



Perspectives on enhancing international practical training of students in health and social care study programs – A qualitative descriptive case study



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ARTICLE INFO

Article history:

Received 2 October 2015

Received in revised form 15 July 2016

Accepted 21 September 2016

Available online xxxx

Keywords:

Foreign students

Practical placements

Multiculturalism

Qualitative research

Internationalization of higher education

ABSTRACT

Background: Internationalization of practical training in health and social care study programs is an important aspect of higher education. However, field mentors' and classroom teachers' competence in guiding culturally diverse students varies widely in European countries, and the majority does not have enough training in guiding foreign students.

Objectives: This study aimed to examine which factors enhance the efficacy of international practical placement experiences in health and social care study programs.

Design: A qualitative descriptive case study design was used.

Settings: The study was conducted at six higher education institutions—two in Finland and one in Croatia, Estonia, the Netherlands and Slovenia.

Participants: A convenience sample of 14 mentors, 15 teachers and 14 students with international experiences from six higher education institutions which are part of the Bologna Process was recruited.

Methods: The data were collected from six focus groups using a semi-structured questionnaire based on a literature review. Each higher education institution conducted one group interview that was tape-recorded, transcribed and analysed for themes.

Results: Participants made several recommendations for enhancing the practical placement experience of students, teachers, and mentors. Most recommendations dealt with practical supervision of students. Three major themes noted were: 'Attitudes towards internationalization of practical placements', 'Factors impacting the international placement experience', and 'Pedagogical methods used and structural support available for internationalization.'

Conclusions: The study highlights the need for strengthening the multicultural knowledge and skills of mentors and teachers. The findings provide practical guidelines for improving the international placement experience across health and social care fields.

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1. Introduction

European higher education institutions (HEIs) have always engaged in a wide range of international activities with partner institutions from around the world, but have lacked a systematic, long-term plan to

standardize the educational system in Europe. Widely different education and training systems across Europe have made it difficult to transfer skills acquired in one country when applying for a job or a study program in another country. In order to redress this issue, European ministers responsible for higher education initiated the Bologna declaration in 1999 by aiming to create the European Higher Education Area (EHEA) by 2010 (French Bologna Secretariat, 2016). The purpose of the Bologna declaration was to ensure some agreed upon level of standardization and increase compatibility among the disparate educational systems. Since then, internationalization of higher education has become a strategic aim of European governments (Cohen et al., 2014)

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coupled with increased interest among students to study abroad (Kent-Wilkinson et al., 2015).

Situated firmly in this discourse on internationalization of higher education is the idea of culture. In fact, Maringe and Foskett (2012) describe internationalization of higher education as “the integration of an international or intercultural dimension into the tripartite mission of teaching, research and service functions” (p. 1). Interestingly, researchers have cautioned against ‘quick fixes’ such as recruitment of numerous international students or having a strong rhetorical commitment to internationalization. Conversely, they call for a change in the perspective of HEIs embedded in the ideas of multiculturalism (Knight, 2008).

In this paper, the focus is on the internationalization of health and social care fields where the key players in providing adequate international placement experiences to students are the clinical mentors/practical placement supervisors and higher education teachers (European Commission, 2013). Indeed, mentoring is an important element of professional learning in clinical practice (Myall et al., 2008; Al-Hamdan et al., 2014). Mentors are not only instrumental in socializing students into professional behaviours and practice, but can also significantly influence student careers and assist in their professional growth through advising and supporting skill development and personal growth (Edgecombe et al., 2013; Al-Hamdan et al., 2014). Further, a mentor's role calls for greater knowledge and skills when mentoring foreign students. However, there is a wide variation in the capacity of mentors and teachers in training international students in terms of the length and depth of their experience. Given that multiculturalism is an integral part of internationalization of higher education, the present study uses a multicultural framework to: a) examine the current attitudes towards internationalizing practical placements across various health and social service programs among HEIs and their working life partners; b) identify and examine the key factors impacting the placement of foreign students; c) describe the pedagogical methods employed by teachers and mentors in working with foreign students. The study also offers recommendations for enhancing the practical placement experience for students, teachers, and mentors.

