

EDITOR'S NOTE:

This article is the fourth in an occasional feature series on internationalizing graduate programs. The first article was "Educating for Global Business" on the internationalization of M.B.A. programs in the September/October 2007 issue, the second was "Making a World of Difference" on the internationalization of graduate social work programs in the March/April 2008 issue and the third was "Planning Tomorrow's Urban World" in the July/August 2008 issue.



Nursing





Florence Nightingale, the mother of nursing, left home to care for the sick and wounded soldiers in the Crimean War. Caring for others beyond home is a trend that lives on. Today's nurses are serving the needs of our global community and graduate nursing programs are up to the challenge as they internationalize curricula.

BY SUSAN LADIKA

Goes Global

AFTER EYE-OPENING DAYS

assisting local community health care workers and midwives working for a clinic in rural Guatemala, students from the University of Washington School of Nursing and the local health care workers sat down together to share reflections, presentations, and thoughts on medical care. Translators bridged the gap between the Americans' English and Spanish, and the Mayan midwives' Spanish and native Kaqchikel, using skits and dramatization to bring the words to life.

During the session, the students shared their insights on the need to wear gloves to decrease infection and maternal mortality rates. At the end of their meeting, the midwives shared their thoughts—advising the students to invoke the spirits to ensure each mother had a successful birth.

The stark contrast in health care concerns won't easily be forgotten by graduate student Julie Potsma. "We were all about germ theory, trying to impose our theories on them. They're not even coming from that place." For nursing faculty and students helping health care workers abroad, it's a fine line to ensure that U.S. students "are be-



JHU students with local a nurse in South Africa

ing a complement to them, and not ignoring their value system," Potsma says.

It's an important lesson for graduate nursing students to learn as the world becomes a smaller place. Not only are students taking advantage of opportunities to travel abroad, but as the U.S. population becomes more diverse, immigrants bring their own values and cultures and beliefs with them.

“Today’s young people know so much more about the world than we did,” says Martha Hill, dean of the Johns Hopkins University School of Nursing. As borders have fallen, students travel more, and experience instantaneous communication through television and the Internet. “We are becoming much more alike than different.”

They are also much more aware of disasters and medical crises—information about tsunamis, earthquakes, and even bird flu is beamed around the world as soon as a disaster strikes or an outbreak occurs.

Global Health Affects Domestic Care

The health care community is now seeing “how world health also affects the patients we serve domestically,” says Carmen Portillo, vice chair in the Department of Community Health Systems at the University of California, San Francisco School of Nursing.

In response, many universities are offering more international aspects to their nursing school graduate programs. Opportunities for international clinical experience and research are on the rise, joint master’s degrees in nursing and public health are being offered, and some schools are incorporating courses with an international focus into their curriculum.

Perhaps most popular for students who afford to take time away are education abroad possibilities. For those leaving the United States and heading particularly to less developed countries, cultivating cultural sensitivity should be vital.

At the University of Washington School of Nursing in Seattle, a program that wins rave reviews is the annual trip to San Lucas Toliman, Guatemala, led by Catherine Carr, associate professor in family and child nursing and a certified midwife. Each year she takes eight graduate and undergraduate nursing students. “It’s critical that we not overwhelm the small place that we go to. Having a huge group of gringos walking in and setting up shop is not a face we want to present.”

Potsma took part in the trip about two years ago, where the group works in conjunction with a local Catholic parish to assist Mayan midwives from the region providing prenatal and post-partum care.

Carr has been taking students there on two-week trips since 2001 so “we’ve built friendships; we’ve built relationships.” During that time, they see more than 90 local women, with students taking histories and doing hands-on work, depending on their skill level.

There are also regular exchanges with the midwives, so last year, students from the United States shared information on fetal positioning, while the midwives spoke about medicinal plants.

Carr thinks it’s essential for schools to build long-term relationships with the places they visit. “Otherwise we just become another batch of medical tourists. We get something, but we don’t leave anything.”



Jason Farley, assistant professor of nursing at Johns Hopkins University, in China. He was a doctoral student when this photo was taken.

That’s something UW nurse-midwifery master’s program student Shawna Pochan has already observed firsthand during an undergraduate trip to Nepal while a student at Cornell University in Ithaca, New York. She is accompanying Carr on her trip to Guatemala this year.

