

CHALLENGES FACING ADVENTIST NURSING EDUCATION IN AFRICA: A CASE OF VALLEY VIEW UNIVERSITY

STELLA APPIAH, PHD, RN, FWACN, FGCNM
(Valley View University, Oyibi, Ghana)

Abstract

Global needs for nurses have called for more health institutions training nurses in different parts of the world. The global shortage is expected to affect the Sub-Saharan Africa more than any other continent due to migration of nurses for better working conditions. Based on this, the Seventh-day Adventist Church has taken it upon itself to establish more nursing schools around the globe. These nursing schools are contributing to the quality education of nurses around the world. The philosophy of the nursing program is in accordance with the basic beliefs of the Seventh-day Adventist church. This article assesses the challenges that are faced by the Adventist nursing training institutions in Africa with Valley View University as a case study. The challenges that were identified are less number of Adventist faculty, inadequate infrastructure and equipment, and inadequate transportation to mention but few. These challenges if well addressed will help improve the nursing programs in Africa.

Key Words: Valley View University, Adventist Nursing Education, Sub-Saharan Africa, Adventist Faculty, Skills Laboratory.

1. Introduction

Nursing has been practiced since the beginning of human history. The legacy of human caring was initiated when according to the Bible midwives Shiphrah and Puah rescued baby Moses (Exodus 2, NKJV). Since then, nurses have been central to the provision of health care and so form the largest workforce (Appiah, 2015). Today, the practice of nursing has changed from the way it was many years ago (Limon, 2008). The problem of producing quality nurses for the global health care industry has become a concern for all. There is continues nursing shortage all over the world coupled with other global health care dilemmas (World Health Organization, 2013). The shortage in part can be attributed to migration of

qualified nurses from their places of training for better service conditions as is the case in Africa (Kingma, 2007). The need for more nurses has therefore led to the establishment of various nursing schools. There is also mismatch between the production of high skilled nurses and the need for them globally (Munir, Ramos and Hudtohan, 2013).

Again, a report by the International Council on Nursing (ICN, 2006) indicated that there is a deficit of nursing workforce of more than 600, 000 in the Sub-Saharan Africa. This shortage was in connection with the needed nurses to improve various nursing interventions in the world. According to the report, this human resource crisis could be solved through training quality nurses. The nursing shortage situation is made worse when the developed countries make it as part of their plan to recruit highly qualified nurses from the Sub-Saharan Africa (Walker, 2010). This therefore called for quality nursing education in the African region to improve upon the human resource problem. Quality nursing education is expected to equip graduates with the skills to function both as health team members and leaders within the health care system worldwide. Therefore, nursing education must play significant and challenging role in ensuring that there is enough production of nursing graduates who can provide quality health care to the populace (Needleman & Hassmiller, 2009).

According to the 2004 National Sample Survey of Registered Nurses (Health Resources and Services Administration, Bureau of Health Professions, 2004), between 2000 and 2004, the number of registered nurses (RNs) in the United States grew by about 200,000 to 2.9 million total. However, demand for nurses is growing faster than supply in almost all past of the world (WHO, 2013). The report went on to indicate that there is expected shortage of health care providers of about 12.9 million by the year 2035 if care is not taken to beef up training. The demand has motivated many institutions both religious and non-religious to establish nursing schools to compliment the number of nursing professionals. Since nursing is an important component of health care in nearly every community-regardless of development, the Seventh-day Adventist Church has made it a mandate to establish nursing schools throughout the world. The church's first school of nursing was established at Battle Creek Sanitarium in 1883 (Greenleaf, 2005). Afterwards, many nursing schools have been established by the church in almost all parts of the world including Africa.

Among the schools in Africa is Valley View University in Ghana offering undergraduate program in nursing. The program was established in 2007 with the purpose of elevating the standard of nursing education and practice in Ghana and the West African region. As a Seventh-day Adventist institution, students are encouraged to uphold Christian principles which will enhance their practice and assist them to become caring and compassionate practitioners. The philosophy of the nursing

program is in accordance with the basic beliefs of the Seventh-day Adventist church and the mission of Valley View University concerning health, education and the holistic nature of man.

The objective of the article is to analyze the challenges facing the Adventist nursing education in Ghana and make recommendations to address them.

2. Understanding the Challenges

There are number of challenges facing the nursing program at Valley View University but in this write up, the researcher would like to focus on few ones that need to be addressed urgently. Among them are the inadequate Adventist Nursing faculty, inadequate physical structure and equipment and transport services for students to the clinical areas.

