



Nursing in the new millenium

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ABSTRACT

This article addresses the fast changing trends in nursing education and practice in Nepal, which is the result of economic situation of the country, the changing technology and demography, and the knowledge explosion. The shifting nursing paradigm of the world also is considered here in order to run educational and health care institution effectively in the modern world. The WHO Expert Committee's advice on innovative curriculum planning and adapting teaching and learning methodology are some important facts stated here for shaping the profession according to the need of the society. The changing trends in nursing curriculum, and the strategies essential to undertake before reviewing nursing curriculum are pointed out to guide the nurse practitioners as well as the educationists.

Keywords: Nursing education and practice; Shifting paradigm in nursing; Innovative curriculum; International trends in nursing education.

INTRODUCTION

Nursing education is a key to the excellence of nursing practice. There are immense change taking place in nursing education to keep pace with challenges in nursing practice. The global change in health care environment has great impact on the nursing education and practice in Nepal. The forces responsible for this are market driven economy, changing technology, changes in demographic and knowledge explosion in this

modern world (Lendeman 2000). In the past, health care used to be the sole responsibility of the government. As the country's economy dropped down, health care institutions and the education are being allowed to open by the private and public sectors. The year 2000 brought the explosion of such health care institutions and educational institutions. The for-profit hospitals and educational institutions grew in number than non-for -profits ones. The growing number of health care institutions and

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the increasing opportunity for nurses in and outside the country created scarcity of nursing work force of various categories. Because of this, nursing institutions grew up like mushrooms and the education became highly market driven and competitive.

Few decades back nursing was a dedication, and recruitment of the candidates used to be difficult. Therefore, attractive stipend had to be provided to those who enter nursing educational institution. Now, the time has changes. There are many girls coming from relatively higher class and of high quality (many candidates applying for the nursing programs are far above the set criteria). The candidates are prepared to pay greater amount of money to come to nursing. Now, there are three main institutions running various nursing programs. The CTEVT (Center for Technical Education for Vocational Training) runs 34 nursing programs in Nepal out of which 31 programs are privately owned. This technical institute controls 12 PCL nursing programs. Various educational institutions running these programs with permission from CTEVT are (one governmental hospital, United Mission to Nepal, Kathmandu University and BPKIHS(B.P.Koirala Institute of Health Sciences). Each run one PCL Nursing program. Two of these programs are under medical colleges and six under private sector. TUIOM (Tribhuvan University Institute of Medicine) has five nursing campuses running this PCL Nursing program (in Kathmandu, Biratnagar, Birgunj, Pokhara and Nepalgunj). Out of the five campuses, the one situated in Kathmandu (Maharajgunj Nursing

Campus) runs B.N and M.N programs as well. There are two more campuses running PCL nursing under TUIOM. They are Bir hospital Nursing Campus and United Mission to Nepal. The later has BN program as well. Lastly BPKIHS has one four years basic B.Sc program. There are many more new campuses seeking for approval.

Recently, there are great expansions of nursing programs horizontally and vertically. However, if the quality of education is not maintained the growing market force of nursing education will push the profession down to the deepest pit. The nursing curriculum should be based on the National health Policy and the sociopolitical forces of the country. The dilemmas coming up in nursing education is, whether to produce nurses for real world of decreasing quality care, scarce resources, increasing work load and swinging job opportunity or for ideal world with solid preparation in the nursing science. In the former, the profession has to play a reactive role eg. being flexible with entrance criteria or in the experience provision to the students in compliance with the external forces. The later requires strict adherence to the rules and regulation of TUIOM and Nursing council in running the program. There is great challenge for the nurse educators before them, calling for a clear, organized and carefully developed curriculum in order to cope in this ever-changing work environment. The Nursing Council and Nursing Association of Nepal and the nurse educators should look into the matter seriously to balance the quality and quantity of nursing care in this market

driven economic society. Besides this, the changing technology of the world, the changing demography of the country and the knowledge explosion has great impact on the new trends in nursing in Nepal.