Pochan, who had originally been a pre-med student, did a four-month study abroad program in Nepal. As part of that, she spent a month in a birth clinic, and that convinced her to switch her focus of study. “I like the much more holistic approach” to health that nursing offers.

During her time in Nepal, she saw other groups with “unsustainable medical tourism programs. Who knows if they do more harm than good.”

Along with her time in Nepal, Pochan often traveled to Europe and the Caribbean with her family when she was younger, and

later spent a year backpacking around India. Those experiences give her more insight into how immigrants here might feel. “Feeling isolated yourself in a different country makes you a lot more empathetic.”

International Study Broadens Future Nurses’ Perspectives

Experience in those foreign settings can also help shape graduate nurses’ work at home. Potsma, who just started postdoctoral studies, is focusing her research on ways to decrease environmental triggers for asthma in the farm worker community in Washington state. Her time in Guatemala helped her “look at things through a different lens, while also “highlighting important concepts in community health.”

Another student connecting her time abroad with her studies at home is Rebecca Wheeler, a Ph.D. student in the Nell Hodgson Woodruff School of Nursing at Emory University in Atlanta. Wheeler just spent six weeks in Puebla, Mexico, as part of a new in-



John Hopkins University nursing students in Haiti.

terdisciplinary program through the Global Health Institute, which is designed to give students experience in international health care settings and develop international partnerships.

Much of her time was spent with nurses at Puebla's public hospital, attached to the local HIV/AIDS clinic, where she interviewed the nurses about their attitudes toward caring for HIV/AIDS patients. Puebla is one of the top Mexican states that sends migrants to the United States, and some return with the disease, spreading it among that population.

For her doctoral work, Wheeler is focusing on international nursing migration, so she also talked to the nurses about their own plans to migrate. Of the nine nurses she spoke with, only one-third said they wouldn't leave their country.

The others said they would be interested in coming to the United States to learn new techniques and how things are run, and then bring those experiences back to Mexico. "Money was never a reason they cited for coming," says Wheeler, whose nursing focus is on policy issues, and is an adviser to the Robert Wood Johnson Foundation on recruiting more Hispanics into nursing to better match the U.S. patient population.

Wheeler, who had been a high school Spanish teacher before switching careers, says through her experience, "I feel like I understand the Mexicans here better."

Nursing Curricula Embrace Internationalization

This growing awareness of the globalization of nursing is prompting some schools to beef up their international programs, while others have had a strong presence in the international arena for years.

At Emory University, the Nell Hodgson Woodruff School of Nursing opened the Lillian Carter Center for International Nursing in 2000. Staff from various departments in the nursing school feed into the international nursing center, says Maureen Kelley, chair of the family and community nursing department. The center focuses on both international work and underserved populations in the United States, such as migrants.

The interest in international health is in keeping with Emory's strategic plan, which has an increased focus on globalization. One popular program is a joint master of nursing and master of public health. And the nursing school plans to add a course on global health issues in the coming year.

Even for those students who are not interested in a career in global health, they become excited around those who are, and "this imbues itself into the atmosphere of the school," Kelley says.

In 2006 Yale University in New Haven, Connecticut, created the Center for International Nursing Scholarship and Education, designed to promote collaborative scholarship and understanding of cross-border and cross-cultural issues. Prior to that time, some faculty members were involved in international collaboration and research, and the school had longstanding exchange programs with Thailand and China, says Susan Barringer, the center's associate director.

Now the interest of faculty and students is driving the program's internationalization. Many students are returning to school to study nursing after graduating with a bachelor's degree in another field and spending time in the work world or in the Peace Corps. "It's kind of amazing to me how many students have done international work already," Barringer says.

Johns Hopkins University opened its Office of Global Nursing more than two years ago to field the requests of nurses from around the world who wanted to visit, consult or study at the Baltimore school, as well as to facilitate international opportunities for Johns Hopkins students who want to spend time abroad, says Jane Shivnan, the office director. "So many students are really committed in their career paths to improving global health."

At the University of Washington, the international programs office went from one part-time position to a full-time position plus an assistant, says Sarah Ross, director of international programs. The interest in global health "is not just a trend," she says. "A lot of people don't realize it, but it's already a changed world."

But schools can be slow to make take that into account because of the time lag in the educational process, Ross says. Many times, schools

John Hopkins University nursing students in South Africa.



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have to redesign their nursing programs, but those taught under an older model might be reluctant to change, she says. "You have to cultivate faculty that do have a global footprint."

