - Application
  – Understand culture
  – Culture assessment
  – Best nursing practice to meet needs
  – Discussion and debriefing
Public & Global Health Outcomes

• 1) Knowledge about global health factors
• 2) Exhibit culturally competent skills
• 3) Culture competence as a life-long learning process
Course Outcomes

• Acquire a basic understanding and perform thoughtful reflection of culture, diversity, social, economic, globalization, and environmental factors as it affects health care.

• Exhibit inter-professional values, communication skills, and culturally sensitive health care that is respectful of people with different backgrounds, socio-economic status, beliefs, or perspectives.

• Recognize their own biases & self-limitations and increase desire to learn from others & integrate cultural competency as a life-long learning process.
Diversity of Sites

Past

Current
Diverse Experiences

- Clinics – At Risk, Ghana, Tonga
- Community teaching & screening – Ecuador, Ghana, Tonga, Vietnam
- Hospitals – Czech Republic, Ecuador, Finland, Ghana, Tonga, Taiwan, Tonga
- Jail & Prison – At Risk
- Public health & Home Care – Finland, Tonga, Vietnam, Refugee
- Student Collaboration – Finland
- Veterans - Honor flight, hospitals and clinics
Clinics

At Risk, Ghana, Tonga
Community Teaching

Ecuador, Ghana, Refugee, Tonga, Vietnam
Screening
Hospitals

Czech Republic, Ecuador, Finland, Ghana, Tonga, Taiwan
Jails

At Risk
Public Health & Home Care – Finland, Tonga, Vietnam, Refugee
Student Collaboration

Finland
Veterans

Honor Flight
One Global & Public Health Course

• Spring term – 6 weeks
• 2.5 credits (Domestic)
• 6 credits (International)
• 128 students
Course Experiences
Challenges... but now Successes

– Committee Oversight
  • Coordination
  • Contracts
  • Security briefing
  • Syllabus - core

– Course outcomes
  • Faculty agreement

– Faculty Support
  • Consensus

– Site individualization
  • Director determined
  • Adaptation

– Learning activities
  • Sharing
  • Resources
Successes

- Core Interactive Modules
  - What’s Up with Culture?
  - Ethnocentrism
  - Global Health
  - Healthcare Perceptions Among Main World Religions
  - Lifelong learning
  - Oppression of Women

- Clinical/ Cultural Skills Evaluation Tool
- Final Reflective Writing
- Individualization
  - Readings
  - Culture Activities
  - Clinical activities
  - Optional Modules
  - Journaling
  - Debriefing
Optional Modules

- Malaria
- Tuberculosis
- AIDS
- Neglected Tropical Diseases
- Good resource:
  https://www.cugh.org/resources/educational-modules
References


• Edmonds, M. L. (2012). An integrative literature review of study abroad program for nursing students. *Nursing Education Perspective, 33*(1), 30-34.


LOGISTICS and Funding --

Sondra Heaston, MS, NP-C, CEN, CNE
Gaye Ray, MS, NP-C, PH-C
• “A well planned study abroad should be a life changing experience for participants adding richness to their education and future careers”

(Shannon, Marcia R., 2013)
Student Quotes

• “I am so grateful for this incredible opportunity I was given and will implement the powerful lessons I have learned into my future nursing practice as well as throughout the rest of life.” (AM)

• “In reality, every part of my body and spirit has changed in some shape or form . . . Each dimension of my being, both professional and spiritual, has also been tested and uplifted throughout this experience. It cannot be denied that a permanent change of heart took place by the time I left Ecuador. These professional and spiritual changes have ultimately affected my outlook on patient advocacy and in creating social change” (NF)
Objectives

• Identify hurdles involved with developing a study abroad for nursing students

• Understand various ways to overcome hurdles in preparing a nursing specific study abroad experience
Hurdles

• Where to develop a site
• Student site selection
• Logistics in planning
• Budget/Funding the program
• Student funding options
Where to Develop Site

- Clinical contacts in host site
- Safety
- Potential clinical and cultural experiences
- Sustainability
- Faculty familiarity with site and “buy in”
- Student interest
- Non-profit organizations available
- Language spoken
Student Site Selection

- Open house meeting
- Students rank sites 1-11
- Randomization of students
- Most students get one of their top three sites
Logistics

