EXPERIENCE EXCHANGE

Global nursing partnerships

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Abstract

Two nursing faculty from the United States and one from South Africa established a partnership to address a mandate of the University of Johannesburg calling for the integration of service-learning and community engagement into all programs at the university, including those in the nursing department. In descriptions of the faculty partnership and 2012 Service-Learning Conference, this article highlights the challenges that emerged when developing an undergraduate nursing service-learning and community engagement program for a vastly diverse culture with extensive obstacles to communication and collaboration. The outcomes of the Conference allowed for the exchange of knowledge and skills in service-learning pedagogy to advance the civic, personal, and social development of nursing faculty and students in South Africa’s diverse culture and to foster collaboration on improving healthcare for vulnerable populations.

Key words

Nursing partnerships, Service-learning, Community and civic engagement, Advocacy

Introduction

This article describes the steps taken in 2012 to develop a service-learning program for the undergraduate nursing program of the University of Johannesburg, in response to a mandate of the South African Council on Higher Education to address the integration of community engagement into the curriculum. The three-day Conference on Global Service Learning was developed by the authors, nursing faculty with expertise in community engagement, to address this mandate and to offer effective approaches for meeting the healthcare and social needs of vastly diverse populations, such as those in South Africa.

Three nursing faculty (two from the United States and one from South Africa) developed a partnership to exchange knowledge and skills in service-learning pedagogy to advance civic, personal, and social development of both nursing faculty and students. There was a strong rationale for developing this partnership. Nurse faculty partnerships and professional networks create unique opportunities that allow for a collective voice to reduce international inequality (both social and economic) as well as reduce disease and health disparities. Meleis and Glickman note that being connected is empowering and having a collective voice is transforming [¹]. Having a collective voice helps nurses share resources and address critical societal healthcare needs. As a result of the 2012 Global Service Learning Conference, the School of
Nursing at the University of Johannesburg began to integrate the principles of service-learning and community engagement into the undergraduate nursing curriculum.

**Background**

In 2012, the South African Council on Higher Education Quality Committee (a permanent committee of Council on Higher Education responsible for accrediting and promoting quality assurance in higher education in South Africa), released a mandate to integrate community engagement into the curriculum, saying [2]:

> One of the most important social responsibilities of educational institutions in a developing country such as South Africa is a commitment to support community development in a practical and workable way, aiming to provide some relief from inequality, poverty and social problems. Without decrying the value of the involvement of universities and their staff and students in broad social charities, it is the utilization of their intellectual capital to improve the quality of life of the communities that they serve that defines the unique contribution that universities make.

The University of Johannesburg subsequently encouraged nursing faculty to meet new standards for community engagement by providing adequate, appropriate resources through institutional policies, systems, and strategies. The University’s Community Engagement Strategic Vision [3] sought to foster and develop meaningful partnerships for community engagement with these guidelines:

1. At least 10% of all academic programs will incorporate service-learning efficiently and cost effectively in their curricula by 2020 from the current base of 4%.
2. Recognize and implement service-learning as the university’s third core academic function.
3. Address the developmental needs of communities by providing access to the university’s intellectual capital.
4. Implementation of these strategic thrusts should be successfully implemented by year 2020.

However, despite the commitment of the 16-member nursing faculty at the University of Johannesburg to learn the pedagogical approaches of community engagement and service-learning, these concepts have not been well understood. Several faculty members voiced concern that they lacked the essential competencies in teaching and scholarship on concept of service-learning. Although most faculty members have been involved with experiential learning and community nursing, they were not directly involved in service-learning as pedagogy. Some faculty members could not differentiate among service-learning, community engagement, civic engagement and social advocacy.

To help the School of Nursing at the University of Johannesburg fulfill the goal of recognizing and implementing service-learning as the university’s third core academic function and giving communities access to the University’s intellectual capital, the authors developed a Global Service-Learning Conference for faculty, staff and students. Prior to its implementation, the Conference’s outcomes were to be based on factors accepted by the institutional and administrative staff, faculty, and students:

1. The commitment of institutional support to promote the integration of community engagement and service-learning into nursing program, including the financial costs.
2. The faculty’s commitment to learning the core principles, theory and practice of service-learning, community and civic engagement; as well as accepting responsibility to make the necessary curricular changes to integrate service-learning into the nursing program; and identifying the appropriate learning objectives and outcomes.
3) The student’s commitment to be active and engaged partners in planning and creating academic-community agreements with community based agencies to fill an identified health care need.

