

University of Wollongong
Research Online

Faculty of Science, Medicine and Health -
Papers: Part B

Faculty of Science, Medicine and Health

2020

Mental health nursing education in undergraduate and postgraduate programs: Time for change

Brenda Happell

University of Newcastle, b.happell@cqu.edu.au

Kim Foster

Australian Catholic University

Bronwyn Lawman

Mind Australia Limited

Lorna Moxham

University of Wollongong, lmoxham@uow.edu.au

Mark Powell

St John of God Hospital

See next page for additional authors

Follow this and additional works at: <https://ro.uow.edu.au/smhpapers1>

Publication Details Citation

Happell, B., Foster, K., Lawman, B., Moxham, L., Powell, M., Ryan, T., Trueman, S., & Muir-Cochrane, E. (2020). Mental health nursing education in undergraduate and postgraduate programs: Time for change. Faculty of Science, Medicine and Health - Papers: Part B. Retrieved from <https://ro.uow.edu.au/smhpapers1/1251>

Research Online is the open access institutional repository for the University of Wollongong. For further information contact the UOW Library: research-pubs@uow.edu.au

Mental health nursing education in undergraduate and postgraduate programs: Time for change

Abstract

Unfortunately, despite nurses encountering people diagnosed with mental illness and experiencing significant mental health challenges, increased awareness is not reflected in the mental health component of undergraduate nursing programs. Since the introduction of comprehensive nursing education, mental health nursing has been severely under-represented in undergraduate programs in most Australian universities. The future of mental health service delivery, quality of care, and patient outcomes depends in no small part on these decisions.

Keywords

mental, health, undergraduate, change, time, programs:, nursing, postgraduate, education

Publication Details

Happell, B., Foster, K., Lawman, B., Moxham, L., Powell, M., Ryan, T., Trueman, S. & Muir-Cochrane, E. (2020). Mental health nursing education in undergraduate and postgraduate programs: Time for change. *Australian Nursing and Midwifery Journal*, 26 (9), 42-43.

Authors

Brenda Happell, Kim Foster, Bronwyn Lawman, Lorna Moxham, Mark Powell, Tom Ryan, Scott Trueman, and Eimear Muir-Cochrane

Mental health nursing education in undergraduate and postgraduate programs: Time for change

By Brenda Happell, Kim Foster (Vice President), Bronwyn Lawman, Lorna Moxham, Mark Powell, Tom Ryan, Scott Trueman (Treasurer), Eimear Muir-Cochrane (President).

Board of Directors, Australian College of Mental Health Nurses

Recent media exposure and anti-stigma campaigns have highlighted the common occurrence and impact of mental illness in the community.

Unfortunately, despite nurses encountering people diagnosed with mental illness and experiencing significant mental health challenges, increased awareness is not reflected in the mental health component of undergraduate nursing programs.

Since the introduction of comprehensive nursing education, mental health nursing has been severely under-represented in undergraduate programs in most Australian universities.

Numerous reports and Inquiries have highlighted the problem and recommended an increase.

To provide the best student experience, innovative teaching strategies have been developed and championed by mental health nurse academics, often in collaboration with clinical colleagues. Despite these efforts, little has changed and mental health nursing content remains unacceptably low.

It is not an issue of quantity alone. Increasingly, authors have become aware of mental health nursing taught by nurses without qualifications, expertise and experience in mental health nursing.

The implication that any nurse academic can teach mental health nursing is a fundamental dismissal of the unique skills, knowledge and attitudes underpinning this specialist practice. It also calls into question the quality of education provided. Statistics demonstrating the prevalence of mental health conditions throughout the healthcare system emphasise the necessity of mental health skills for all nursing graduates, regardless of where they practice.

L to R Lorna Moxham, Bronwyn Lawman, Scott Trueman, Tom Ryan, Kim Foster, Eimear Muir-Cochrane, Mark Powell and Brenda Happell



A quality program taught by specialists with qualifications, expertise in, and passion for mental health is necessary to promote positive attitudes among nursing students. The Australian College of Mental Health Nurses developed an evidence based framework for mental health undergraduate nurse education as a guide and benchmark for universities (Australian College of Mental Health Nurses 2018).

