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Conceptualization and operationalization of a baccalaureate nursing curriculum in Pakistan: Challenges; hurdles and lessons learnt

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Abstract

Nursing education is the way forward for nursing in Pakistan. The Higher Education Commission along with the Pakistan Nursing Council developed a four year curriculum for baccalaureate nursing in the country. This paper intends to highlight nurse education along with its development and structure of curriculum in Pakistan. The practical application of this curriculum will be standardization and quality assurance of nursing education across the nation.

Keywords: Nursing; curriculum development; baccalaureate nursing education.

1. Overview of Pakistan

Pakistan has a population of 160 million people with poor access to education and health. According to Pakistan Nursing Council Registrar the nurse patient ratio is 1:40 (Zuberi, 2006) while Pakistan Medical and Dental Association state that there is one nurse for every 15 doctors in Pakistan (Baloch, 2009). The poor public image of nursing along with low status of nursing result in few women joining nursing.

The history of nursing education in Pakistan parallels the country’s independence (Carbonu & Soares, 1997). At the time of independence in 1947, the nursing situation was especially serious and demanded immediate attention (Soares, 2000). There was only one school of nursing in Lahore. In the first decade after Independence 1947-1957, the government took constructive measures to promote the training of nurses and improve nursing services. In 1952 the Pakistan Nursing Council (PNC) was formed and a standard curriculum was developed. Twenty one years later this nursing curriculum first underwent revision and was updated in 1973 by the PNC for introduction and implementation by all nursing schools in the country (PNC Newsline, 1997). Now in 2006 Pakistan Nursing Council (PNC) in collaboration with the Higher Education Commission (HEC) has established for the first time a new national curriculum which is a generic curriculum leading to a BScN degree for the country which is referred to as the HEC/PNC curriculum.
Aga Khan University: trendsetter in nursing education in the country.

Dedicated to respond to the needs of the developing and Muslim worlds, the Aga Khan University (AKU) a private, autonomous academic institution was established. In 1971 the foundation laying ceremony of AKU was performed in Karachi by its Chancellor and sponsor, His Highness Price Karim Aga Khan, the 49th hereditary Imam of Ismaili Muslims. The School of nursing was established on March 16, 1983 with the granting of the charter. It is the firm resolution of the Chancellor of the Aga Khan University that the educational programs and systems would aspire to excellence and respond to the needs of the developing world (Soares, 2000). The school of nursing has been associated with development of nursing in the country (Zara, 2006). In many ways AKUSON is seen as the trend setter for nursing education in the country. AKUSON has been responsible at the country level for assisting the schools of nursing to introduce nursing care plans as well as introduce community health nursing as a subject in the Diploma Program in the country. The latter is in keeping with the direction for the Aga Khan University to take a lead in community development (www.aku.edu/chs). In addition, AKUSON has advocated for introduction of the Sciences and English into the Diploma nursing curriculum and once it was incorporated into the national curriculum AKUSON then was responsible to train the teacher for English and Sciences. Given the scenario, therefore, HEC sought the assistance of AKUSON to plan the national baccalaureate curriculum for nursing.

2. Body

2.1 Operationalization of the curriculum

Introduction of BScN curriculums are not new. There is evidence that education has important impact on the professional’s abilities and the nurses’ development. Watson (2006) describes the role on higher education in providing opportunities for nurses to be equipped with a broader knowledge base, problem solving and critical thinking abilities. A study by Phillips, Palmer, Zimmerman & Mayfield (2002) found that nurses who were RN or Associate degree holders upon completion of a baccalaureate education demonstrated a higher competency in nursing practice, communication, leadership, professional integration and research. Similarly in another study, a 5% decrease in the number of patient deaths and failure was noted with a 10% increase in nurses holding a baccalaureate or higher degree (Aiken, Clarke, Cheung, Silber, 2003).