To assist the University in meeting the requirement that faculty address the new mandate and improve their understanding of the impact of service-learning on student learning, a three-day Global Service-Learning Conference was held in Johannesburg in the summer of 2012 to provide a comprehensive overview of the principles, pedagogical practices of service-learning and community engagement, and how to develop and form sustainable academic-community partnerships. The objectives of the Conference were:

1) To examine global service-learning and community engagement as an experienced-based approach to education and learning.

2) To develop advanced knowledge and skills to better understand the impact of service-learning on student understanding of social issues, personal insight and cognitive development.

3) To analyze community engagement practices to promote academic-community partnerships to increase social justice and civic responsibility among nursing students.

4) To promote the exchange of ideas for building and sustaining campus-community partnerships through scholarship, education, practice and research.

Service-learning has been described as a curricular strategy for preparing nursing students for their roles as nurses and citizens [4]. It is a means of preparing the nursing workforce to work with and within communities as partners, while promoting the profession’s goals to promote health, prevent illness, restore health and alleviate suffering [5].

To foster civic and social responsibility within the profession, nursing students must be exposed to these responsibilities in their formative education [6]. One way to promote the core values of nursing—human dignity, autonomy, and altruism --- is to promote community engagement and partnerships with diverse communities. Nursing faculty can foster civic and social responsibility in their undergraduates by creating service activities that serve the broader society [7]. Service-learning and community engagement contribute to students’ acquisition of the knowledge and skills that are integral to a nurse’s professional identity and practice, and may also help students understand how social injustice affects the well-being of individuals and communities.

**Literature review**

Service-learning may be defined as a pedagogical approach that offers students a planned educational experience that is targeted to meet the needs of a community [8]. It includes an academic component with assigned readings, discussions, research and written assignments that are focused on the sources, conditions and solutions to problems that the service activity is attempting to address. The United States National and Community Service Act of 1990 defines service-learning as a learning experience in which students actively participate in service experiences that meet a real community need: the services enhance what is taught in the classroom and are integrated into the curriculum [9]. Students are given structured time for reflection to think, talk or write about what they did and observed during the actual service experience [10]. Reflection helps the students to understand how they have been affected by the experience. In this process, students may become active contributors to their own education through meaningful and explicit learning experiences [10].

Service-learning is not fieldwork or an internship placement. In fieldwork, the student observes or conducts research without providing direct service to the community. Fieldwork is a form of experiential learning in which students go into a community to gather information but they are not involved in determining the nature or need for the research [11]. An internship placement provides students with opportunities to develop professional skills. The focus of the internship is on learning the skills, attributes, and characteristics to function within the scope of the position or role of the professional
performing the work and observing the culture of the workplace. In all the above-stated cases: service-learning, fieldwork, and internships, students are placed in a community. These placements occur because institutions of higher education recognize that academic education goes beyond the traditional classroom setting to the greater community. The link between the classroom and community creates a collaboration known as community engagement.

Community engagement describes collaboration between institutions of higher education and their larger communities (local, regional, state, national and global) for a mutually beneficial exchange of knowledge and resources in the context of a partnership and reciprocity \(^{[12]} \). It is a process of inclusive participation that supports mutual respect of values, strategies, and actions for authentic partnerships of people affiliated with or self-identified by geographic proximity, special interest, or similar situations to address issues affecting the well-being of the community focus. The purpose of community engagement is the creation of a partnership between a college or university to share its knowledge and resources with those of the public and private sectors \(^{[13]} \). These shared resources enrich the scholarship, research and creative activity; enhance curriculum, teaching and learning; prepare educated, engaged citizens; strengthen democratic values and civic responsibility; address critical societal issues; and contribute to the public good.

Nursing is a public good. Society calls upon the profession to play a critical role in the advancement of the health of the public. It is this commitment to societal well-being and promise that nursing has made to meet the demands for health services for all citizens including, providing care and nurturing to the well and to the sick as individuals, families, communities, and populations \(^{[14]} \). This social responsibility to serve society ensures that nurses promote social justice. Social justice is the equitable distribution of benefits and burdens to society \(^{[15]} \). Through service-learning and community engagement, students observe and see the conditions around them and what is actually available to their patients. They learn that not all social groups are treated equally in society.