• Contact clinical sites (set up contracts)
  – Hospitals/clinics
  – Universities
  – Non-profit organization
  – Community leaders
• Arrange travel (to/from country and within)
• Arrange Hotels/Hostels/Housing
• Touring options
• International Health Insurance
Budget/Funding the Program

• Budget done with our campus International Travel Center
• Students pay for their study abroad
  – Paid to the campus International Travel Center
  – 75% of the student’s tuition goes back into the program
  – Pay in 3-4 installments
• Faculty costs included in the program cost/budget
Student Funding

- Students pay for the program in 3-4 installments
- Faculty research grants
- Student scholarships
  - University
  - College of Nursing
  - Sigma Theta Tau
  - BYU Student Nurses Association
  - Phi Kappa Phi
  - Kennedy Center (campus international travel center)
  - Financial Aid

- Other?
• “A well-run study-abroad program is an arduous and stressful process, but the potential outcomes of improved international relations, international knowledge, and transforming students to become change agents in social action are worth the effort and advocacy”

(Foronda, C., & Belknap, R., 2012)
“Time spent on travel and study in another country and environment has the potential to significantly impact student learning both personally and professionally. Students return changed. They become better nurses because of their international experiences. They add richness to class discussions and positively affect the cultural competence of their peers”

(Shannon, M.R., 2013)
Outcomes of a Global Health Nursing Course: Does the end justify the means?

Sheri P. Palmer, RN, DNP, CNE, CTN-A
Stacie Hunsaker, RN, MSN, CEN, CPEN
Purpose
Provide opportunities that promote cultural and self-awareness
Study abroad is an extremely effective way
Various cultural and economic backgrounds = cultural competence.

Nursing programs burdened with additional education expectations
Study abroad may seem like an inordinate extravagance
Sustainability of study abroad courses = experiences need to be proven and justified.
Background

There are many challenges and successes in offering study abroad.
Teachers want:

- Justification
- Quality improvements
- Teaching methods
- Completion of outcomes
- Cost benefit
Why measure?

Students want:
• Money
• Time
• Effort
• End result – worth it?
Is there a difference between local and study abroad?
Methods

• One quantitative/qualitative tool measure the “Long term effect of Study Abroad in Nursing”:
  • International Education Survey (IES) (Zorn, 1996)
• Three different quantitative tools to measure student cultural competency:
  • Global Perspective Inventory (GPI) (Braskamp, Braskamp, Merrill, 2010);
  • Caffrey Healthcare Cultural Competency Instrument (CHCC) (Caffrey, 2004);
  • Inventory for Assessing the Process of Cultural Competence Among Healthcare Professionals (IAPCC) (Camphina-Bacote, 2002).
• Over 571 student pre-/post-test surveys were returned
• Each tool was analyzed as an overall group and also by specific site location.
Overall Results

• All students, no matter where they completed their clinical experience improved in their global perspective skills, knowledge and attitudes.

• Student feedback indicate post conferences and group discussions facilitate student learning.
#1 Long term effect of Study Abroad in Nursing

- **International Education Survey** (IES) (Zorn, 1996)
- Alumni surveyed
- 121 responses

<table>
<thead>
<tr>
<th>Table 1</th>
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</thead>
</table>

<table>
<thead>
<tr>
<th>Subscale</th>
<th>Study Abroad (n=75)</th>
<th>Non-Study Abroad (n=46)</th>
<th>p*</th>
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</thead>
<tbody>
<tr>
<td>Nursing Role</td>
<td>5.29 1.41</td>
<td>4.53 1.77</td>
<td>0.010</td>
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<tr>
<td>International Perspective</td>
<td>5.07 1.03</td>
<td>4.04 1.58</td>
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<tr>
<td>Personal Development</td>
<td>4.76 1.36</td>
<td>3.74 1.67</td>
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<td>Intellectual Development</td>
<td>4.29 1.39</td>
<td>3.14 1.57</td>
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<tr>
<td>Overall</td>
<td>4.91 1.12</td>
<td>3.91 1.54</td>
<td>0.000</td>
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</table>