2.1. Inadequate Adventist Nursing Faculty

In 1988, the general conference of Seventh-day Adventist Church established the Institute for Christian Teaching and started organizing seminars in all administrative fields of the church to advance the course of integrating faith and learning in Adventist schools (Greenleaf, 2005). This was to equip the teachers to present Christ in the classroom (Appiah & Wa-Mbaleka, 2015). The main intention of the Seventh-day Adventist philosophy of education is to redeem and restore the lost (White, 2010) through the development and delivery of quality academic education. This implied that, all teachers in Adventist universities are to integrate faith and learning. Thus, the teachers who are hired for the Adventist universities are to be grounded in Adventism and portray higher understanding of the Adventist philosophy of education. This then becomes the way of life of all faculty teaching in Adventist schools.

The integration of faith and learning promotes the Seventh-day Adventist philosophy of education, which is rooted on a holistic viewpoint of human development (Appiah & Wa-Mbaleka, 2015). The goal of the department of nursing is to prepare competent nurses who are committed to compassionate Christian service. So within the nursing program at the Valley View University, it is hoped that the teacher will organize learning opportunities, provide guidance to students and serves as a role model within the Adventist context. However, this is not the case for the nursing program because majority of the faculty do not belong to the Seventh-day Adventist church and therefore do not understand the educational philosophy of the church. The vision and the mission statements of the

program show clearly that there is the need for well-motivated Adventists nursing faculty to teach in the program

The vision of the Valley View University nursing program is to be one of the best Nursing Schools in Africa and the World, relying on well-structured professional programmes and well-motivated professionals with the view of producing well educated, skillful and confident practitioners, using both nationally and internationally approved approaches and appropriate technology for the provision of high quality of health care. In addition, the mission of the program promotes the education of professional nurses within a Christian environment dedicated to the provision of high quality holistic care to individuals, families, groups and communities; Preparing Christian nurses for service to God and humanity; Emphasizes of the healing ministry of Jesus Christ and the acknowledgement of God as the source of all wisdom and to encourage nurses to form a personal relationship with Him. This vision and mission could be best achieved using faculty members who truly understand the Adventist philosophy of education.

Since its establishment, there have been challenges of getting well qualified Adventist nursing faculty for the program. Despite the fact that efforts are made to engage nursing faculty from the other Christian denominations, it is highly not the ideal since some of these faculty come on board with their different beliefs and perceptions about the Adventist philosophy of education. In some instances, faculty members are found to be demonstrating behaviours that are not approved by the university and may indirectly affect students' behaviour in different ways. During other times, some faculty come inappropriately dressed to the lecture hall encouraging some students to emulate same. Typical situations are during the spiritual week of emphasis where faculty and students are to be present to promote the program. It has been observed that the non-Adventist faculty refuses to attend the program. Even if they do, they would be present for few times which serves as bad example for the students.

A major factor that cannot be over looked is the fact that Adventist faculty who are well qualified to teach in the university are simply not available especially those who are doctoral prepared. In addition, some identified individuals who are Adventist were approached to be hired as faculty but the numeration was not attractive to them. This is because, the government institutions offering nursing programs in the country have competitive salary structure that Valley View university is unable to match. This therefore has affected the university from attracting qualified Adventist faculty from the government institutions where most of them are located.

2.2. Physical Structure and Equipment

Beginning a nursing program is a serious decision because a professionally relevant individual has to be produced (Jones & Bartlet 2014). Physical structure and equipment are very necessary in providing quality nursing education. These include classrooms, libraries, laboratory, nursing skills laboratory with various equipment, and hospitals for clinical attachment. World Health Organization (2010) indicates that physical facilities should be suitable and adequate to enhance learning in nursing schools. Unfortunately, the nursing program at Valley View University is challenged with inadequate classroom facilities. The lecture halls are not adequate for the number of students that are in the program. According to the Commission of Higher Education Memorandum Order number 14 (2009), classroom for regular lecture should be able to contain maximum of 50 students. This is not the case at the university.

With increasing number of enrolment in the nursing program, the classroom facilities that have been existing since the beginning of the program have not been added on. The beautiful building made for the program is now been shared students on campus offering other programs. Some classroom facilities that were been used by the students in the program have been converted to office spaces for use by other programs. More than 50 students are now scheduled for one class at any point in time with even classes clashing at some points. All these are due to inadequate classroom facilities for students in the program.

There is also lack of office spaces for faculty to use for their work. Faculty need offices for several reasons in training quality students. Apart from using the space for preparing to teach, there is the need for the space to admit students during academic advising and counseling. Faculty meet students on corridors or under trees to see to their needs which do not provide privacy. Faculty is also expected to conduct research and publish which demands a well-equipped office space. The lack of the office spaces are not helping faculty to achieve this dream.