Many nursing schools have yet to internationalize their curriculum, let alone devote entire courses to global health. At Johns Hopkins, a one-week intensive course on nursing and global humanitarian relief is offered as a master's elective, or as continuing education credit for nurses in the community.

It features a wide range of speakers, as well as group projects and case studies, and is kept relatively small so it remains quite interactive. The January class drew 31 participants, and next year the school may offer it twice to accommodate demand, Shivan says.

Another popular program is the joint master's of nursing and master's of public health, which has a strong international focus, and has a new class on research in international settings, she says. Yet "no matter what you put into the curriculum and how many opportunities you try to create in the United States" for students to work with patients from different cultures, "nothing really replaces that live experience" of training abroad. "It helps us to be better advocates, even if we never leave the country again."

Such programs also can open students up to new approaches to health care, says Jean Lange, associate professor in the School of

Nursing at Fairfield University in Fairfield, Connecticut. Each year she leads a group of graduate and undergraduate students to the University of Padova, in Italy, where they study nursing research during the two-week program.

They also visit the university's hospital, one of Italy's largest, where they observe things like patient care in the intensive-care unit and patient prioritization in the emergency room. They also visit a community-based residence for older adults, which also houses a children's day care so the oldsters interact with the youngsters. The facility also has assisted living, skilled nursing and hospice care.

In the United States, there is "a sense we are the all-knowing ones. We do it best. We are the ones who can teach other," Lange says. In reality, "we have a lot to learn from each other."

The students also learn about Italy's nationalized health care system, as well as other approaches prescribed by the medical community, such as alternative therapies and spa services. "These are looked on by the (U.S.) medical community with a lot of distrust. We're very medication focused," she says. "There might be other ways and other models than what we do in the U.S."

While some of the students who take the trip plan to work internationally, spending time abroad allows the students to "apply a broader sense of possibilities to whatever the work setting is," Lange says.

Foreign Nursing Students Study in the United States

Similar programs are offered in the United States for foreign students. At Seton Hall University in South Orange, New Jersey, four graduate students from The University of Applied Sciences Katholische Fachhochschule in Mainz, Germany, came for five weeks last fall as interns in the College of Nursing.

They took classes, helped with teaching and took part in a panel discussion in a leadership class taught by instructor Sherri Suozzo, their faculty coordinator. They also spent time observing patient care at U.S. hospitals. The standards and principles "transcend two countries and two cultures," says Suozzo, who herself is working on a Ph.D. focusing on the nursing faculty shortage in the United States.



Catherine Carr, associate professor of family and child nursing, meets with a local health promoter; a local health clinic in San Lucas Toliman; Catherine Carr helps midwives in rural Guatemala prepare a meal.



A Johns Hopkins University graduate nursing student works with young patients.



PHOTO COURTESY OF THE JOHNS HOPKINS SCHOOL OF NURSING

Suozzo says that the school's nursing classes focus on cultural competency and caring for those from different cultures. "My own knowledge gap fueled my interest in reaching out and learning more."

A similar experience prompted Anne Efron, the research nurse program coordinator at the Center for Tuberculosis Research at Johns Hopkins University, to return to school to get her master's in nursing and public health. Efron already had a bachelor's degree in nursing when she went to work with Doctors Without Borders at a Somali refugee camp in Kenya. "I realized I didn't know enough to be doing that full time."

Gaining Hands On International Experience

While students can sit in class and talk about things like conducting a nutritional study, nothing substitutes for doing it firsthand. Efron's experience in Kenya gave her plenty of topics to explore during her master's degree program. She also noticed that students who went straight from a bachelor's of nursing program to a master's of nursing program "were too out of touch, too idealistic. Taking real-world experience back to graduate school just made everything make so much more sense."

Although Efron had intended to return to Kenya when she completed her master's, she instead lives in Baltimore and travels to Brazil and South Africa eight to 10 weeks each year.

Another graduate who is putting her background and experience to use in the international field is Kitty MacFarlane, who works with

Afghan midwives via her position at the Centers for Disease Control and Prevention in Atlanta, though she took a quite different route. After graduating with a bachelor's of nursing from Emory, she took part in the National Health Service Corps as a pay back for her education—like the doctor in the old television series "Northern Exposure"—and was sent to Alaska with the Indian Health Service to work with the Tlingit Indians.

