

Nursing Practice and Education Need to Promote International Health

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Description

In an effort to develop meaningful program evaluation data, this exploratory study examined hardiness and stress among a select group of graduate nursing administration students at the university of Texas at Arlington in Arlington, TX. Students completed a questionnaire, which included the Hardiness Scale and Perceived Stress Scale, at both beginning and end of their program. Six to 12 months after graduation, each participant completed a telephone survey with items related to hardiness and American association of colleges of nursing and American organization of nurse executives core competencies.

Mean scores for both hardiness and stress did improve from beginning to end of program; however, alpha coefficient reliabilities were disappointing, so no further quantitative analyses were completed. Most enlightening were the telephone interviews, which revealed that graduates were engaged in behaviors indicative of high hardiness. Use of hardiness as a guiding construct may prove useful to nursing administration program faculty in developing and refining a quality program; use of both quantitative and qualitative methods are recommended for obtaining meaningful program evaluation data.

Both nursing practice and education need to promote international health. Nurses from a comprehensive 373-patient-bed hospital at Cincinnati children's hospital medical center and faculty from the College of Nursing, University of Cincinnati, in southwest Ohio have successfully collaborated to develop several unique international nursing exchange programs. The goals of these programs are to increase cultural sensitivity and nursing knowledge relevant to a global community. The essential components used in creating and implementing the programs with Scotland, Honduras, and Korea will serve as an international workplace model for others, especially for those settings focused on children and family health care.

In these fractured and unsettling times, it is tempting to see nursing as a profession in crumbles. Many nurses are vocalizing to media and to each other that they are overworked, underpaid, undervalued and intending to leave the system. Now more than ever, leaders, thinkers and change agents must organize themselves to restore life and vitality to the profession. Nursing educators are cornerstones in this restoration work, yet we too can at times feel overwhelmed and helpless to find

engaging approaches to teaching nursing. This is the first of two papers, which argue that critical education is an illuminating philosophy for nursing. It can restore optimism and provide clear directions to assist neophytes and lifelong learners in nursing to become more self-confident, self-determining, optimistic, and resistant and change oriented. In this article, the context for learning is considered, exploring transformative teaching as one choice among several learning models. The article offers strategies nurses may use to prepare a fertile ground for learning wherever that may be located.

Supervision and support of undergraduate nursing students in mental health is a critical issue for the profession to address. The challenge for mental health services has been to identify effective support models for nursing students that can positively influence recruitment rates and enhance student learning. During the 1990s this has become more difficult to achieve within the constraints of the current nursing education system. The limitations of three-year comprehensive courses restrict students' exposure to mental health nursing practice, in turn negatively impacting on the ability to recruit to the field. More importantly, one of the most critical factors influencing the success of recruitment into mental health nursing is the actual quality of clinical placements. Increasingly universities and mental health services are relying solely on preceptor ship, a one-to-one educative, supportive relationship, as a supervisory mechanism for clinical placements.

All nursing placements, regardless of clinical focus, are viewed as an integral phase in the learning, socialization and professional development of undergraduate nursing students. However, the need to provide positive clinical experiences in mental health nursing, over and above what is offered in generalist settings, is well documented along with the possible consequences of negative clinical exposure.

The nature and philosophy of mental health nursing, although similar in ways, still contrasts the clinical experience of the student nurse in generalist settings. The occupational identity of the mental health nurse incorporates the use of self as a therapeutic tool, aims to foster therapeutic relationships, engages clients in discourse and change, and focuses on the individuality of the client. The environment is much less structured with less focus on physical tasks, offers more professional autonomy and utilises a multidisciplinary team approach to care.

The value of preceptor ship in clinical education has been widely documented. Benefits for student nurses include, the opportunity to access the expertise of an experienced nurse in a one-to-one relationship, exposure to role models enabling the student to 'link theoretical knowledge to practice and widen their own acting and learning in practice, and support problem-solving behavior, role socialization and increased student self-confidence. Preceptor ship can produce positive changes in

students' confidence, impacting on their future performance as nurses. Preceptor ship provides a primary source for orientation, learning, evaluation and debriefing, with the aim being to ensure greater consistency for the student. As outlined in Byrd et al. "students want a strong clinical experience with a variety of patient diagnoses, opportunity for skills practice and an interested, skillful preceptor".