

The First Experience of International Travel: Contributing to Global Nursing

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Providing experiences for international travel is an important aspect of higher education, and creating high-quality international exchanges can be a challenge. Developing appropriate experiences for nursing students may be especially difficult due to the complexity of regulatory and accreditation requirements. However, it is possible to find like-minded educators and provide students with enriching opportunities to compare healthcare and nursing practice. This article describes the development of a successful multi-dimensional nursing research partnership between three universities in California, Karlstad, Sweden, and Gjøvik, Norway. An additional partnership between Karlstad University in Karlstad, Sweden and California State University San Bernardino includes student and faculty exchanges.

Keywords: International travel, nursing education, nursing diagnosis, nursing student research

Starting the International Dialogue

Three faculty members met in the United States at a 2006 international conference. The focus: using patient simulators to teach nurses how to care for patients throughout the lifespan. After informal conversations about mutual interests, the idea of forming a research partnership around the subject of palliative care led to the first visit of the US nursing faculty member to visit Norway. The visit then progressed to visiting Sweden the following year.

Ultimately, a three-year longitudinal research study on nursing students' concerns about dying was initiated, and has since completed data collection. Student exchanges to and from Karlstad University then followed. These exchanges continue on an annual basis.

Faculty Perspective

International partnership. The most important requirement for the success of this partnership was agreement on a focus area. In this case, it was palliative care. Determining a research design that was culturally appropriate and a match to each faculty member's career goals and the Department of Nursing mission ensured the greatest chance of success. Meeting at research conferences, having informal opportunities to become acquainted with each other, and choosing a focus were essential in determining the right fit for all.

In this organic, from-the-ground-up approach to the partnership, all activities were negotiable. The research did not proceed until ethical standards for the three institutions and other issues were understood. An important area to understand is the order of authors for the publications that will result from the research. The sequence of im-

portance of authors' names varies from country to country. Prior to initiating research, it is critical to determine the sequence that best fits all faculty.

Other important aspects of the partnership included a matching of universities with similar size and missions. Because all three universities in this partnership are relatively small, there are no formal agreements between the universities: rather the Departments of Nursing take responsibility for determining the activities of students and faculty.

Each faculty member benefited from utilizing existing university resources, both financially and organizationally, in terms of assisting the faculty to plan, conduct, and evaluate the exchanges. Understanding how international scholarship enhanced the promotion and tenure process also helped to encourage the development of the exchanges.

From research to student exchanges. Once the faculty partnership was in place, deepening the relationship to include student exchanges came next. Six US students visited Karlstad University in 2010. Two Karlstad students visited the US school in 2010, followed by a second visit of US students to Karlstad in 2011.

Student Perspective

Deciding to travel. Upon hearing about the nursing exchange program with Sweden, I was first in line to sign up. I had never participated in any type of international exchange, but knew I would learn in ways that would contribute to my future profession as a nurse.

Preparing to travel. Nursing school is very stressful, and staying current with all that is required is a challenge. Utilizing an organizer was the only way to simultaneously prepare for Sweden and meet my university and family responsibilities. The amount

of preparation seemed daunting at first: obtaining a passport, arranging school schedules, obtaining the money to pay for the trip, coordinating family activities in my absence, and shopping for all things necessary to travel abroad.

I began feeling apprehensive as the time to leave drew near. The thought of being so far from home and family, and in a foreign country, suddenly became overwhelming. These fears were diminished by the support of the faculty who organized preparatory meetings. These meetings included basic information on financial issues, housing, customs, and expectations during the trip.

Arriving in Karlstad. I stepped off the train in Karlstad, Sweden filled with anticipation and excitement and ready for my first experience in international exchange. Once we were immersed in the program and experiencing Swedish healthcare, it became apparent that both our US community and the Karlstad community shared the same concerns about healthcare, the needs of dying patients, and the experiences of nursing students. We all had common concerns and goals. Nurses, no matter what their nationality or ethnic origin, are devoted to delivering the best care they can. We sometimes travel different roads to get there, but in the end, we all have the same destination, which is restored health and function when possible, and peaceful death when it is not.

The experience. Learning about alternatives to our healthcare system is an important part of the national debate. An international exchange fosters critical thinking and helps create an attitude of caring and sharing. In our discussions with Swedish nurses and students, I was able to observe a different healthcare system and explore the advantages and disadvantages of the Swedish system. Critically analyzing different healthcare systems helped to clarify what the best sys-

tem possible might be. Our activities were based around this idea of common caring and sharing in order to enhance our skills in our chosen profession (Smith-Stoner, 2008).

One of the planned activities was a workshop on care planning and nursing diagnosis (taxonomy nurses in the US use these to describe patient care needs), which is an emerging science in Sweden. At one of the care plan workshops, I had an experience that would change my perspective on what it meant to be a nurse.

As I found myself teaching how the American nurse plans care for a patient using nursing diagnosis, I discovered that my view of my role as a nurse was growing. My local viewpoint slowly expanded and I began to have a profound understanding of the importance of global nursing. I came to the realization that I can contribute significantly not only to my own community, but I can have a global impact by sharing my knowledge. By helping Swedish students learn new ways of thinking like a nurse, I had just possibly improved the lives of countless Swedish people. It was the first ripple in the pond.