She later became a commissioned officer in the U.S. Public Health Service, returned to Emory for her master's in nursing and public health, then worked on migrant health issues in Oregon as pay back for her education. While MacFarlane didn't think about working overseas, she did long for a cross-cultural experience.

Eventually she joined the CDC, which is a collaborating center with the United Nations' World Health Organization on issues of reproductive health, and now leads the midwife program, where she works with Afghan midwives, who have a key role to play in infant and maternal health surveillance.

From her work across various cultures, MacFarlane has seen, "birth is so universal. Women everywhere want the same things for their babies and their families."

That empathy and understanding is crucial for nurses working both at home and abroad.

Hill, the dean at Johns Hopkins, says that spending time abroad "allows you to have the capacity of comparison. Some students think parts of Baltimore are Third World." It also helps nursing students

“appreciate the role of poverty and policy, and how we are all more alike than different.”

Johns Hopkins has an accelerated program for those who have already graduated from college with a degree in another field. Some may be returning from a stint in the Peace Corps, and Hill recalls one young woman who was working at a bank in Hawaii, and also volunteered at an HIV/AIDS clinic. She decided to become a nurse “because she was deeply imprinted by what she saw nurses doing. We see more and more of this.”

Some schools have linked up with the Peace Corps directly, offering the chance to complement a master’s degree in the health care arena with overseas service as part of the Peace Corps’ Master’s International Program. George Mason University in Fairfax, Va., is the only school in the country that offers a master’s in nursing in conjunction with the Peace Corps.

Combining Nursing and the Peace Corps

Students interested in the Master’s International Program apply to both the Peace Corps and the graduate school, where they spend a year or two in graduate school, then head overseas, where they work on their assigned Peace Corps task, as well as a project for their school.

Professor P.J. Maddox, a nurse who chairs George Mason’s Department of Health Administration and Policy, says the university linked up with the Peace Corps in 2004 because of the organization’s concerns about attracting top-quality volunteers.

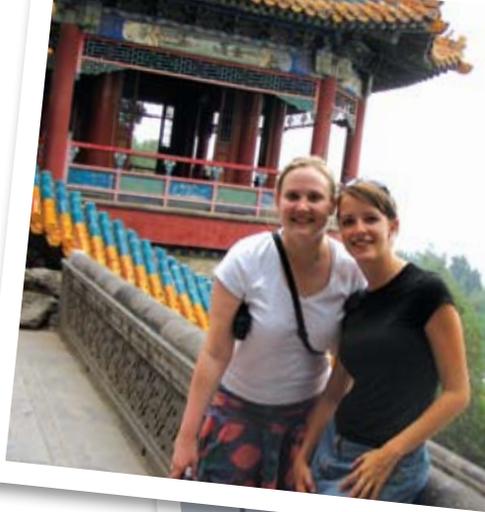
When nations want to improve everything from economic development to international relations, Maddox says, “health care is one of the critical areas where there are sincere opportunities and returns on investment.”

For example, improving women’s health helps to also improve the conditions of their families. “You do a world of good, ultimately,” Maddox says.

One faculty member who has taken that route is Portillo, of UCSF. Initially interested in Hispanic women’s health, she eventually began to focus on the topic of women and HIV/AIDS. She now is co-director of the university’s International Center for HIV/AIDS Research and Clinical Training in Nursing.

UCSF has historically been very involved in the area of capacity development of nursing education, and students often work with faculty and conduct international research abroad related to their field of specialization.

Now through the international HIV/AIDS training center, the school is working to increase the knowledge of nurses in Tanzania and South Africa to deal with the disease. For the past two years in Tanzania, the program has been working to give local nursing faculty members more insight into HIV/AIDS so they can train other nurses. In South Africa, the goal is to get nurses involved in



Jeane Garcia and Claudine Hennessey, Johns Hopkins University nursing graduate students, in China.

case management, dealing with issues such as what medications patients should take, patients’ educational needs about the disease, and their family needs.

Responsibility for directing the projects has been given to Jennifer Okonsky, who has bachelor’s and master’s degrees in nursing, and is now in the third year of her Ph.D. studies. While a master’s degree student at New York University in 2000, she participated in a community-health focused study program in South Africa that brought together students from the fields of nursing, medicine, and public health.

While Okonsky always had been interested in working internationally, and dealing with HIV/AIDS, “that program really solidified it,” she says.

