

Addressing the Global Nursing Shortage: An International Collaboration

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Abstract

The US continues to experience a shortage of qualified faculty to teach at the baccalaureate or higher degree level (AACN, 2017) and this trend is consistent worldwide. Developing countries struggle to teach sufficient nurses to meet the health care demands of their growing and aging populations. Within Vietnam there is a shortage of nurses prepared at the baccalaureate level or higher (approximately 9%) which prevents the upward mobility of nurses into Master's or doctoral levels who are prepared to teach future nurses. A collaboration between a US and a Vietnamese university was initiated in spring 2017, culminating in 19 MSN graduates in 2019. The curriculum was designed to address quality, safety and leadership in nursing for BSN prepared, working Vietnamese nurses focused on evidence-based practice and preparation for leadership roles within health care. Pedagogical strategies were adapted to meet the unique learning needs of these students and delivered in a hybrid format. Benefits for both faculty and students included an enhanced sense of community, global connections, and positive effects on quality and safety in the Vietnamese healthcare system. The overall impact of nursing and nursing education on global health relies on the preparation of nurses for advanced roles.

Keywords: International Nursing Education, Global Educational Collaborations, Distance Learning, Global Nursing Shortage, Global Nursing Faculty Shortage

1. Introduction

The United States (US) is currently faced with a shortage of qualified faculty to teach at the baccalaureate or higher degree level (AACN, 2017). Unfortunately, this trend is consistent throughout the world as countries struggle to teach enough nurses to meet the health care demands of growing and aging populations. Nardi and Gryko (2013) recommend greater emphasis on helping individual countries expand their capacity to educate master's and doctorally prepared nurses to serve as nurse educators. By expanding the number of nurses with advanced degrees, there is the opportunity for countries to become increasingly self-sufficient and create a foundation for an enhanced educational system. This article discusses a collaborative program between a US and Vietnamese university initiated in 2017 to assist a cohort of BSN prepared Vietnamese nurses to achieve a Master of Science in Nursing (MSN).

2. Program Implementation

Within Vietnam, there is a shortage of nurses prepared at the baccalaureate level or higher. The educational status of nurses prevents their upward mobility into advanced practice roles as Master's-prepared nurses and doctorally-prepared nurses who are prepared to teach the future nurses of their respective countries.

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In 2013, there were approximately 98,000 nurses within the country of Vietnam; only 8.6% of these are prepared at universities and colleges because this type of education has only existed in Vietnam for the past 15 years (WHO, 2016).

In order to implement this international program, both institutions endeavored to create a foundation of respect and collaboration that would foster the success of such a program. The nursing program director from each institution discussed the proposal for a MSN program with the appropriate leadership at their respective schools. The proposal included a curriculum focused on safe, quality care and grounded in evidence-based practice. The coursework was implemented in Ho Chi Minh City, Vietnam, with instruction by American faculty used as on-site facilitators during each course orientation, followed by additional online instruction. A Memorandum of Understanding was developed and signed by each entity.

2.1 Strong Foundation for the Program

The strong foundation for the program was established by a history of connection and partnerships between Vietnam and American faculty due to volunteerism of many of the American faculty in Vietnam over the past 20 years. Support of both partnering universities facilitated successful contract negotiations between the two schools and established roles and responsibilities of each institution. For example, the American University committed to providing the highest level of technology for online learning and the Vietnam University provided the informational technology support to assist American faculty while teaching in country. The American University dedicated faculty workload of multiple faculty during all five semesters of implementation.

2.2 Program Delivery

Pedagogical strategies were adapted to meet the unique learning needs of these students. Technology was used to ensure the “connectedness” of students with faculty, especially when the faculty returned to the US and no longer available for face to face discussions with students. Zoom sessions became integral elements of communication as faculty used this technology for virtual office hours and didactic discussions, thesis development sessions, and thesis defense presentations.

3. Curriculum Model

The curriculum was designed to address quality, safety and leadership in nursing for BSN prepared, working Vietnamese nurses and was focused on evidence-based practice, preparation for leadership and beginning competencies in quality improvement and research. The master's curriculum included 36 credits, with a 6-credit thesis experience. Although fewer doctoral programs in the US require thesis, many worldwide programs, notably Australia and Thailand, do require research experience for PhD applicants, such as the completion of a thesis project. Several students desired to move forward into doctoral programs so the thesis requirement was important to ensure they were prepared for further education. This program was a modification of an existing program to prepare Clinical Nurse Leaders within the US University. Objectives and course descriptions were maintained per graduate curriculum standards, content outlines and assignments were individualized for application to the needs of a developing country's nursing leadership.

