

Transformative Global Pediatric Nursing Education: International Mentoring Partnership

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Abstract:

The nursing profession is continually evolving into being based upon increasing diversity of patients and international educational foundations such as Mezirow's transformative learning theory with nursing students. Additionally, nursing has also embraced a worldwide perspective of care delivery that has transitioned since the advent of the internet and global communications between university and clinical institutions. Prior to this past decade, nursing education was confined as one that promoted the development of the profession from the solitary perspective of one collegiate institution. Today, there have been many international service learning programs that have broadened the focus upon the development of nursing students delivering volunteer delivery of healthcare throughout the world. This review however, describes a unique and highly innovative, collaborative nursing partnership that exists between one university within the United States, one university within the United Kingdom, and two pediatric hospitals located within both countries. The focus of this review is upon the guided, clinical mentoring program that nursing students from both countries have received through an annual pediatric exchange program. The program has allowed for professional growth and increased awareness of the differences and similarities of the healthcare systems and cultures within the United States and the United Kingdom. This educational partnership has been in existence for ten years and has become a mutual and successful collaboration that has involved over 150 students in clinical mentoring and learning cultural competence of patient care delivery.

Key Words:

international. nursing education. global. mentoring. pediatric. transformative.

Transitions in global healthcare for nursing care delivery

The realm of healthcare has become globally based and one that is international in focus and has brought tremendous changes for the delivery of care for the nursing profession. The nursing profession has evolved into becoming one that requires nurses to have the knowledge and clinical expertise to provide care to a diversity of patients that are both international in scope, as well as having cultural and spiritual beliefs towards care from a variety of widespread perspectives (Berlund, Richards, & Lund, 2014). Nurses are required to provide care from the foundation of embracing and acknowledging transcultural health beliefs and delivering care to patients that are from many different regions of the world (Long, 2016; Purnell, 2018).

A highly influential and classic study was conducted by The Sullivan Commission in 2004, which found that there existed a severe shortage of minorities and persons of color that comprised the personnel of the healthcare providers within the United States (The Sullivan Commission, 2004). Additionally, this study revealed that the diversity of the population was dramatically increasing and that health care providers needed to both understand and care for patients with a variety of beliefs towards health, wellness, and illness. This finding has had the profound impact of awakening the need for diversifying both health professionals as well as the delivery of care within the United States (The Sullivan Commission, 2004).

Cultural competence and cultural awareness with provision of nursing care

With the increasing diversity of the world's population, today's schools of nursing and health care educators are faced with the challenge of preparing the next generation of nurses with a broader awareness to provide care with the knowledge of cultural competence towards patients of all backgrounds (Kohlbray, 2016). Cultural competence is the development of an awareness of another's culture which includes its health beliefs, wellness, and illness characteristics that are different than one's own beliefs (Maltby, de Vries-Erich, & Lund, 2016). Novice nursing students have limited cultural awareness of the global society and populations of people that reside in countries that are at a distance and different than their own (Curtin, Martins, & Schwartz-Barcott, 2014).

Despite the advent of the internet, as well as global communication such as email, the reality of caring for patients from a variety of cultural backgrounds is difficult to understand for students without the lived experience of being able to travel and care for patients abroad (Gilliland, Attridge, Attridge, Maize, & McNeill, 2016). Students often discover that international travel experiences in which they learn to care for a population of patients that are different and unique from one's own is a transformative experience that enriches their world perspective and increases their knowledge base of cultural nursing care (Kronk, Weideman, Cunningham, & Resick, 2015; Mezirow, 2009).

Brown and Boateng (2016) found that study abroad programs have significant benefits such as promoting cultural understanding and acknowledging the differences in healthcare settings, policies and practices. Many study abroad programs are service learning in nature and focus upon having nursing students deliver patient care to vulnerable and marginalized rural populations of patients in third world nations (Berg, 2016). Bamber (2015) found that pedagogical approaches such as utilizing international

service learning opportunities with students helps to develop and cultivate a cosmopolitan orientation to the world and healthcare. Cosmopolitanism is considered the acquisition of becoming other-wise for gaining cultural awareness and cultural competence. Service learning clinical opportunities additionally have been found to provide a forum for critical reflection such as use of journals whereby students are able to use reflection to help further understand their experiences as they return to their home country (Curtin, Martins, Schwartz-Barcott, DiMaria, & Ogando, 2015).

