



A phenomenological study of student nurses volunteering in Nepal: Have their experiences altered their understanding of nursing?



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ABSTRACT

Background: Nepal is a small country in the central Himalayas, with approximately 26.5 million inhabitants. Student Volunteer Placements International (SVPI) organise volunteer experiences with the Children's Welfare Organisation in Nepal (CWON) in the Chitwan region of Nepal. These programs focus on the health of communities of this region. This research was undertaken to uncover the experiences of student nurses (participants) who volunteered as health care workers in Nepal. More specifically, the research explores the effect that the experience of delivering health care within the context of a low socio-economic setting had on the participant's perceptions of nursing.

Objectives: To gain an insight into how (if at all) the professional identity of student nurses had been impacted through volunteering as health care workers in Nepal.

Method: The research used the phenomenological paradigm. Five student nurses, who had volunteered in Nepal as healthcare workers and participated in the CWON/SVPI program for three week intervals, were interviewed. These semi-structured one on one interviews were recorded, the audio was transcribed and analysed using thematic analysis.

Results: From the research five emergent themes were derived from the participant's experiences. Participants reported that the experience of delivering healthcare in the context of a developing country forced them to get creative and 'think outside the box'.

Conclusion: Engaging in overseas volunteering assisted student nurses to reconnect with their empathy and compassion, and explore the humanistic and interpersonal nature of nursing rather than the technical skill based components of nursing identity. Additionally, the participants were forced to enact their nursing skills to the very boundaries of their capabilities and to be more innovative.

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1. Introduction

For many nurses, including students, their focus has primarily been directed toward responding to disease and injury. According to the [Australian Government Department of Health and Ageing \(2009\)](#), training and education of health professionals has traditionally been structured around the illness model and has therefore been mostly dependent on acute care facilities for clinical training. Additionally, there is still a heavy focus on preparing nursing students to work in hospitals, which could be argued, does not reflect the breadth of nursing practice and hence nursing identities.

[Frank, Adams, Edelstein, Speakman, and Shelton \(2005\)](#) suggest that nursing students fail to professionally identify with performing community based health roles and consequently prioritise hospital based professional identities; believing the skills they acquire in these settings have more relevance to nursing. Furthermore, the authors point out that most nursing programs place students in acute care settings, despite an increasing policy emphasis toward health care being provided in the community. In contrast, [Erickson \(2004\)](#) and [Lashley \(2007\)](#) concur that a positive, long-term clinical experience in the community is vital to increasing the likelihood that nursing students will choose to practice in community health care settings. [Nies and McEwen \(2007\)](#) contend that preventative care, health promotion and restorative care are necessary to combat escalating rates of chronic disease, again suggesting that a crowded undergraduate nurse curriculum may be struggling to prepare a workforce ready for future community needs. Indeed, the significance of promoting primary and public health care and

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health promotion and illness prevention has strong congruence with the aims of the Health Workforce Australia (HWA) plan to reform the future health care workforce of Australia to meet the current and emerging needs of the population (HWA, 2011). Of interest is whether the population needs identified by HWA (2011) is focusing more on the location of care rather than the skills underpinning that care. Maben and Griffiths (2008) in their patient based study identified that empathy and compassion were prioritized as underpinning good nursing care.

1.1. Background of the research

Nepal is a small country in the central Himalayas, with a population of 26.5 million (Government of Nepal, Ministry of Health and Population, Central Bureau of Statistics National Planning Commission Secretariat, 2011). According to WHO (2004), 38% of the Nepalese population live below the poverty line, and 90% of the poor are living within rural areas. Nepal is still a very traditional country, with strong religious, social and family ties. They uphold a caste system, with the poorest people belonging to the lowest caste group living in the mountainous regions of Nepal (WHO, 2004). These issues need to be addressed more effectively with a view to accelerating policies into action to improve health outcomes for all in rural and urban areas in an equitable and sustainable manner (WHO, 2007). Addressing the determinants of health is necessary to improve the health of a population. Ways of doing this include through nutrition, water and sanitation, maternal and childcare, family planning and the treatment and control of disease through immunisation programs as outlined in the Alma Ata Declaration. NGOs and INGOs are of central importance to meeting the Nepalese Government's goal to improve health within marginalised populations. Nurses with competence in health education and promotion would be of great value in developing countries such as Nepal, as such skills play a large role in improving the health of disadvantaged individuals and communities.