As nursing students become engaged in promoting and participating in improving the health of local communities, they learn that nursing care involves social justice. Therefore, outcomes of community engagement and service-learning allow for greater awareness of the social, economic, and political issues confronting communities as well as understanding the needs and the requirements of the identified community. To educate nursing students to become effective citizens, faculty must extend beyond the traditional classroom content and into experiential learning. This calls for faculty to actively seek community partnerships that improve healthcare for the most vulnerable and neediest citizens. When academic course objectives are aligned with community priorities, students have real opportunities for social advocacy and activism. Advocacy addresses problems or issues in need of a solution \(^{[16]} \). The advocacy process involves learning to effectively identify the issue(s), develop goals, and a strategy to address the issue(s). By using advocacy as a tool to exchange knowledge and resources in a context of a partnership, faculty and students become civicly engaged. Civic engagement is acting upon a heightened sense of responsibility to one’s communities, developing a civic sense of responsibility and participating in building a civic society for positive social change \(^{[17]} \). Global service-learning, community and civic engagement provide faculty and nursing students experiences to serve communities and populations in meaningful ways thereby reducing health disparities and social injustice. Through international academic-community partnerships, students develop an appreciation and understanding of the cultural and health care contexts in which their nursing skills are needed while learning about the role of the nurse as citizen and social advocate \(^{[18]} \).

The global Service-Learning (SL) conference

Over eighty faculty, staff, students and clinicians from local schools and health care institutions in Johannesburg attended the Conference, which provided interactive and narrative writing activities to present service-learning pedagogy as well as ways to formulate community-campus partnerships and increase community engagement through social responsibility and advocacy.
The Conference also addressed topics of culture, communication, and learning needs and styles of diverse communities. During the Conference ample time was provided to ask thought-provoking questions and held interactive conversations and reflective exercises. For example, small groups of 6-8 participants were formed and asked to identify future potential community partnerships, complete team building exercises, practice social advocacy skills, and develop curriculum strategies to integrating service-learning and community engagement into the curriculum.

Group participants reported on their assigned activities and shared personal stories about language and cultural barriers, communication challenges, and the need for greater collaboration between academic institutions and community partners. It was clear from the participants that they gained insights and ideas about how to integrate community engagement and service-learning into the nursing curriculum. For example, faculty recognized the need to expand their understanding and knowledge in service-learning theory, practice and research as well as recognizing the impending challenges of integrating community engagement and service-learning into the nursing curriculum and clinical practice.

**Challenges of service-learning and community engagement**

At the Global Service-Learning Conference, faculty also expressed a need for a better understanding and appreciation of cultural competence, mechanisms to increase communication effectiveness, and for expanded collaboration among academic and community partners; without these capabilities, it would be a significant challenge to overcome the barriers of service-learning and community engagements as mandated by the South African Council on Higher Education Quality Committee. Campinaha-Bacote says that cultural competence is a process that takes place over time and consists of the integration of cultural awareness, cultural knowledge, cultural encounters, and cultural desires. Nurse faculty all agreed that they must take the time to understand and improve their own levels of cultural competence and communication ability before they expand their collaboration with community partners.

During the conference, participants examined and explored their own cultural and professional beliefs and values through narrative reflective writing and shared personal stories. To become culturally aware, one must reflect on one’s biases, prejudices and assumptions about people who are different, and then avoid imposing one’s beliefs, values, and expectations on others. In an attempt to truly be culturally aware, there must be balance between power and mutual respect that fosters productive interactions. By sharing personal stories about cultural and personal beliefs, participants identified their own and others language and cultural barriers.

Campinaha-Bacote suggests that cultural knowledge is a process that includes learning the world-views of other cultures and ethnic groups. Cultural exchanges between the nurse faculty of the United States and South Africa along with participants at the Conference provided for meaningful dialogue on culture, communication, and collaboration. Nurses must be committed to the process of becoming culturally competent; it is impossible to achieve cultural competence without cultural awareness and knowledge. Understanding another culture’s experiences and expressions affects one’s behavior. It requires a close alignment between transparency and truth-telling, and a common language by which people can strive to understand others’ needs, this is especially true when providing health and nursing care to others.