Transformative learning theory and study abroad opportunities

The theoretical framework of Mezirow's transformative learning may be used as the underpinning of the foundation for nursing educators to embrace international learning (Strange & Gibson, 2017). Mezirow's (2009) theory is used to describe how people develop and use critical self-reflection to consider their beliefs and experiences, and change their own unique perspectives of the world and its people over time. Study abroad opportunities allows novice students to engage in active learning and critical reflection regarding their individualized patient care experiences. These opportunities allow once in a lifetime experiences for students to reflect on both the similarities and the differences they witness in healthcare within a different country from their own (Simm & Marvell, 2015). Mezirow believed that a person would change their world view of both people and a situation when facing a "disorienting dilemma", which is an experience that doesn't fit into the person's current beliefs about the world (Howie & Bagnall, 2013). Nursing students are often presented with cultures that are vastly different from their own, and this includes delivery of care that is unique to healthcare systems, both socialized and privatized, around the world.

Transformative collaborative international pediatric mentoring program

Throughout the past fifteen years, most international study abroad programs have been service learning based and are primarily developed to have nursing students deliver basic nursing first aid care to populations within third world nations. Most studies that have been conducted within nursing have been with educators investigating the impact of service learning programs upon the novice students that partake with these excursions (Kelleher & FitzGerald, 2017). In a systematic review of 23 empirical articles regarding international student exchange experiences, Kolbuk, Mitchell, Glick, and Greiner (2012) found that there was a lack of articles describing two-way exchange experiences in global pediatric nursing education and that there were not any models for best practice for international student clinical mentoring exchanges.

This review describes the establishment of a unique and innovative, collaborative pediatric global mentoring partnership between two universities and two pediatric hospitals in the United Kingdom and the United States. The primary goal of this program has been to facilitate the acquisition of knowledge of cultural competence of families and care delivery of pediatric patients from a different country than one's own for the nursing students. This goal has been accomplished through enabling novice nursing students to developing an understanding of differences and similarities in pediatric patient care through family dynamics, society, social structures, and healthcare delivery systems in socialized and privatized societies. Students are assigned clinical mentors for caring for pediatric patients, as well as delivery of formal presentations on a topic of

interest to them in pediatric care to their peers in the host country. Additionally, students are assigned in-depth reflective journals that consist of questions regarding the acquisition of knowledge of cultural competence regarding the patients and families that they are caring for in another country. Using reflective journals, students are able to pause and contemplate the value of their learning on the trip and broadening their perspective of cultures and people that are different than their own. Students from both countries are also able to bring home new knowledge to share with other students and nurses regarding the pediatric care delivery that they have learned on their journey.

Initiation and development of the collaborative international mentoring partnership

Based upon the clinical nursing research findings that have been evident in the nursing literature, an international collaborative educational pediatric program and partnership was initiated in 2007. The program has been in existence for ten years. With the mutual goals of providing an exchange program that focused upon the transformation of nursing students' transcultural beliefs, cultural awareness, and cultural competence, a partnership program was developed between a northern European university school of nursing in the United Kingdom and a southeastern university school of nursing within the United States. With a formal letter of introduction and inquiry from the pediatric professor of the school of nursing in the United States, a meeting of introduction was held in the United Kingdom. Assembled at the meeting were the administration and pediatric professors of both schools of nursing, clinical nursing leaders from the regional pediatric hospital, and the chief nursing officer who represented the United Kingdom. All members of the meeting agreed to progress with the educational program that would benefit nursing students from both schools of nursing. The pediatric professors were enthusiastic to begin the program.

The foundation of the international collaborative educational program was based upon the field of pediatrics due to the nursing professors having specialization in the field of pediatric nursing. An agreement and legal educational contract was designed and approved by both university schools of nursing. The primary focus of the program was on the development of having an annual exchange program that facilitated the clinical learning of novice nursing students through the guidance and direction of clinical nursing mentors in both countries. The pediatric hospitals in both countries would arrange for the clinical rotations in pediatric wards, clinics, and units.

