



Review

Global and public health core competencies for nursing education: A systematic review of essential competencies



Megan Clark^a, Marie Raffray^a, Kristin Hendricks^b, Anita J. Gagnon^{a,c,*}

^a McGill University, Ingram School of Nursing, 3506 University St. Office 207, Montreal, QC H3A 2A7, Canada

^b McGill University, Global Health Programs, McIntyre Medical Bldg., Room 633, 3655 Promenade Sir William Osler, Montreal, QC H3G 1Y6, Canada

^c Research Institute of the McGill University Health Centre, 2155 Guy St., Montreal, QC H3H 2R9, Canada

ARTICLE INFO

Article history:

Received 26 May 2015

Received in revised form 15 February 2016

Accepted 25 February 2016

Keywords:

Competencies
Global health
Nursing
Medicine
Public health
Community health

ABSTRACT

Objectives: Nurses are learning and practicing in an increasingly global world. Both nursing schools and nursing students are seeking guidance as they integrate global health into their learning and teaching. This systematic review is intended to identify the most common global and public health core competencies found in the literature and better inform schools of nursing wishing to include global health content in their curricula.

Design: Systematic review.

Data Sources: An online search of CINAHL and Medline databases, as well as, inclusion of pertinent gray literature was conducted for articles published before 2013.

Review Methods: Relevant literature for global health (GH) and public and community health (PH/CH) competencies was reviewed to determine recommendations of both competencies using a combination of search terms. Studies must have addressed competencies as defined in the literature and must have been pertinent to GH or PH/CH. The databases were systematically searched and after reading the full content of the included studies, key concepts were extracted and synthesized.

Results and Conclusion: Twenty-five studies were identified and resulted in a list of 14 global health core competencies. These competencies are applicable to a variety of health disciplines, but particularly can inform the efforts of nursing schools to integrate global health concepts into their curricula.

© 2016 Elsevier Ltd. All rights reserved.

1. Introduction

Schools of nursing, medicine, and public health are increasingly starting global health concentrations, centers, or entire programs (Merson and Page, 2009). At the same time, students in the health professions are seeking opportunities to study global health concepts that may contribute to more culturally competent care (Wilson et al., 2012). The context, content and conditions in which the next generations of health professionals are being educated are rapidly changing due to an increasingly globalized world (Richardson et al., 2014). In an era of gross health inequalities, both within and between countries, as well as new infectious, environmental, and behavioral risks, a stronger emphasis is being placed on community/public health initiatives with a global health perspective (Frenk et al., 2010). There are also many reports (Bentley and Ellison, 2007; Frenk et al., 2010; Mill et al., 2010) of the benefits of global health training to nurses in particular, including a broadened world view, improved intercultural communication, and assigning increased value to solutions that benefit a more diverse

group of people (Riner, 2011). More recently, increased attention was drawn to the importance of global health education following the Ebola outbreak which started in a small western African village and spread across a number of countries (Dawson et al., 2015). This recent epidemic further emphasized the importance of educating health care professionals to function in a globalized world (Dawson et al., 2015). In response to this emphasis on global health and community/public health, educational institutions must adapt their curricula in order to accommodate these new changes and produce a competent and capable health workforce (Grootjans and Newman, 2012). As the emphasis on global health education for health professions increases, it is important to examine what educational content is recommended. There has been some research into global health competencies for individual disciplines (Wilson et al., 2012; Frenk et al., 2010; Battat et al., 2010; Peluso et al., 2012; Ablah et al., 2014), with recent literature revealing the movement of certain schools of nursing towards adopting a global health approach and attempting to integrate a number of global health competencies (Dawson et al., 2015; Johnson et al., 2015; Ventura et al., 2014). However, little work has been done to look across disciplines for common themes. To date, there exists only one list of comprehensive global health competencies to guide interdisciplinary health curricula (Wilson et al., 2014), and it is not yet endorsed by professional organizations. Our project sought to look across disciplines at recommended

* Corresponding author.

E-mail addresses: megan.clark@mail.mcgill.ca (M. Clark), marie.raffray@mail.mcgill.ca (M. Raffray), kristin.hendricks@mcgill.ca (K. Hendricks), anita.gagnon@mcgill.ca (A.J. Gagnon).

global health/public health (GH/PH) competencies. In comparison, Douglas and colleagues (2014) have presented universal guidelines for culturally-competent care which have been endorsed by three organizations, and are the basis for the new American Academy of Nurses standards on cultural competencies. The aim of the study was to better inform the curricular content and approach to teaching/learning at the McGill Ingram School of Nursing. The secondary aim was to inform faculty in other schools of nursing who have already included or wish to include global health content in their curricula about global health core competencies.

To meet both aims of the present project, an integrative system framework was used (Frenk et al., 2010). Educational institutions determine what kind of health workforce is produced, the qualities and competencies of professionals, but ideally they do this in response to the healthcare needs and demands of the populations they serve.