During the conference dialogue it became apparent that nurse faculty and students faced great challenges when caring for individuals who do not speak or understand the indigenous language. South Africa has eleven official spoken languages; there is no one common language for the entire country. Many residents do not speak English and have great difficulty when they seek healthcare services, especially in rural communities with a shortage of interpreters. Sometimes the only available interpreter is a client’s family member or a community resident. To provide appropriate community healthcare services, nurse faculty must identify and cultivate relationships with local interpreters so that they may address complex community health care needs and provide appropriate, patient-centered care. Nurse faculty can learn, listen, coach, experiment and network with one another and community partners to become familiar with indigenous languages and cultural practices. For example, community partners and local residents can be invited to campus and provide programs so
that faculty and students can learn the local language and practices of the community residents served by the school of nursing.

When nurse faculty seek to build academic-community partnerships for expanded community engagement, they promote greater cultural awareness. For example, there are several South African communities where traditional healers have the “power” to influence and promote healing remedies and services. Nurse faculty must forge relationship with local healers so that residents and health professionals can work together to overcome language and cultural barriers. By forging partnerships with local healers, nurses may gain greater access to vulnerable communities. This will benefit all, especially to communities whose belief in spiritual healing supersedes their faith in western medicine. Thus direct interaction with other cultures may clarify or change beliefs, attitudes and behaviors about healing and health.

**One year later: Service-learning integration**

One year after the **GLOBAL SERVICE-LEARNING (SL) CONFERENCE**, faculty and students have developed and implemented community engagement and service-learning into the nursing curriculum. The school leadership, faculty, staff, nursing students and selected community partners have agreed to participate in a cross roads programme which encourages and empowers all to be accountable and responsible to serve society in the spirit of UBUNTU. This program has allowed for the formation of two new community partners, one in Krugersdorp (Johannesburg West) and another in community centre, Tarlton, where a nursing faculty member, Primary Health lecturer, provides daily routine health screening and services to increase health access and care. There are future plans for community participatory research in the area of moral regeneration that will include high school students. Additionally, the following two programs have been established within the school of nursing:

1) All second year nursing students will be assigned to the Joe Slovo Squatter Camp. This will provide on-going health education programmes and referrals. This camp will be supported and served by a committee comprised of a community leader, a senior member from the camp, a professional Nurse from Westbury Clinic and a nurse faculty member as a co-coordinator of the programme.

2) All third year nursing students have established a relationship with an identified community and staff members around specific with health related issue, such as a current Anti TB campaign.

**Nursing implications**

By engaging nursing students in everyday, real-life social and health problems, and by fostering global nurse faculty partnerships and professional networks, nursing faculty may be able to narrow potential misunderstandings among healthcare professionals and their patients. The Global Service-Learning Conference created a unique opportunity for nurse faculty from South Africa and the United States to share ideas and information. While sharing knowledge and strategies about community engagement and service-learning, participants gained new knowledge as well as strategies to address inequities and inefficiencies of healthcare delivery systems in the countries they represent.

Service-learning offers students diverse opportunities to deliver much-needed nursing and health care services while also offering context-specific practice in learning new skills, such as enhanced community profiling, health promotion skills, and cultural competence, as well as a sense of social responsibility. Service-learning allows time for structured reflection while fostering students’ education on ways to improve public and individual health, and such broad community outcomes as social justice. Structured reflection gives students time to think, talk, or write about what they have seen and done during the actual service activity [10].
Conclusion

The Council on Higher Education of South Africa recognizes that service-learning and community engagement are meaningful ways to foster human dignity and human rights and to give communities access to the intellectual capital of the university. In carrying out the mandate of the Council on Higher Education, nurse faculty members are well-positioned to educate a highly qualified nursing workforce whose principles reflect the core values of a caring profession: respect for human dignity, integrity, humility, and social justice for all. The authors, three nursing faculty from the United States and South Africa, developed a Conference to exchange knowledge and skills in service-learning pedagogy to advance the civic, personal, and social development of nursing faculty and students in South Africa’s diverse culture and to foster collaboration on improving healthcare for vulnerable populations.

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