As a result she linked up with Joyce Fitzpatrick, nursing professor at Case Western Reserve University in Cleveland, Ohio, who had a grant to start a bachelor’s of nursing program at Makerere University in Uganda. The program brought U.S. nurses to Uganda, and Okonsky joined up. She later moved to Malawi, and in both countries was involved in education and training surrounding HIV/AIDS.

She returned to the United States in 2006 to pursue her Ph.D., focusing on HIV medication adherence. But she couldn’t escape



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the lure of HIV/AIDS training and education. To help offset her tuition, she became involved in the program to develop curriculum to train Tanzanian nurses about the disease. With the blessing of the Tanzanian government, the goal is to train all the country's nurse educators, so they can share their expertise with nursing students.

In places like Africa, where nurses are in short supply, it's important to train them while they are still in school, rather than trying to pull them off their jobs to attend workshops, Okonsky says.

Okonsky also oversees UCSF's involvement in South Africa, working with the Foundation for Professional Development in Pretoria, trying to establish the role of the nurse case manager.

Although the work doesn't tie in directly to her Ph.D., Okonsky says, "I really enjoy working with nurses and sharing knowledge with nurses from other places."

And that sharing is crucial if the nursing profession is to advance worldwide. In some cases, U.S. faculty are sent abroad to share their expertise; in other cases, foreign students come to the United States to further their educations.

Aimin Guo, teaches medical surgical nursing Peking Union Medical College School of Nursing in China, and is currently studying in the United States as part of a collaborative program between the her school and Johns Hopkins, funded by the China Medical Board.

Guo says it's important for her to work on her Ph.D. in the United States and learn from experiences here because in China, "nursing is a young field. We need more nursing teachers."

Comparing the two countries, "the nursing philosophy is similar, especially for clinical training." And while both countries have a shortage of nurses, Guo says the situation is even worse in China. In addition, Chinese nursing students spend more time in the classroom and less time gaining hands-on learning experience.

At Johns Hopkins she is able to tap into a wealth of information and resources as she works on her Ph.D., which looks at the factors that influence the activities of chronic obstructive pulmonary disease patients in China. She also spends time talking to her U.S. counterparts about Chinese culture and nursing in China.

By having foreign graduate students study at U.S. institutions, then return home, it's a way to "stop the brain drain," says Hill "You don't have to emigrate to be able to do research."

One difficulty for foreign nurses wanting to study in the United States is their lack of a license, which limits what they can do, says Hill. While they can do clinical observation, go to meetings and

do quality improvement research, they can't take part in hands-on training. As a result, it's easier to bring in doctoral students than those at other educational levels.

U.S. students traveling abroad can run into similar restrictions, so universities need to know the laws and policies for each country to which they send students. Typically they can do basic things like do electrocardiograms and take blood pressure and case histories, but in a country like South Africa, they have to be licensed to draw blood.

Hill would ultimately like to see more flexibility in issuing licenses for foreign nurses who want to study here, and U.S. nurses who go abroad.

At Yale, graduate students from Thailand and China are mentored by faculty and sit in on classes for between four months and 12 months, Barringer says. "Our aim is to develop nursing leadership in their home countries."

At the University of Illinois at Chicago's College of Nursing, its first foreign students were admitted nearly 30 years ago, and the school has graduated about 150 since that time, most of whom were doctoral students, says Beverly McElmurry, associate dean in the Global Health Leadership Office.

Of late there has been an increase in nurses from China, and the school also tends to have a number of students from Korea and Thailand. McElmurry says her university can "track what's happening to nursing in other countries by where we have a large number of students. We're working with different countries as they get critical mass together for nursing leadership."

One of her key concerns is how health care organizations from the United States and other countries recruit staff in less-developed nations. "If someone sweeps in and takes the whole graduating class, you've just decimated the country."

For nearly a decade the school of nursing and the school of public health at the University of Illinois at Chicago have shared grants to bring in students for training from countries such as Chile, China, Malawi, and Indonesia, McElmurry says. The goal is to get them "ready for leadership roles, with specialized education. Our international students go back. I think that's a critical thing." **IE**

SUSAN LADIKA has been a journalist for more than 20 years, working in both the United States and Europe. She is now based in Tampa, Florida. Her last article for *IE* was "Limited Resources, Endless Possibilities" in the March/April 2008 issue, which was part of the ongoing "developing regions" feature series; this article was focused on higher education in East Africa.