* Comparisons made using independent t-tests
<table>
<thead>
<tr>
<th>Rank</th>
<th>Qualitative Theme</th>
<th>Number of Responses</th>
<th>Percentage of Responses</th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td>Understanding and valuing differences and similarities including culture and health care systems</td>
<td>67</td>
<td>14.6%</td>
</tr>
<tr>
<td>2</td>
<td>Increased awareness/had eyes opened/wider perspective</td>
<td>66</td>
<td>14.4%</td>
</tr>
<tr>
<td>3</td>
<td>Enjoyable/positive experience/great opportunity/ life changing</td>
<td>57</td>
<td>12.4%</td>
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<tr>
<td>4</td>
<td>Individual worth including spiritual connectedness and equality</td>
<td>55</td>
<td>12.0%</td>
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<tr>
<td>5</td>
<td>Increased critical thinking/creativity/problem solving including communication, resourcefulness</td>
<td>52</td>
<td>11.3%</td>
</tr>
<tr>
<td>6</td>
<td>Increased desire to serve</td>
<td>52</td>
<td>11.3%</td>
</tr>
<tr>
<td>7</td>
<td>Personal growth including caring attributes of appreciation, empathy, respect and love</td>
<td>50</td>
<td>10.9%</td>
</tr>
<tr>
<td>8</td>
<td>Gratitude for personal or US circumstances/veterans</td>
<td>18</td>
<td>3.9%</td>
</tr>
</tbody>
</table>
#2 Global Perspectives Inventory

Concepts of intercultural maturity model and intercultural communication

It measures 6 different sub-scales:

- **Cognitive Knowing:**
- **Cognitive Knowledge:**
- **Intrapersonal Identity:**
- **Intrapersonal Affect:**
- **Interpersonal Social Responsibility:**
- **Interpersonal Social Interaction:**

(Cronbach’s alpha: .68-.76).
## Student Overall GPI Results (2011)

<table>
<thead>
<tr>
<th>Scale Summaries</th>
<th>Matched N</th>
<th>Pretest Mean</th>
<th>Posttest Mean</th>
<th>Post-Pre Difference</th>
<th>T-Test</th>
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</thead>
<tbody>
<tr>
<td>Cognitive Knowing</td>
<td>110</td>
<td>3.51</td>
<td>3.78</td>
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<td>Cognitive Knowledge</td>
<td>110</td>
<td>3.13</td>
<td>3.68</td>
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<td>Intrapersonal Identity</td>
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<td>4.26</td>
<td>4.44</td>
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<td>Intrapersonal Affect</td>
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<td>3.65</td>
<td>3.93</td>
<td>.28</td>
<td>0.00</td>
</tr>
<tr>
<td>Interpersonal Social Responsibility</td>
<td>110</td>
<td>3.89</td>
<td>4.09</td>
<td>.21</td>
<td>0.00</td>
</tr>
<tr>
<td>Interpersonal Social Interaction</td>
<td>110</td>
<td>3.65</td>
<td>3.93</td>
<td>.28</td>
<td>0.00</td>
</tr>
</tbody>
</table>
#2 Campinha-Bacote

- Level of Cultural Competence, determined by total points:
  - Culturally proficient: 75-80 points
  - Culturally competent: 60-74 points
  - Culturally aware: 41-59 points
  - Culturally incompetent: 20-40 points

N=75 The students increased 5.5 points overall in their cultural competence.

<table>
<thead>
<tr>
<th>Level of Cultural Competence</th>
<th>Before GHHD</th>
<th>After GHHD</th>
</tr>
</thead>
<tbody>
<tr>
<td>Total</td>
<td>59.6</td>
<td>65.1</td>
</tr>
<tr>
<td>Culturally aware</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Culturally competence</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>
#3 The Caffrey Cultural Competence of Healthcare Scale

Caffrey, Neander, Markle, & Stewart 2005

Differences between cultural competence mean score based on the Caffrey Cultural Competence in Healthcare Scale

- Local Clinical Experiences
- Immersion Clinical Experiences
What did we learn?

No one place is better than the other
The STUDENT attitude is the best influence on what is learned
Participation in active discussion
Participation in thoughtful reflection
Immersing oneself in the experience
Conclusion

• Research assists us in ensuring our students work towards cultural sensitivity
• We use the best teaching techniques.
• Future studies = investigate our impact on the people with whom we interact.
• It is critical we provide deliverable data on the impact of the course.
References