2. Background

Student exchange has been endorsed by the Commission of the European Community (2007) and various research studies (Koskinen and Tossavainen, 2004; Chambers et al., 2011, Burgess et al., 2014) as being the most effective way of engendering cultural awareness in students. Bell and Anscombe (2013) argue that cultural competencies are acquired through international collaboration between educational institutions and an exchange of knowledge, teaching/learning experiences and research. Thus, becoming internationalized is about ensuring that HEI staff (teachers, mentors) and students understand diversity and, through this process, enhance their self-awareness and professional development (Rivers, 2010). Teaching methods and the English proficiency of teachers are key contributors to student satisfaction in such teacher-student interaction (van Aart, 2011).

Studies identify the main learning outcomes as being education, improved communication skills, language proficiency, increased intercultural awareness and understanding, and personal growth and maturing. For example, according to Button et al. (2005), international placement programs in clinical settings have four main benefits: learning cultural differences, comparing health care systems and nursing practices, and personal development. Moorhead et al. (2014) found that short-term study abroad programs have a positive impact on educators and social work students through reinforcing their values and beliefs, and gaining new knowledge and skills. Similarly, Bell and Anscombe (2013) found that international study experiences of social work students had significant positive impacts on student learning, group cohesion, professional commitment and motivation, enhanced appreciation of international social work, grassroots community

development work, cultural diversity, human rights and social justice issues. However, other studies (Edgecombe et al., 2013; Dale et al., 2013) noted some concerns of foreign students, namely English proficiency, communication difficulties, cultural differences, and unfamiliarity with the health care environment.

A well-functioning student-mentor relationship in a practical placement focuses on supporting students' learning processes, facilitating professional identity development and strengthening professional abilities. For students, the criteria for high-quality mentorship include social factors such as mentors' commitment and cooperation in the work place (Jokelainen, 2013). The student-mentor relationship is seen as an encouraging collegial relationship, which fosters students' professional development. Pitkälä (2012) found that students' success in the clinical setting depended largely on the mentors' interest in clinical supervision and their attitude towards students from culturally diverse backgrounds. Similarly, undergraduate nursing students mentioned student-friendly atmosphere at the ward as an important factor in facilitating a good clinical study experience (Dale et al., 2013). In contrast, encountering attitudes characterized by surprise, unpreparedness, or even negative reactions meant that students felt unwelcomed, which negatively influenced their learning process. Levett-Jones et al. (2009) found that, across different nations and programs, students' sense of belongingness and learning can be promoted by staff receptiveness, inclusivity, legitimization of student role, recognition and appreciation, and by being challenged while being supported. Skela-Savič and Kiger (2015) found that nursing managers often fail to assume responsibility for the professional development of clinical nurse mentors who tend to lack a career development plan. A common concern reported by clinical nurse mentors engaged in student supervision is the lack of support at different levels, ranging from the nursing school leaders and health provider managers, to colleagues in the clinical setting (Waldock, 2010). Thus, by exploring the teachers', mentors' and students' experiences with international practical placements, we aimed to understand their perspectives on multicultural competences and factors that contribute to enhancing the quality of the international student learning experience.

3. Conceptual Framework

Cultural training for higher education staff and mentors is often absent or minimal, and current curricula and pedagogical methods tend to position international students as in deficit (Avolio, 2010). According to Teichler (2009), internationalization involves a cultural exchange in which cultural differences are valued and emphasized by all stakeholders. Therefore, the conceptual framework used to guide this study combined existing models of (multi)cultural competencies and international placement experiences. According to Campinha-Bacote (1999) a *culturally competent model of care* includes four major elements of cultural competence: cultural awareness, cultural knowledge, cultural skill, and cultural encounters. The *transcultural perspective in social work* (Drabble et al., 2012) includes five interrelated but distinct dimensions of diversity that include: cultural knowledge; cultural competency; dynamics of power, privilege, and oppression; positionality and self-reflexivity; and respectful partnership. Finally, *international competencies* are described by Kosteljik et al. (2006, as cited in van der Woning, 2013) as follows: cultural empathy, open-mindedness, social initiative, flexibility, emotional stability, and self-efficacy. These concepts helped frame data collection in our study where we examined the factors underlying successful internationalization of practical placements in health and social care study programs.

4. Methods

A qualitative descriptive case study method was used to examine the importance of multicultural competencies in providing international practical placements in health and social care in five partner countries.

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