Research and subsequent return to Karlstad. During the first international exchange, I was strongly motivated by my experiences. Once I returned home, I decided to conduct my own qualitative research study on the techniques that nursing students felt helped them learn to use nursing diagnosis. The study took several months, and was primarily completed over and above my other nursing studies. The following year I returned to Karlstad and presented my research, *The Learning Journey: The Students Perception of Learning Nursing Diagnosis*, to nurses, students, and faculty.

Although I initially saw the trip as a way to become familiar with nursing in another country, the actual outcomes far ex-

ceeded my expectations. I personally contributed to the expansion of nursing science and to the use of nursing diagnosis in Sweden. The greatest gift of the trip was the change in my identity from being a baccalaureate nurse to seeing myself as a future leader in the world of global nursing.

Faculty Perspective

Outcomes: The outcomes of international travel can be difficult to measure. In our case, the outcomes for faculty were integrated into the exchange program. These outcomes included the completion of research with presentations and publications. Since international exchange is part of the university's strategic plan, exchanges are also considered an important part of improvements in teaching and service. In order to be awarded tenure a faculty member must demonstrate ongoing professional development in multiple areas. The two most important at this university are teaching and scholarship. International travel provides a rich opportunity to collaborate in research (Smith-Stoner, Hall-Lord, Hedelin & Petzäll, 2011) and publish original research. Second, teaching is enhanced when students are actively engaged in learning about the world and in our case, health issues.

Student outcomes were also measurable. Since the mission of higher education is to promote student intellectual development, one undergraduate student's passion about doing her own (mentored) research is directly attributed to the first trip. She now desires to continue with her education and obtain a graduate degree. Her activities before, during, and after this exchange led to her selection as the outstanding undergraduate in the Department of Nursing. A new wave of interest in international travel has been infused into our nursing program bringing with it a delightful level of intellectual curiosity by many students.

Recommendations

Organizing teaching responsibility. In order to plan, develop, and conduct an international exchange, many supporters contributed to the success of the program. Our university's international institute (<http://ii.csusb.edu>) is the center of travel planning. Although they do not find the partner institutions for most faculty, they generally provide the expertise and support for travel. Within the nursing department, teaching assignments need to be coordinated many months in advance. Due to the severe shortage of nursing faculty, there is little ability to find a substitute for taking over a class for any length of time. However, for faculty who may want to initiate their first travel experience, remaining connected to students in a distance class is possible. In addition to learning management systems, phone connections can be accomplished using a very low-cost service such as Skype or real-time video streaming using many free tools such as Ustream.

Subsequent visits require planning similar to the first. Each visit requires careful attention to detail with students and faculty willing to provide much of the funding for the trip. Key relationships developed from the first exchanges through Facebook (Maas-Garcia, 2009) to develop relationships between students. Utilizing social networking also helps to communicate with students before, during, and after the trip by creating closed groups in Facebook.

Including the university Media Affairs Office is also important to letting the community know about the commitment to global education. Publicity representatives will help faculty plan for creating the most effective photographs and video recordings while in country. The resources can then be combined with interviews and other media for important presentations to local media. One example is the "Eye on the Desert Show," highlighting the second trip and future trips.

Summary

One international exchange between two small universities relatively new to international exchanges in the nursing departments continue to produce a cascade of impressive outcomes. Igniting the possibilities of being a global nurse by that first visit of the first nursing student to take the chance and go to another country is igniting the enthusiasm of many students. Every international exchange involves a partnership with the partner university and collaboration with campus international experts. There are many regulatory challenges nursing students and faculty must work through in order to meet their educational requirements while away, although there is no doubt about the value of travel in terms of enhanced patient care.

Table 1: Timeline of outcomes from initial 2006 meeting

Year	Event	Activity
2006	Nursing Simulation Conference	Faculty meet for the first time, funded in part by internal grant money
2007	Visit to Norway	Faculty travel to Gjøvik, Norway for presentation on simulation and death and dying
2008	Visit to Karlstad, Sweden	Faculty visit to Karlstad, Sweden to propose idea of international exchange
2009	Research continues	Data collection continues on three-year study
2010	First Exchange with Sweden	Students from <campus name> travel to Karlstad, Sweden
2010	Visit from colleagues	Faculty from Karlstad University visit <campus name>
2010	First students from Karlstad arrive	First two students come for five weeks for community nursing experience
	Undergraduate research study conducted	Student conducts research study within the framework of a research class and mentorship with another faculty
2011	Faculty Scholarly presentation, first year of data analysis	Budapest, Hungary: first International Conference on Palliative Care
2011	Presentation	Phi Beta Delta Annual Conference, Long Beach, student first experience of travel
2011	Second trip to Karlstad	Second student trip to Karlstad University to present student research study to students, faculty, nurses Submitted initial publication from three-year study on nursing student concerns about dying
2011	Expanding to other Nordic countries planned: Visit to Trondheim Norway to discuss expanding Nordic partnership	Invited (faculty) to give presentation on simulation and initiate additional faculty and student exchanges
2011	Publication of first research manuscript	International Journal of Palliative Nursing publishes first article in a series related to the longitudinal study on nursing students concerns about dying. Vol. 17, Iss. 6, 24 Jun 2011, pp 271 - 277

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nursing profession. Learning from each other is the best way to promote good health and well-being to all people.

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Author Bios:

Marilyn Smith-Stoner has traveled to many places in the world. The focus of her international travel is to collaborate and educator with other providers of end of life care and nursing educators.

Evelyn Gonzalez is a newly graduated and licensed registered nurse in California. Her interests are in promoting culturally competent and compassionate care to all people, and promoting international exchange in the