The 'overcrowded curriculum' is a common rationale for not increasing mental health nursing content, given not all specialty areas can be covered in three years.

Mental health nursing is essential for practice. All people have mental health and physical health needs. Mental health skills, expertise and positive attitudes are essential for the message of holistic nursing practice to be embraced by nursing students and practiced in the future regardless of the setting they work in.

Negative attitudes graduate nurses often hold towards people with mental illness, and their perceived lack of knowledge and skill in basic mental health practice, should be a signal to Schools of Nursing that something needs to change. The current situation is broken and needs to be fixed.

Unsurprisingly, negative attitudes can deter nursing students from a career in mental health nursing.

The crisis in the mental health workforce will not improve, and likely deteriorate further, unless we attract sufficient numbers of nursing graduates into this field. Undergraduate nursing education needs to ignite interest in mental health and to

present a clear pathway from undergraduate to postgraduate programs for interested graduates.

It is only by having enough students and graduates of postgraduate specialist programs that we can achieve a nursing workforce with the skills, expertise and motivation to provide high quality mental healthcare.

The quality of postgraduate mental health nursing programs also requires urgent attention.

The Australian College of Mental Health Nursing (2016) has developed a clear framework to guide program development. The necessity of specialist qualifications for postgraduate teaching has also been questioned or ignored in some universities. This begs the question: why would we encourage students to complete postgraduate qualifications in mental health nursing if we do not even consider them necessary to teach?

This is unacceptable and these discriminatory attitudes must change.

We urge those responsible for the development and implementation of nursing curriculum to immediately address the inadequate mental health content in undergraduate programs and implement policies and procedures to ensure only nurses with qualifications and expertise in mental health nursing teach at undergraduate and postgraduate levels.

People using mental health services deserve the same quality service provision as those experiencing physical health issues. They also deserve staff who understand and

are able to attend to mental health needs in the context of physical health conditions.

It is time to address a significant health inequity and ensure people using mental health services are integral to determining the content of nursing curriculums. The future of mental health service delivery, quality of care, and patient outcomes depends in no small part on these decisions.

References

Australian College of Mental Health Nurses. 2016. *A National Framework for Postgraduate Mental Health Nursing Education*. Canberra: Australian College of Mental Health Nurses.

Australian College of Mental Health Nurses. 2018. *National Framework for mental health content in pre-registration nursing programs 2018*. Canberra: Australian College of Mental Health Nurses.

Authors

Brenda Happell, Professor of Nursing, University of Newcastle, Board Director, Australian College of Mental Health Nurses. RN, Cert Psych Nurs., BA (Hons) (LaTrobe), DipEd, (LaTrobe), MEd (LaTrobe), PhD., FACMHN

Kim Foster, Professor Mental Health Nursing, ACU & NorthWestern Mental Health, Vice President, Australian College of Mental Health Nurses. RN, MHN, PhD (Griffith), MA (Deakin), BN (UNE), DipAppSc (Syd)

Bronwyn Lawman, Executive Director Operations Mind Australia. Board Director, Australian College of Mental Health Nurses. RN, RPN, GDCMH, MNurs, CertIV Assessment & Training, Dip Bus, Cert IV Business Coaching

Lorna Moxham, Professor of Mental Health Nursing, University of Wollongong, Board Director, Australian College of Mental Health Nurses. RN, MHN, PhD(CQU), MEd(UNSW), BHSc(UWS), DAsc(MIHE), Cert OH&S(CQU), Cert Qual Mngmt (CQU), Cert IV Training & Assessment(CQIT), FACMHN, FACN, MAICD

Mark Powell, Clinical Consultant, St John of God Healthcare. Board Director, Australian College of Mental Health Nurses. RN, Grad Dip Psych Nursing, CMHN, Diploma of Alcohol & other Drugs, Cert IV Training & Assessment, Advanced Diploma of Business Mgt