THE CHANGING TECHNOLOGY

The fast developing technology is a catalytic agent for changing nursing profession in Nepal. Much technical advancement in medical and surgical practices, which were impossible in the past, has saved many lives today. This brought the need for specialist nurses in many areas of nursing. Thus, nurses have to be more knowledgeable. The invention of computer is another facilitating factor in the effective and efficient nursing care services. The concept of telehealth and telemedicine are another advancement coming at the doorstep. There is a hope that these new achievements will be cost effective by reducing hospital care and increasing home care. The nursing education is keeping pace with the changing care practice. The traditional methods of lectures in the classrooms are being replaced by self-directed problem solving type with more use of audiovisual cassettes. The availability of CD ROMS and Internet search are making recent information available at faster pace. The uses of computers are making nursing research, education and practice more efficient and effective. From consumer's side, there is a great demand for distance learning, now a day. This is a place and time independent type of education through a computer mediated messaging system. This type of education prepares students for the real world

through database, simulated as well as actual case studies. It requires both the faculty and the students to be computer literate. Information literacy has become an essential part of the career success in the modern world.

CHANGING DEMOGRAPHY

The demographic condition of the country is ever changing now a day in many ways. The number of dependent population specially children and old people are increasing due to decreased child mortality rate and increased life expectancy rate. The immigration of population from outside the country, the growing tendency of the rural population to migrate in the urban areas and then to the foreign countries are the recent development. The family structures are also changed from joint to the nuclear one. The improved communication system in the country has made people more mobile. The acculturation processes are taking place in all aspects of Nepalese people. The care providers need to change the care practice to suit the clients of divergent sociocultural background, and the teaching and learning activities should be geared accordingly. Keeping in view of the increased maternal mortality and morbidity, BN program in Midwifery was opened in 1976 in Nursing Campus Maharajgunj. The other specialties like Community health Nursing, pediatric Nursing, Medical and surgical Nursing programs came along as the need arose in the country. Later, the deputation of the graduates with special BN training became difficult to deploy in the areas of their specialty. Hence, BN program with

community and hospital nursing started in the year 1987, to fit them in Community and hospital setting, which is still existing. In 2001 BN with mental health was added to meet the need of the National Health Policy. The MN program in Women Health was initiated in 1995 in TUIOM as the need was felt. This program expanded in Medical and Surgical Nursing subjects in 2000 and in Pediatric Nursing in 2001.

KNOWLEDGE EXPLOSION

The advanced information technology, efficient communication media and the increasing literacy rate has made the globe smaller. The information or invention in one part of the world spreads all over the world in no time. Many disease conditions and treatment that were learnt only in classrooms are being shown now a days by different media. Much disease conditions as AIDS, which were unknown, few decades ago became every day news. The public of today has become more informative with medical conditions and takes precautions to prevent them. The public does not depend on medical personnel only for medical information. Many preventable conditions are being learnt through multimedia system. Thus, the public has become more health conscious which result in compressed morbidity and increased quality of life. This leads to the existence of increasingly chronic disease conditions in the society. The nurse teachers need to keep track in the scientific development-taking place in the world. They should prepare nurses who can adjust themselves and learn to enjoy the changing world. The time has

come for the nurse educators to give up the notion of control and predictability as the world is becoming unpredictable.

Nursing as any other emerging profession has contract with society. Therefore the preparation of nursing workforce should be as required by the public. The public is more interested on the type of the outcome of nursing education than on the process. The public take great care on the cost and quality of nursing manpower produced in relation to the fund and the system used. American Nursing Association (1995) emphasized that "A Profession Requires recognition, relevance and even meaning in terms of its relationship to the society, its culture, its institution and its other members".

CURRENT TRENDS AND ISSUES IN NURSING EDUCATION AND PRACTICE IN NEPAL

The new trend in nursing education globally is towards active learning, personalization, individualization, contextual learning and learning to learn. The nursing educators of today should prepare nurses for the emerging health care problems. The training of nursing manpower is a big business boom in Nepal now a days in the health care market, as health care services are being given to the private companies. But, the quality of training is of great concern to the authorities as the entry levels and outcome of the product varies from one institution to another in quality and in quantity. Many nurses with higher education are mainly absorbed in teaching institution and in management. The clinical practice is not

sought by them, creating a big gap between practice and teaching (theory). The preparation of nurse teachers should be such that they are appropriately prepared for clinical practice and in primary health care as well as, in teaching learning methodologies.