Within the integrative system framework, three generations of educational reforms have occurred throughout the history of health professional education (Frenk et al., 2010). The first reform focused on science-based curriculum and was followed by the second reform when there was a shift towards a more problem-based learning perspective. We are presently in the midst of the third educational reform, where the focus is now on competency-driven approaches to instruction and movement away from rote recall. Competency-based education (CBE) aims to transform curriculums into instruments of learning, where the achievement of specific competencies is the educational goal (Frenk et al., 2010). Competencies are defined as “the specific knowledge, skills, judgment and personal attributes required to practice safely and ethically in a designated role and setting” (Canadian Nurses Association, 2010, p.17). The objective of CBE is to engage students in transformative learning, which moves away from fact memorization towards critical thinking, and incorporates novel teaching strategies that transcend the traditional classroom setting (Frenk et al., 2010). Through continuously adapting educational strategies and curricula to changing times and acknowledging our increasingly globalized world, educational institutions will be able to generate a health workforce that meets the demands of the population and as such have a positive effect on health outcomes.

The definition of global health is still contentious (Frenk et al., 2010; Fried et al., 2010; Kuhlmann and Iannotti, 2014). With the continued rise of globalization and the accompanying interdependent relationships between nations and across diverse social, cultural, economic and environmental areas, the authors agree with the view that global health refers to the health and well-being of the global population, and as such is linked to public health. In keeping with this view, literature was reviewed for recommendations of both “global health” and “public health” competencies. The results of this systematic literature review of global and public health competencies are reported here.

2. Methods

Relevant articles for this systematic review were identified following published guidelines (Moher et al., 2009). Included articles were published before December 31, 2012 as this was the end of a calendar year. An electronic literature search was conducted using the Cumulative Index to Nursing and Allied Health Literature (CINAHL) and Ovid MEDLINE. A combination of search terms (Table 1) was used to find relevant literature for global health (GH) and public and community

health (PH/CH) competencies. The search was limited to articles published in English and French as both authors completing the review process were fluent in these languages.

The process of article selection is outlined in Fig. 1a and b for GH and PH/CH respectively. Duplicates from the Medline and CINAHL searches were eliminated upon initial screening. Gray literature from pertinent organizations (those referred to within articles during full-text analysis or anecdotally known to us) was also included. Inclusion criteria were that articles 1.) must address competencies as defined in our background section, and 2.) be pertaining to either GH or PH/CH. Articles were excluded if the competencies described were specific to a particular subset of a domain (e.g., emergency physicians), were commentaries on articles already included, discussed competency-based education in general but did not identify specific competencies, reported on processes of program development, or were reports on student experience.

The initial literature review results showed a significantly greater number of articles related to PH/CH compared to GH, 442 and 188 articles respectively. Therefore as regards to the PH/CH section of the literature search, an additional inclusion criteria was added that articles must be focused on all health professions in general or be related to the nursing health profession specifically. Articles that described community or public health competencies specific to other health professions (e.g. medicine) or specific to one target population (e.g. geriatrics) were eliminated. This is in contrast to the GH section of the literature search, where articles specific to other disciplines were retained. This difference in methodology was deemed necessary by the authors, as there exists only minimal published research specific to global health nursing competencies in education. A total of 15 articles within GH were retained, (Wilson et al., 2012; Riner, 2011; Arthur et al., 2011; Battat et al., 2010; Peluso et al., 2012; Akbar et al., 2005; Calhoun et al., 2011; Cole et al., 2011; Houpt et al., 2007; Johnson et al., 2012; Redwood-Campbell et al., 2011; Mill et al., 2010; World Health Professions Alliance, 2007; Association of Schools of Public Health, 2011; Carlton et al., 2007) and a total of 10 articles pertaining to PH/CH were retained (Education Committee of the Association of Community Health Nurse Educators, 2010; Quad Council of Public Health Nursing Organizations, 2011; Calhoun et al., 2008; Cohen and Gregory, 2009; DeBrew and Lutz, 2010; El Ansari, 2004; Hennessey and Suter, 2011; Ladhani et al., 2012; Poulton and McCammon, 2007; Wiseman, 2007).

3. Results

3.1. Articles Characteristics

All articles were published between 2005 and 2012. Although the search included both English and French articles, all of the final retained articles were written in English. For both GH and PH/CH, over 75% of articles were from Canada, the USA, or the UK, with the greatest number of articles from the USA. The remaining articles were reports from: the Netherlands, South Africa, United Arab Emirates, New Zealand, the Caribbean and Latin American countries (Wilson et al., 2012; Wiseman, 2007).

The type of study design reported in the retained articles differed by GH and PH/CH. The majority of the GH articles were qualitative studies (73%), as opposed to only 18% within PH/CH. For PH/CH, the most common article type was literature review (46%). As PH/CH education has existed for many decades, the most relevant and current articles were often literature reviews of all that had come before. For both GH and PH/CH, the majority of the articles were from peer-reviewed journals with only three gray literature articles selected in total.

3.2. Defining Global Health, Public Health, and Community Health

There is as yet no consensus in the literature as to the definition of global health. Of the 15 articles retained for analysis, five articles did

Table 1
Search terms for literature review.

Categories	Search terms used
Global health	International health, global health, world health, competencies, education-competency based
Public health/community health	Public health, community health, community health nursing, competencies, education

Download English Version:

<https://daneshyari.com/en/article/367874>

Download Persian Version:

<https://daneshyari.com/article/367874>

[Daneshyari.com](https://daneshyari.com)