3.1 Curriculum Course Sequence

The research sequence, beginning with a *Theoretical Foundations for Advanced Nursing course (3 credits)*, and a foundational research course focusing on EBP, *Research and Evidence Based Practice in Nursing (3 credits)*, and *Measurement of Clinical Outcomes (3 credits)* were delivered similarly to the United States versions in terms of assignments. An education focused course, *Teaching Strategies for Practice and Academic Settings (3 credits)*, required students to develop and implement a teaching project. A combined clinically focused course, *Integrative Clinical Concepts (4 credits)* incorporated elements of the three P's (Pathophysiology, Pharmacology and Advanced Physical Assessment) with case-based, active learning methods applied to clinical patient care. Finally, three leadership courses, *Leadership and Nursing Issues (3 credits)*, *Population Health (3 credits)* and *Managing the Care Environment (4 credits)* focused on preparation of the emerging nursing leader in terms of leadership approaches, professional issues, population health issues and interventions, and quality and safety issues in various healthcare settings.

3.2 Thesis Projects

For the six credit master's thesis, quality improvement projects were the most frequent type of project selected, due to the fact that many hospitals in large cities had, or were seeking, Joint Commission International designation. A few theses were more traditional discovery research, such as attitudes of students regarding the clinical learning environment, learning needs of Type II diabetic patients, or knowledge regarding standards of practice regarding eye care in the Intensive Care Unit. All students had to comply with regulations regarding Institutional Review, through the University's IRB process.

All had to procure approval from the setting where the study was to be conducted. Most students had to obtain permission to use English or other language instruments, translate and back translate these, and evaluate validity and reliability as there were few original instruments available in Vietnamese.

4. Evidence Based Teaching for the International Collaboration

In choosing the best approach for delivery of the master's program, pedagogical and pragmatic considerations shaped decision making. Of necessity, moderate use of distance technology was needed because the degree was to be granted by the US University, and the location of the students, all working nurses, with families, was over 8,000 miles away. Online and hybrid approaches have become increasingly common within the US as approximately 32% of all students took at least one distance course in Fall, 2016, an increase of about 6 % from past reports. Further, one in seven higher education students learned exclusively online (Seaman, Allen, & Seaman, 2018). Nurse educators have noted that the focus and venue for learning has radically shifted toward online learning, which provides more independence for the learner and transforms the role of the teacher.

Skiba (2016) provides a review of the state of online education, concluding that it is essential that nursing academia provide "accessible and affordable formats most suitable to the learner" (p. 245). A wealth of evidence supports that online and hybrid learning outcomes were the same (about 50%) or superior (35%) to face-to-face instruction from the perspective of Chief Academic Officers surveyed by Seaman et al. (2018) and the Department of Education (2012). However, educators agree that it is imperative to use best practices (Skiba, 2016) in facilitating learning in an online course, and that teaching strategies need modification to increase the students' success.

5. Creating a Community of Learning

Although every faculty member travelled to Vietnam for the initial meetings of each course and created a foundational understanding of core concepts for the class, it was essential that strategies were employed establishing a strong community of learning for faculty and students. According to Sung and Mayer (2012), the timeliness of instructor feedback, allowing students to discuss their own beliefs and sharing personal experiences, creates an environment in which students perceive social presence. In such a setting, students begin to feel safe to express their ideas and learning is maximized. Establishing a community of learning in online course delivery contributes to higher student satisfaction, successful course completion and retention in programs (Zhan & Mei, 2013).

6. Faculty Preparation

Despite the growth of online learning, faculty acceptance and value of online learning has remained somewhat equivocal (Seaman et al., 2018). These authors note that about one third of the chief academic officers surveyed perceive that their institutional faculty do not accept the legitimacy of online learning. For this collaboration, all involved faculty were willing participants in the project, and anticipated that they would encounter challenges in delivering the course content online. All faculty had prior experience in online teaching, which was essential for overcoming challenges as they presented themselves. The choice of a hybrid approach, with an intensive course introduction via an in-country faculty visit, followed by online instruction for the remainder of the semester, offered a reasonable compromise. Consistent with the theoretical basis for other graduate level online programs both nationally, and within the SON, constructivist strategies were utilized. All faculty used Zoom synchronous sessions across courses; there were group discussions within assigned teams as well as other group assignments such as group WIKIs, completion of worksheets, peer reviews and presentations; there were also individual assignments such as asynchronous discussion forum posts, papers and presentations (PowerPoint), and finally the thesis proposal and final defenses.

