Invited Article

Improving Global Nursing Education

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Citation:

Abstract

Nurses are on the front line at the time of disasters. Training nurses from a global perspective to act at their local level can make a significant difference. This paper discusses development of innovative global educational methodology that is at no cost and easy access to nursing educators around the globe. This is a promising tool for training nursing students worldwide in addressing sudden events that occur on a large scale and affect a significant number of populations.

Keywords: nurses, global health, training, disaster, education, knowledge, nursing, share, training
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Sharing Knowledge and Lectures

Lectures serve as a platform to quickly disseminate accurate and up-to-date information about a disaster, outbreak or a global epidemic to educators and the public during or just soon after the event (Chotani et al. 2003). We have developed a new approach to training for disasters which likely could be readily applied for disaster mitigation. The concept is simple. Most disasters and disaster mitigation do not occur all at once. Thus the Tsunami took several days to reach its maximum impact, flooding may take weeks; a hurricane is seen far down the coasts, etc. Many of these prodromes occur hours, if not days or weeks before the event. Global SARs took weeks before it became manifest worldwide, as did H1N1. Hurricanes are found in the Caribbean days before they come to land. It is during this time that materials can be developed and provided to nurses and nursing schools worldwide. Here we describe the Supercourse, and our Disaster Nursing Supercourse.

Supercourse: The Supercourse began with the building of a Global Health Network of experts interested in Global Health and Prevention. Currently the network has 64,000 faculty from 174 countries. The Network is the most important aspect of the Supercourse as it is a now perhaps the largest network in global health, with diverse interests. The concept is that it is better to have an expert network before the next earthquake in California, rather than to try and cobble it together afterwards. The Global Health Network has worked together to produce the Supercourse. The Supercourse represents a collection of 3428 PowerPoint lectures collected from the network. These lectures are made available for free from an Open Source Lecture Library (www.pitt.edu/~super1/). Without good, up-to-date content it is impossible to be a good teacher. The Supercourse empowers teachers by giving them access to some of the best PowerPoint lectures on Global Health and Prevention. A teacher in Jordan can use 9 slides from an expert in Canada, 4 from an epidemiologist in Cairo, and 7 from an expert in China to construct their own lectures. Lectures have been provided to us from Nobel Prize winners, the head of the NIH, ministers of health, etc. Last year the Supercourse taught over one million students. The lectures are some of the highest rated on the web today.

Just-in-Time Lectures: Shortly after the building of the Supercourse we realized that it had exceptional potential in the area of disasters. We had the idea if a disaster were to occur we could rapidly develop a network of people from out network interested in
helping and to develop a Just-in-Time (JIT) lecture. One of our first JIT lectures was developed by Ali Aldaran from Tehran, an expert in disasters. Iran has many earthquakes; therefore immediately after the Bam Earthquake he developed a lecture on “what is an earthquake”. We wanted to especially reach students to allay fears. We were able to develop this lecture in only a week.

The second major event was the JIT lecture surrounding the Tsunami. The Tsunami struck a few days after Christmas. We contacted our large network who got us in touch with 30 leading Meteorologists, Oceanographers, and Seismologists from across the world. They helped us to develop a JIT lecture on Tsunamis. This lecture was very extensively used, with over 200,000 educators using. We could watch this lecture go around the world as so many people knew nothing about a Tsunami, but the teachers needed to discuss this in their classroom. The lecture was placed in most of the medical libraries throughout Asia.

The Pakistan Earthquake took an important turn. As with the Bam Earthquake and the Tsunami, we prepared a Pakistan Earthquake lecture. We were particularly concerned about the children of Pakistan as many schools panicked on top of students, and Pakistani Television showed gory pictures of students with crushed heads. Many students were in fear of going to school. We prepared the lecture and it was taught to many thousands of students throughout the region. The Pakistani network consists of 630 people interested in Global health and Prevention. We were able to recruit 40 members who had training in public health and we referred them to the World Health Organization mission team in Pakistan and to the Minister of Health. Instead of a JIT lecture this was a JIT Pakistani network.

The fourth event was Hurricane Rita which crashed into Texas on Sept. 24. We had just finished a lecture for the Kristina, on Sept. 20, but then saw Rita starting to pick up steam outside of Cuba. We first emailed to 300 faculty in Texas who were on our list asking them to distribute a file of our lecture. One of the members on the list had all the Emails of the K-16 schools in Texas, and by Sept 22, the list was distributed to every school in Texas, as well as to every state epidemiologist in the US. On Sept 23 we were able to mail the lecture to 42 of the state curriculum directors, many of whom distributed the lecture to all the schools in their states. On Sept. 24 Rita struck land, and did a large amount of damage. The Rita effort showed that with certain disasters, we can deliver lectures before damage is done. The lectures were very important to educate students and faculty.