With the focus of the program consisting of clinical mentoring of pediatric patients and families in the two hospitals, all educational learning was conducted through the clinical experiences. Students did not enroll in other classes at the host universities while they were on their educational journey. Students were led by nursing mentors in a wide array of diverse patient care wards that range from Accident & Emergency, the Operating Theater, the High Intensity Intensive Care Unit, the Pediatric Oncology ward, the Neurotrauma ward, and Community Outreach which ranges from Palliative Care, Hospice, and Community-based Home Visiting of children with chronic conditions. Again, the primary focus of the program was for the nursing clinical mentor to demonstrate leadership abilities and nursing transcultural care to the nursing students.

This program is presented each academic year, and students from the United States travel to the United Kingdom over Spring Break, and students from the United Kingdom travel to the United States during the winter break for their clinical training. The professors have utilized private tour agencies for coordinating all arrangements for the students to help reduce costs. Students are housed in hotels that have been arranged through the student led travel company. The travel companies additionally arrange all flights, transportation, educational tours and most meals for the journey. The schedule for the United States' students encompasses a nine-day journey which includes two overseas travel days, two days of local touring and sightseeing, and five days of clinical mentoring within the pediatric hospital on a specialized ward. Students from the United States additionally can care for children from families that have immigrated to the United Kingdom through the advent of the European Union in the clinics in the local region. Students from the United Kingdom travel to the United States for a fourteen-day journey that includes two days of overseas international travel, two days of sightseeing and touring, five days of clinical mentoring in the pediatric hospital and an additional five days of clinical mentoring in the tribal hospital at the Native American reservation hospital.

Nursing students from the United Kingdom are mentored by clinical nursing mentors at the Native American reservation hospital and community care facilities while they are in the United States in their program. The reservation is located 30 miles from the university and the students from the United Kingdom are immersed in a culture that has extremely different beliefs and health care protocols, then those that they see utilized in their home country. Nursing clinical mentors additionally travel to home care visits and the students can witness firsthand the nature and living habits of the families, children, and elderly population that reside in the reservation. This portion of their mentoring nursing program has become one of the highlights of their educational experience while they are visiting pediatric facilities and nursing care in the United States. Students always are enthusiastic about this facet of their learning.

A highlight of this mentoring program is additionally that students from both universities present nursing care presentations to their visiting health care professionals and administration at both children's hospitals, as well as nursing students. Topics have ranged from childhood obesity, diabetes, autism spectrum disorder, oncological conditions, congenital anomalies, and mental illness such as substance abuse and addiction. These presentations are warmly received at each of the children's hospitals with nursing students, professional nurses, and interprofessional care givers such as physicians in attendance. Students are thrilled to have presented their first international nursing presentation and are eager to include this milestone in their personal resume as they prepare to apply for their first nursing positions after completion of nursing school.

Transformative learning through the international pediatric education program

Owen (2016) has found that students experience unsettling educational experiences that Mezirow (2009) considered to be "disorientating dilemmas" that challenge their beliefs and thoughts. Through these experiences, students can critically reflect and discern how their own values have been challenged and are often transformed and changed to embrace new ways of thinking about troubling situations. Students are often

led through a process of transformation that results in new visions and perspectives (Calleja, 2014). This form of intellectual transformational learning has become extremely evident over the past decade with the novice nursing students that experience alternative forms of healthcare beliefs and nursing care in both socialized and privatized systems. Students often have a closed-minded approach to how pediatric nursing care is delivered in either the United Kingdom or the United States, and it is only when they are clinically immersed in learning with a clinical nursing mentor caring for children, do they confront their educational beliefs and are encouraged to embrace new ways of accepting nursing care. Students from the United States hold a post-journey seminar that allows reflective discussion regarding learning that was acquired on the journey and pertaining to cultural competence and caring for pediatric patients. The following excerpts from clinical discussions are examples of how nursing students have been transformed to hold new insights into the delivery of nursing care for children in both countries.

This first quotation discusses the learning that one student realized during the trip regarding traveling to the United Kingdom:

Traveling to another country can seem like traveling to an alien world. The food, climate, language, customs, and roadways can be so different than one is accustomed. It is exciting to experience new cuisines and view gorgeous landscapes. Learning about the history and impact of leaders gives one a great appreciation of the trials and tribulations a country has faced through the ages and how they have survived so many misfortunes.