7. Celebrating Cultural Differences

As faculty and students navigated through the various semesters of the program, it was essential that all involved were appreciative of the cultural differences inherent between the United States and Vietnam. Notably, faculty needed to be aware of necessary changes to the course schedule based on the Vietnam celebration of Tet Nguyen Dan (Tet). This holiday, which lasts seven to nine days, is typically celebrated in February, and allows Vietnam residents to express respect for ancestors and welcome in the lunar New Year. During this time, students were not available for class participation. Another poignant difference was the distinction between the emphasis on individual success within American culture, compared to the respect for community that is strong in Vietnam culture. Because of this communal focus, students were eager to work in groups for projects and presentations, but posed a challenge for faculty, who were focused on evaluating individual understanding and success as the students progressed through coursework. The emphasis on kinship also posed a perplexing situation as faculty sought to teach students to confront widespread healthcare issues and ensure that patient safety and quality of care were forefront in their priorities.

Often, patient advocacy means that nurses must oppose individuals in positions of higher authority, so many discussions and role playing opportunities focused on the idea of questioning authority and the idea that disagreement does not necessarily mean discord.

8. Challenges and Benefits

8.1 Challenges

The English proficiency of students created challenges for effective learning. Although each of the students were required to take the TOEFL exam prior to application and acceptance to the university, the “acceptable” score for university admissions did not guarantee proficiency. Initial lectures and discussions were conducted in English, but students needed consistent support and translation to understanding difficult concepts. These early struggles to learn in English also provided opportunities to further enhance relationships as students assisted one another to learn concepts and fully comprehend new material. Students quickly learned to be comfortable asking questions and clarifying with one another what they were learning and how it applied to their health care system.

Another challenge encountered by faculty during the implementation of the program were infrastructure issues of the US University. Specifically, there were challenges faced as faculty oriented students and worked to have them register for courses for the first time. The assistance of the Registrar’s office was essential to allow students to overcome system issues that confounded registration and continued enrollment within the university. Informational Technology played an integral role in working with students and faculty; assisting with internet issues, creating solutions to overcome firewalls, and ensuring that Zoom technology allowed for effective communication to overcome the distance between students and faculty were all essential. It is noteworthy that the two countries have a thirteen hour time difference that originally created challenges for both students and faculty which was overcome by creativity and flexibility on the part of all parties involved.

8.2 Benefits

While the growth of online programs has increased the opportunity for online collaborations such as this one, the effectiveness of such programs can be undermined by student attrition. This was an initial concern of the faculty involved in this program, and considerable effort was made to ensure that students progressed toward program completion. This international collaboration was deemed highly successful with 100% retention of students; of the 19 students who started the program in 2017, all graduated with their Master of Science in Nursing in 2020.

Another element of success seen within the program was the development of relationships between the nurses of these two countries. Developing these connections is consistent with the global visions for nursing and nursing education proposed by professional organizations (National League for Nursing, 2017). Although the cultural norms of both Vietnam and the United States are quite different, individuals were able to recognize and appreciate the differences and similarities found among the faculty and students participating in this program, forming lasting bonds. Many of the Vietnam students were able to travel to the United States to participate in graduation festivities, and one particular student stated that the experience was “life changing”. The faculty involved in this particular program would agree that participating in this collaboration created new opportunities for expanding their skills as a nurse educator, but that the opportunity to create relationships with their Vietnam counterparts was a unique and rewarding experience.

9. Outcomes & Conclusion

The reality of the looming nursing shortage throughout the world cannot be ignored. Global health relies on the continued education and advancement of the profession of nursing. This particular international collaboration was created with the intention of increasing the number of nurses in Vietnam with Master of Science degrees in order that they may continue to progress toward doctoral education. Greater numbers of nurses prepared with advanced degrees can perpetuate a foundation of strong nursing education within the country. The original goals of improving educational opportunities for international students were firmly realized, but the relationships and possibilities created through this partnership will last a lifetime.

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