Tom Ryan, Clinical Nurse Consultant, Queensland Health. Board Director, Australian College of Mental Health Nurses. RN. CMHN, Dip App Sci, Grad Dip Ed, MMH (Psychotherapy) MAICD FACMHN

Scott Trueman, Suicide Prevention Policy Project Officer, Queensland Health. Board Director, Australian College of Mental Health Nurses. RN, MHN, LLB, B.Com(Acc), GDLP, D.MHN, M.MHN, PhD

Eimear Muir-Cochrane, Professor of Nursing (Mental Health) Flinders University, President, Australian College of Mental Health Nurse. BSc (Hons), RN, Grad Dip Adult Ed, MNS, PhD, CMHN, Fellow ACMHN

Nurses can be leaders in dismantling stigma and discrimination toward people with blood borne viruses

By Shelley Kerr and Melinda Hassall

While Australia has been a global leader in clinical care for HIV and viral hepatitis, people living with blood borne viruses HIV and viral hepatitis continue to experience stigma and discrimination when accessing healthcare (Cama et al. 2018).

Many factors influence the lives of people living with a blood borne virus (BBV) including country of birth, culture, ageing, sexuality and injecting drug use. These factors often contribute to marginalisation in broader society, including healthcare settings. Stigmatising attitudes and discriminatory behaviours can adversely affect a person's access to screening, treatment and monitoring for HIV and viral hepatitis (Cama et al. 2018).

Nurses have a professional and ethical responsibility to provide care that is safe and achieves the best outcomes for individuals, families and the community. This tenet goes beyond clinical care and extends to person-centred care that considers a person in the context of their values, culture and social circumstances.

Recognising the enormous potential nurses hold to positively influence the lives of people living with a BBV, the Australasian Society for HIV, Viral Hepatitis and Sexual Health Medicine (ASHM) collaborated with sector and community partners to develop an online learning module for nurses to combat stigma and discrimination in healthcare settings. The module focuses on areas which research suggests contribute to stigma and discrimination. Lack of knowledge associated with transmission risks, the efficacy of standard precautions and intersectional issues such as drug use and culture, influence how a health professional interacts with people living with a BBV (Richmond et al. 2007).

Stigma and discrimination can manifest in a multitude of ways and may be deliberate, such as refusing service, or unintentional and as subtle as taking a step back when a person shares their diagnosis. The module aims to build knowledge and improve attitudes and behaviours.

Built on adult learning principles the module is short, self-directed, relevant to nurses, flexible and interactive. Information is evidence based with opportunities for further reading and access to resources to support professional development. Nurses are invited to reflect on their own attitudes, culture, values and professional practice through reflective and scenario-based activities. Learning is reinforced with lived experience videos which highlight the positive impact of professional and safe care that is free from stigma and discrimination. Initial feedback reflects high levels of satisfaction and relevance, one participant commenting "great online course- I think all nurses should do it. It really makes you reflect on your own practice and attitudes".

Nurses are central to the care of people living with BBV and are well placed to be leaders in dismantling stigma and discrimination in healthcare settings. To do this, nurses will need to challenge their own attitudes and beliefs, those of their nursing peers and the structures they work in.

References

Cama, E. et al., 2018. Stigma indicators monitoring project: summary report, Sydney: Centre for Social Research and Health, UNSW

Richmond, J.A., Dunning, T.L. & Desmond, P.V. 2007. Health professionals attitudes toward caring for people with hepatitis C. *Journal of Viral Hepatitis*, Volume 14, pp. 624-632.

Authors

Shelley Kerr, BAppPH, Senior Project Officer HIV, Australasian Society for HIV, Viral Hepatitis and Sexual Health Medicine (ASHM)

Melinda Hassall, N BNurs, PGCertHlthProm, MPH, Clinical Nurse Lead-Nursing Program, Australasian Society for HIV, Viral Hepatitis and Sexual Health Medicine (ASHM)