Thus nurses are empowered through education. Carlisle, Kirk, Luker (1996) in a national study found that over 95% of 600 nurse teacher saw higher education leading to increased expertise, improved resources and increased professional development opportunities. Based on such data nursing education has made the entry level into practice as baccalaureate. With this view in mind the HEC/PNC curriculum was conceptualized. The emphasis is towards community based practice and emphasis on health promotion and maintenance. The HEC/PNC curriculum coincides with the timely Islamabad Declaration on Strengthening Nursing and Midwifery March 4-6, 2007 which takes into consideration “the scaling up nursing and midwifery capacity encompasses a broad range of strategies that address workforce planning, education, skill –mix, maximum utilization of roles and career frameworks, work environments and regulatory frameworks to ensure efficient, effective and safe health care systems” (www.moh.gov.pk).

The conceptualization of the curriculum took up to a year with input from 25 key nursing faculties, administrators and the Registrar of Pakistan Nursing Council on the committee. The biggest strength of this curriculum is that the framework is eclectic (Billings & Halstead). For a new curriculum to get underway it is imperative that there is a paradigm shift which is achieved through the creation of a constructivist paradigm (Caliskan & Tabancali, 2009). Nursing since Independence had a behaviourist paradigm with a heavy reliance on the Tylerian mode and practice limited to the hospitals and acute care settings. The new curriculum called for a constructivist paradigm which has its bearings in a learner centred approach with a mode for self directed learning and a positive movement towards health promotion and maintenance.

The entire curriculum had a total of 138 credits which were spanned over 4 years with two semesters of 18 weeks in each year. For the first time there was consistency in the curriculum delivery across the nation for all schools of nursing offering baccalaureate nursing education. The second strength of the new curriculum is that it responded to the burden of disease of Pakistan as well as global health issues and the diseases of the new era like SARS, dengue fever. Computer literary and e learning was a mandated part of the curriculum which enabled the nurses to become technically competent and not lag behind other professionals.

The first year semester I was laden with Science and Humanities courses. In semester 2 for the first time the students were introduced to Fundamentals of nursing through a skills laboratory. Also there was integration of the
concepts of research and epidemiology to prepare the nurses to conduct and promote evidence based nursing practice.

The weaknesses and the challenges of the implementation of the curriculum are strongly interconnected. The main area needing attention was the preparedness of the faculty. Dias, in an exclusive interview to News, a widely read Pakistani newspaper pointed out the dire need for a human resource development program to meet the shortage of nurse trainers (Baloch 2009). It is therefore a great challenge to prepare the faculty for a new role.

3.0 Conclusion; lessons learnt

A range of factors inhibited the operationalization of the curriculum. This ranged from unpreparedness of the teacher, faculty expertise, resistance from colleagues, access issues to clinical placements and time constraints. A new curriculum goes hand in hand with a supportive learning environment (Caliskan & Tabancali, 2009). A state of the art skills laboratory is needed where students will feel safe in the performance of skills before they enter the clinical sites (Neary, 1997). This is very important because students do not have patient contact in Year I and learning is limited to the skills laboratory. A faculty development model is the answer where faculty receive professional training and development to carry the new curriculum (Caliskan & Tabancali, 2009). Moreover, a monitoring and evaluation mechanism was needed from the HEC/PNC. Ideally a curriculum monitoring and evaluation committee constituted by Pakistan Nursing council at a national level was much needed so that curricular issues as they arose could be sorted out and guidance could be sought to facilitate a smooth implementation of the new curriculum.

Also another area which needed concern was a state-wide exam upon graduation from the four year program is needed. The present system had end of year examinations which were housed at the university itself. A national exam calls for a transparent process for examination and rules out biases and paves the way for certified professionals.

3.1 Way forward

The entire process of this curricular change filled us with excitement and ongoing challenges. In conclusion, the lessons at this school of nursing can be minimized as other schools in the country and in the region embark upon baccalaureate nursing programs. We are now two years into the program and the next two year will yield further observation and results. It is envisioned that educational practices for nursing will be transformed and at the same time be reflective of the emerging health and social needs of the Pakistani people with this newly prepared empowered baccalaureate nurse.

References


Islamabad Declaration on Strengthening Nursing and Midwifery 4-6 March 2007, retrieved: www.moh.gov.pk

Neary, M (1997), Project 2000 students’ survival kit: a return to the practical room(nursing skills laboratory) *Nurse Education Today* 17, p.46-52


PNC Newsline (1997), Islamabad, Pakistan Nursing Council, p. 3