1.2. Student volunteer placements international

Student Volunteer Placements International (SVPI) organise volunteer experiences with the Children's Welfare Organisation in Nepal (CWON) in the Chitwan region of Nepal. Volunteer programs focus on the health of communities in this region, including health promotion and education of women and children. Emails are sent to students within several leading Australian universities explaining the program. Information sessions are then delivered to prospective volunteers by SVPI explaining the program; students subsequently make enquiries and volunteer of their own volition.

1.3. Volunteering

Health professionals and students perceive volunteer experiences abroad not only as an opportunity for them to expand their career options, but also as an opportunity for them to act as a direct agent for change in communities of the world that need help most (Barbeau, 2003). Lee (2010), a registered nurse from the UK maintains there are many ways that nurses can support international development by participating in projects ranging from responding in humanitarian emergencies to working with planned programs.

Despite the professional development opportunities that lay within volunteering there is a deficiency in information when searching for international experiences of Australian nursing students within the literature. However, the findings from a qualitative exploratory study in which eight undergraduate nursing students undertook a clinical placement in Surin, Thailand suggest that international clinical placements may impact on the personal as well as professional development of participants (Reid-Reid-Searl, Dwyer,

Moxham, Happell, & Sander, 2011). It has also been suggested that international placements of the immersion type are valuable in providing a unique learning experience by enhancing cross-cultural competence (Reid-Searl et al., 2011).

1.4. Cultural competence

Cultural competency has been defined in the literature as the ability to function with a thorough knowledge of the beliefs, traditions and practices of another culture (Levi, 2009). The dramatic increase in 'global migration' has contributed to a need for an international dimension to the health sciences curriculum to prepare students for providing culturally appropriate care to migrants and immigrants (Levi, 2009). The Nursing and Midwifery Board of Australia (2010) in the National Competency Standards for the Registered Nurse state that Registered Nurses should practice 'in a way that acknowledges the dignity, culture, values, beliefs and rights of individuals/groups' and furthermore that nurses should accept 'individuals/groups to whom care is provided regardless of race, culture, religion, age, gender, sexual preference, physical or mental state' (Nursing and Midwifery Board of Australia, 2010; p. 3).

The opportunity to develop cultural, spiritual and physical nursing skills in a third world environment was described as inspiring by a third year nursing student from New Zealand who spent time volunteering in north western Thailand. The student explained the time spent in Thailand taught how to approach difficult situations in a more creative, flexible way and the experience boosted confidence and ability to think on ones feet (Blockey & Moore, 2006).

It would appear from the literature that the experience of delivering health care whilst being immersed in a different culture can provide an opportunity to develop the skills required to interact with culturally diverse populations. According to the Australian Institute of Health and Welfare (AIHW, 2013) in 2011, 27% of the Australian population was born overseas. Given this information, volunteering in a country such as Nepal where there is not only language and cultural differences but also political unrest may have a positive effect on attitudes towards refugees that nurses may deal with whilst delivering health care in Australia.

1.5. Theoretical framework

The research employed an interpretive phenomenological method of research in the style of van Manen, seeking to better understand peoples' lived experiences and individual truths (Patton, 2002). This focus on the in-depth lived experience is characteristic of phenomenology and is best suited for an identity-focused research such as this.

1.6. Ethical considerations

Ethics permission was obtained and granted for this research.

1.7. Research design

The research design was based on the phenomenological paradigm according to van Manen (1990). The design was specifically chosen so as the individual and unique experiences of the participants could be heard without bias from the primary researcher and her own experiences. By adopting this methodology, the emerging meanings of the volunteer student nurses' lived experience relating to their time spent in Nepal was explored in depth. This methodology is additionally appropriate for this topic of investigation as there is minimal research exploring volunteering nurses partially reconstructing their professional identity through volunteering.

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