(Student one, personal communication, March 11, 2018).

Students were eager to discuss the similarities and differences in which nurses were educated in both countries. The following is an excerpt of this discussion:

It is helpful to learn how nurses in other parts of the world are educated. Global health or improving the well-being of people worldwide through areas of study, research, and practice is something in which all nurses should be participating within their scope. This allows us to be interconnected for a common cause.

(Student two, personal communication, March 11, 2018).

The students from the United States were amazed to learn about the differences in the cultures with the United Kingdom regarding cost of health care, mortality, and infant mortality rates. The following quotation demonstrates a portion of this discussion:

In 2014, the United States spent \$8,895 per year per person for health care while the United Kingdom spent \$3,399 per person yet, their life expectancy for males is 78 years, while ours is 76 years, and for females is 82 years, while ours is 81 years (Holtz, 2017) . Their infant mortality rate in 2009 was 6/1000 while ours 8/1000 (Holtz, 2017). These numbers signify we are misappropriating monies or people are not receiving satisfactory healthcare.

(Student three, personal communication, March 11, 2018).

Students openly discussed the immense difference between the pediatric care that children received from birth onward in the United Kingdom, as compared to the minimal

care that is delivered within the United States through lack of a socialized health care system. The following is a quotation from this discussion:

When a child is born, a nurse is assigned to that child as a contact person until the child graduates “secondary school” or high school. This is a completely different form of healthcare than here delivered in the United States.

(Student four, personal communication, March 11, 2018).

The students in the United States reflected upon the similarities in the care of young children in housing projects that were in the United Kingdom and the United States. The following quotation is an excerpt of this discussion:

My preceptor and I made our first visit to a home to give a 3-year-old girl a shot of methotrexate for her rheumatoid arthritis. Our injection process was quick and the little girl quite cooperative however, my preceptor was unhappy as the “mum” had let her other children stay home from school for no reason. This mother had been reported to the authorities.

(Student five, personal communication, March 11, 2018).

Terminal care for children in the United States is extremely different than in the United Kingdom, where children are allowed and encouraged to die in the comfort of their families and home environment. The following quotation is an example of this discussion:

She explained to me, families want to keep “unwell” or ill children at home, especially if they are terminal. The nurses set up resources to help provide special nutritional services, individualized air mattress beds, and overnight medical care for the terminal child. Hospice Care is called Care-24 and this group will set up for an undertaker to take the child 24 hours after death, prepare the body, and return the deceased child to the home.

(Student six, personal communication, March 11, 2018).

Students from the United Kingdom also held reflective seminars with the professor from the United States prior to their departure to their home country. One of the discussions was over the impression of the lack of hand washing in care by nurses in the United States. The following is the example from this discussion:

I was surprised by the little attempt that the nurses on the ward had in the United States for ensuring that they were washing their hands between caring for the children. I saw many instances when this happened.

(Student seven, personal communication, January 30, 2017).

Students from the United Kingdom appreciated and valued the clinical nursing experiences that they had while caring for families on the Native American reservation. The following excerpt is an example of the awareness that was discussed by the students:

I was amazed at how the entire family would come to the home and stay throughout the day when a child on the Native American reservation was ill and in bed. I was told that this was the custom of the tribe and was respect for the family.

(Student eight, personal communication, January 30, 2017).

Conclusions with international collaborative pediatric mentoring programs

International educational nursing programs such as the pediatric mentoring program provide a wealth of novel experiences and adventures. These experiences help nursing students to view the world in different perspectives and viewpoints when learning to care for pediatric patients. In this collaborative program, nursing students have had the opportunity for individualized and intensive mentoring with a clinical nursing mentor that has helped and facilitated their learning into one of being truly transformative. Students have had the ability to embrace new ways of understanding and changing their own ways of thinking to learn transcultural beliefs, values, and cultural awareness in traveling and participating in this program. Both university schools of nursing and pediatric hospitals have also been enriched by the years of valuable experiences and professional friendships that have developed. There have been over 150 students that have participated in the clinical mentoring program. It is hoped that this review will both interest and enable other schools of nursing and pediatric hospitals to inquire and initiate programs of this kind that are invaluable to student learning.

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