PROLOGUE

Challenges in nurse education: A shared international perspective

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This we believe is the first time that editors in Sydney and Beirut have worked together to address the vexing question of the challenges facing nurse education. The challenges we see depend as much as anything on where we sit and the experiences that have shaped our world views and perspectives on the future of nurse education.

Although we might be separated by 14,200 km, and by the differences between the Australian Federal Constitution and the confession-based constitution of Lebanon, left as a legacy by the French, there is no doubting that the challenges we see are global in relevance and implications.

At a time when the world of finance is still reeling from finding out that the assets that backed the economy of the United States are worth less than believed and no-one really knows who is left holding the debt, universities are planning for a period of financial stringency. Those universities that have been living beyond their means in Australia have been found out, and according to reports in *The Australian* on 10 December, could shed academic and general positions by this time next year. In Canada, the situation is more cautious, but university presidents are already writing to their constituencies to point out that involuntary redundancy might be required as a last resort. According to separate reports in *The Wall Street Journal* and

International Herald Tribune, Ivy League universities in the United States are licking their wounds following the collapse of hedge funds, private equity trusts and speculation in forestry. The Sunday Telegraph in the United Kingdom has reported that Oxbridge universities are grappling with financial stringency as they assert prestige to overcome the melt-down of assets in the Iceland banks debacle. Surprisingly, the Lebanese banking sector is robust and has hardly been affected by the world financial crises.

Elsewhere, universities are scrutinizing hiring decisions and pressuring faculty and staff to do even more with less as funds are diverted to protect essential library resources, to maintain information technology infrastructure, and to service debt for capital projects too far along to be cancelled. Unless ways can be found to minimize the impact of these trends on the student experience, more students will complain about poor teaching. Unfortunately, the way some universities handle student complaints may not lead to an increase in student satisfaction. This is because a recent survey, conducted on behalf of the Australian Learning and Teacning Council (ALTC), found that students have little trust in campus ombudspersons, senior university administrators and deans who currently have responsibility for resolving student complaints and disputes about academic discipline

(Lane, 2008). In this survey of 1500 students at a dozen or so universities, 80% of students reported that their complaints were not pursued. Needless to say, staff interviewed as part of the same study had more confidence in current complaint procedures and were not persuaded of the need for reform. The full report may soon be available at the ALTC website (www.altc.edu.au).

There is no evidence that students of nursing are either more satisfied or less satisfied than other students, but as we all know, students' concerns are not always picked up in course evaluations and student satisfaction surveys. Indeed, at some Canadian universities, only a minority of students believe that filling in such surveys is worth their time and effort. This is despite some students continuing to complain to their deans about overly rigid programs of study; too much assessment; poor integration of courses in anatomy, physiology, pharmacology and pathophysiology; insufficient clinical experience; poor clinical education; inflexible faculty attitudes; and petty restrictions on progression. International students complain that clinical instructors find it difficult to distinguish between unsafe practice and the communication problems common among students who speak English as a second, third, or even fourth language.

Competition from outside the university sector is another challenge. The first baccalaureate degree in nursing to be offered in Australia's Technical and Further Education Sector has been approved. In 2010 at the latest, 40 students of nursing will take up places at Holmesglen College, Victoria, and join the 50,000 enrolees taking courses in bakery, cookery and hospitality; conservation, floristry, and horticulture; furnishing, joinery, decoration and design; hairdressing; and other vocational subjects. We have no quarrel with the quality of these programs or the importance of technical and further education. Neither do we quarrel with the need for new approaches to nurse education. Our worry is about the ability of a TAFE college to offer a liberal education at the same standard as that available in universities.

We agree with the American Association of Colleges of Nursing that 'A solid base in liberal

education provides the cornerstone for the practice and education of nurses.' (The Essentials of Baccalaureate Education for Professional Nursing Practice, 2008) Put plainly our opposition to TAFE colleges offering baccalaureate degrees in nursing is that they cannot provide the level of instruction in cognate and liberal arts disciplines that is available in even the weakest of our universities. In other words, whatever training in nursing, TAFE students will receive; they will not be educated in the wider sense for which many nurses of our generation fought to establish baccalaureate degrees and higher degrees in nursing. When a PhD in one's discipline is the minimum academic qualification for appointment to a university faculty or department, how can a TAFE college match a university in providing students with access to not just the leading teachers, but also the leading scholars and researchers in the field? Would not the venerable Cardinal Newman (1801-1890) of The Idea of a University fame see developments at Holmesglen as the antipathy of the broad education he believed should be the prominent feature of a university? Whether he would or not, is not something on which we can pronounce with authority. We can, however, claim in our own right that we believe that a vocational training in nursing trivialises our discipline and profession.

Helping our universities through the threatened global recession, empowering students to overcome the inertia and petty injustices that pervade their education and debating those who cannot see that nurses need a university education are among the challenges we face in these still fledging years of the new millennium. But the perspectives from Sydney and Beirut would be lost, if we did not draw attention to commitments that dwarf the importance of even these pressing matters. The Federal Government of Australia has led the way in showing other nations how to take the threat of carbon emissions seriously. While one of us inclines towards the sceptics in the reasons for climate change, we agree on at least one fundamental thing: students of nursing should have the opportunity to study the links between the environment and population health as part of their exploration

of the metaparadigm of our discipline. Not all countries have environmental health specialists, and even those that do can benefit from the contribution that nurses can make to improving health outcomes by working with groups and communities in the interests of sustainable responses to environmental threats.

Despite the multiplications nature of challenges facing nursing at local, national and international levels, it remains a pleasure and a privilege to work with students and to be in a position to actively contribute to preparing the next generation of nurses. As today's leaders, it is important that we remain optimistic and positive about the future of nursing and health care, to actively search for solutions to problems, and to acknowledge what we do well. After all, our students have made the choice to study nursing... to become nurses, and are optimistic with hopes for nursing and its future. This is important everywhere, but particularly in countries like Lebanon that face security threats on a daily basis, and where it is necessary to have an armed military presence at every campus gate. Nursing stands out as a humanitarian profession dedicated to helping people irrespective of age, gender, ethnicity, culture or religion, and its values remind us of the responsibility we have as educators to foster tolerance, understanding, and peaceful conflict resolution.

With these challenges in mind, we are delighted to present this collection of papers. They reveal that despite the challenges facing us, and regardless of where we sit in the world, there are areas of excellence in nurse education, and many dedicated and innovative nursing faculties. In this collection, we present a selection of papers that reflect contemporary issues and concerns facing nurse educators and academics internationally. Most importantly, these papers reveal the commitment, resourcefulness and resilience of nursing and those who teach it. What can be learned from many of these papers is that teaching and learning can be enhanced, not necessarily through the provision of more resources and expensive equipment, but through changes in attitudes, and openness to reflective practice and innovation in curriculum design, pedagogy, and development of nursing competencies. We hope that these papers will be a catalyst for academics and educators to reflect on, debate and discuss as we address the issues that concern us wherever we are.

Reference

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