The final disaster was very recent, H1N1. Within a day after the first case in Mexico, Dr. Padilla contacted us about building a JIT H1N1 lecture. Dr. Chotani took the lead in developing the lecture within 2 days. We then recruited individuals from our network and it was updated 10 times in just 8 days in 10 different languages including Arabic, French, and Russian. This lecture received a remarkable 50,000 visits in only 8 days, which is equivalent to over 2 million visits per year. Moreover, Schools of nursing in Jordan, Egypt, and Lebanon found these lecture beneficial in training nursing students.
All the lectures for our JIT series were heavily used both at “ground zero”, within the country to which the disaster occurred and worldwide. In addition, Google Page Rankings are the most important metric of impact on the web. Almost all of our JIT lectures achieve page rankings in the top 10; many of them are number 1 out of, in some cases, over 200,000.

Disaster Nursing Supercourse

The population of the world is expected to reach 7 billion by the year 2012. Developing a global partnership for development is one of the Millennium goals (United Nations 2008). Nurses form the largest proportions of health care providers with 11 million nurses around the world (International Council of Nurses 2000). Nurses contribution to health of individuals and populations is well established. Not many nursing schools worldwide have established programs in disaster preparedness. In general, however, these programs are limited (Bonnin 2002; Ireland et al. 2006; Jones 2009; Pattillo 2003; Sanders-Jennings 2005; Seed et al. 2004). The training has to be general as there are millions of different types of disasters ranging from SARs, to Nuclear, to fires, to floods, tornados, etc. If one wanted to have extensive training across a wide battery of disasters, this would likely consume way too many nursing school classes. Clearly there needs to be some training, but there needs to be a balance.

The public often finds it easy to communicate with nurses in regards to seeking advice or learning about their health conditions because they spend quality time with patients and their families to ensure that health needs are met. However, when it comes to disasters although nurses form the backbone of the health care system, they are not trained to work under special circumstances, such as disasters. Nursing schools provide little instructions on disasters or emergencies (Garfield, & AlWard 2008); whether they were manmade or natural disasters. In the World Health Organization Sixty-second Assembly in May 2009, pandemic and public health was one of the main issues discussed. Therefore, it was imperative to have a global instructional methodology developed to serve as a tool for nurse educators to improve nursing education. It was a natural step to extend another arm from supercourse and call it Disaster Nursing Supercourse.

The main objectives of any disaster training are to save lives and provide support to lessen the human suffering. Methodological mobilization of the frontline health care workers, nurses, can achieve the desired outcomes. Training nurses requires having competent instructors who can teach nurses currently practicing as well as nursing students.
Disasters are global phenomena. Therefore, there is a need to establish a global model in disaster nursing. This model can serve as a guide for each country and at the same time can be customized to fit with the disasters that are unique to that country. The principles are the same but the means differ based on the disruptive event, needs, infrastructure, vulnerability of populations, etc. In response to the global need for disaster nursing, the World Health Organization (WHO) proposed a list of core competencies in disaster nursing and a curriculum assessment tool (World Health Organization 2008). These competencies are: ethical and legal issues, and decision making; care principles; nursing care; needs assessment and planning; safety and security; communication and interpersonal relationships; public health; and health care systems and policies in emergency situations.

Preparedness to handle disasters requires training faculty using a multidisciplinary approach (World Health Organization 2006). Education is empowerment. Many nursing schools in the developing world are either outdated with the subject matter taught in classrooms due to system or financial barriers such as limited access to latest evidence based science or language. Information can be outdated in days especially in the case of disasters where time is a crucial element in limiting consequences of global disasters and the Internet is instrumental in fulfilling this gap. Nurses around the world can have access to free, reliable, accurate, friendly formatted lectures prepared by experts that can be updated around the clock.

Therefore, it is timely and relevant to build a Disaster Nursing Supercourse. The first step was developing a universal lecture of high quality from the nursing perspective. The lecture was called Disaster Nursing Golden Lecture (http://www.pitt.edu/~super1/lecture/lec35051/index.htm). Initial responses to the lecture indicated great interest from different schools of nursing in adopting the lecture as well as the World Health Organization. This lecture is being customizable for local circumstances, and in different languages.

Next steps

Chronic diseases are the epidemic of this era; 80% of deaths related to these diseases occur in developing countries (WHO 2005). There is an urgent need to train nurses on chronic disease prevention and management. Nursing curricula is no different than that of the curricula for other health professionals offering minimal training on effective self management of chronic diseases. Therefore, nursing supercourse is about to change this by offering lectures that can be customized into mini short courses to meet the needs of nurses. The lectures will equip nurses with the skills necessary to empower people with chronic diseases and have them be actively involved in the effective management of their medical conditions. Also the lectures will emphasize the role of adopting healthy lifestyles on productivity and healthy living.
Examine the Disaster Nursing Golden Lecture at
http://www.pitt.edu/~super1/lecture/lec35051/index.htm
and watch for upcoming lectures.
References


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