Nepalese nurses, especially those of younger generation are increasingly in search for higher education, which is very praiseworthy. Studies have indicated that relationship between cost-effective care and higher education in nursing exists. However, highly educated nurses can't remain in clinical or in public health areas to utilize their increased knowledge and skill for quality care. This situation is especially true if those areas have many nurses who do not have the same educational opportunity. Because the highly educated nurses' approach to change towards better practice will be faced with resistance. Again, there are few nursing positions available to equate their educational qualification, which could give them autonomy to implement change. When additional education are not rewarded with appropriate remuneration, burn out and brain drain will result in the end. The latest trend coming in the near future is virtual universities on online education, which increase access to nursing education of differing potential irrespective of time and geographical location. The changing trends in nursing education and practice are seen in McBride's Paradigm Shift given below

MCBRIDE'S PARADIGM SHIFT IN NURSING

McBride in 1999 had predicted major paradigm shift in nursing in the area of health care delivery and in academia to guide nurses in running hospital and educational institution. They are as follows:

Shifting Paradigm:

Health cares delivery

Traditional view

- Nursing at bedside
- Process oriented
- Emphasis on meeting needs/obvious to costs
- Emphasis largely on mortality and some on morbidity
- Nursing=direct care
- Nurse support primary health care provider
- Responsible for discharge planning

Expanded view

- Nursing at patient's bed side
- Outcome oriented
- Emphasis on triaging needs/mindful of costs
- Emphasis on mortality/limiting morbidity, and maximizing functioning/quality of life
- Nursing =direct care; promoting self care; directing care given by others; designing population --based health programs; and managing patient services
- Nurse provides primary care
- Responsible for managing lifestyle change

Academia

Traditional view

- Emphasis on teaching
- Place bound

- Scholarship narrowly defined/congruent with personal interests
- Service perceived as quasi-charity
- Centralized administration
- Multidisciplinary, where appropriate, to encourage shared learning and greater understanding between profession"

WHO(1996)

Expanded view

- Emphasis on learning
- "Virtual university"
- Scholarship broadly defined/congruent with institutional mission
- Service valued for revenue generation
- Responsibility centered in management.

The WHO (1996) Expert Committee stated that reviewing the relevance of curricula and the structure of basic, specialists and continuing nursing education should be in the light of country's need for health care and human resources, in order to utilize the full potential of the nursing personnel. The Committee advised on an innovative approaches to curriculum planning, and preparing teaching and learning methods in nursing for developing countries so that nursing programs are:

- "Based on the recent assessment and forecast of country's health needs and of the nursing services required to meet them;
- Problem-based to promote the skills of critical thinking and problem solving;
- Rooted in the philosophy of primary health cares;
- Founded on current research in nursing practice;
- Culturally appropriate;

THE CHANGING TRENDS IN NURSING CURRICULUM:

The nurse educators who engage in changing, reviewing curriculum need to keep in touch with the nature of the International changing trends of the nursing curricula. The change are towards emphasis on the process and procedure of learning reflective practice and self-awareness. The content of the curricula is viewed as exemplary rather than fact or truth. There are trend towards group work, and communication and social skills appropriate to it. There is an increased use of projects requiring months to complete, which provide an understanding of the real world. The work include greater diversity in clinical experiences to provide contact with people from different cultures, ethnic group, economic levels, and with the alternative to western medicine. The curriculum incorporates direct access to information. Learning takes place by using database and multi media package. The faculty involved need to view all curricula as transitory and emphasize education as preparation for the future.

In order to have effective and efficient teaching and learning to take place the curriculum should be at least reviewed/changed every five years. There are certain strategies required to be made before changing the curriculum. First, there should be a continuous faculty development (realize and visualize the magnitude of the change).

All the faculty should have a clear but dynamic vision of the "What", "Why", and "How" of the change(s) are required.

The involvement of community is very essential at this stage. The strategy should make use of the total quality management process with the involvement of the student/community/faculty/administration as a team. The communication process at the time of curriculum change should be made in such a way that attention is given to individual differences. Other important aspect is the documentation of what was done or not done and why. Ample time should be given for grieving and other emotional responses. The steps taken during this time should be small but goal directed. McBred (1999).

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