In addition, the library facility is also very small for the growing number of students the university has. The number of students since the beginning of the program has increased tremendously from 14 students to over 200 in a year. Meanwhile, there has not been commensurate increment in the library facility. The library capacity was enough for the 14 students who started the program. As the years went by, the enrolment increased to as high as 250 students in one year indicating pressure on library services for the program. The size of the library has prevented most students from getting access to the services. To make matters worse, the small space is

also shared with students from other health related programs on campus. This means, there is competition on the use of the library facility by students. Students have complained of the library been full when they wanted to use the facility for their studies severally.

In the views of Marshall, Morgan, Klem, Thompson and Wells (2014), nurses who utilize library become relevant in their education and nursing care. This shows that the use of library by student is to help them be successful in their future clinical care. Also, making library services available and easily accessible to students in health training institutions is the objective of every university (Adio, Akewukereke, & Ibitoye, 2007). They further added that, providing current information to users in a quick and cost effective manner is the ideal way a library operates. Marshall, Sollenberger, Easterby-Gannett, Morgan, Klem, Cavanaugh, Oliver et al. (2013) found out in a study that library and information resources were perceived as valuable, and the information obtained was seen as having an impact on patient care. Therefore, the availability of library service and information in the training of quality nurses cannot be overemphasised.

The issue of infrastructure inadequacy also includes the demonstration room for the training of clinical skills to students. There is a demonstration room for the program since its inception. Nursing Skills Lab is a simulated hospital environment that has been created to support nursing students with their clinical skill development. It is therefore an important component of the training program. However, the room has not seen face lift and lacks up to date skills equipment such as simulators, and other mannequins that reflect adults, adolescents, children as well as female mannequins who have been designed for teaching purposes. Nursing is and always will be intimately associates with the technical-manual component because acquiring psychomotor skills is a component included in the education program of nursing courses (Felix, Mancussi e Faro & Dias, 2011). The availability of clinical simulation allows students to engage in learning through the use of low, medium and high fidelity mannequins as well as case studies or scenarios and software programs.

The infrastructural inadequacy does not mean that the university is not meeting standards, but there is room for more to be added. This is because the accrediting agencies for the nursing program, both locally and international have also added their voices on the need to beef up infrastructure upon their visits to the university. In their recommendations, they included the need for more infrastructure considering the increasing number of students been admitted into the program. Providing office spaces for faculty, increasing the number of classrooms, expanding library facilities, improving clinical skills laboratory among others were

emphasised even though the program was accredited by all the local accrediting organizations and the Adventist Accrediting Association (AAA).

Clinical facilities that are over populated with students are also another challenge facing the nursing program. Nursing students are supposed to have related learning experiences from the various hospitals that have been selected by the university. Unfortunately, Valley View University does not have a teaching hospital with state of the art equipment and machines for the training of the students admitted into the nursing program. The university relies on government and missionary owned facilities for students' clinical learning experiences. There are so many nursing schools which have sprung up in the country that also use the same hospitals for clinical learning. At any point in time, the hospitals are filled with students for clinical learning. This therefore means that some students may be at the hospital without been attended to by the nurses at the clinical area for clinical teaching. In other instances, some students do not get the opportunity to try their hands on any procedure because of numerous students working at the same time. This means that, the objectives for sending the students for clinical learning will not be achieved.

2.3. Transport Problems

The clinical training sites for the program are far from the university. Therefore students are transported day by day in the morning, afternoon and night for clinical duties. Killam and Carter (2010) also identified challenges with students who go for rural nursing experience and concluded that driving for long hours was a difficult task. In that study, students did not have challenges with transportation but only had to drive for long hours. The university has few buses for taking the students to the clinical area. With the growing number of students in the program, it has become very necessary that more buses be assigned to the students so as to make their scheduled duties easy and comfortable. There have been numerous instances when the students had to wait for longer periods before getting buses for duty. Some students end up arriving late because one bus will have to move around to drop students in different hospitals. In other situations, one bus may have to over load in order to take more students to the clinical attachment.

3. Conclusion

In this paper, it has become clear that, the Seventh-day Adventist church contributes to the human resource needs of nurses globally. In an effort to contribute to the training of nurses to solve the global shortage of nurses, some challenges are uncounted. The challenges facing the Adventist nursing education are lack of Adventist nursing faculty, inadequate physical structure and equipment and inadequate transport services to transport students to clinical areas. These challenges are potential sources of affecting quality Adventist education that is expected.

4. Recommendations

With the identified challenges, it is recommended that the following actions be taken in order to address the issues. By so doing, there will be quality improvement in the program as a whole

1. The Human Resource Department in consultation with the Department of Nursing of The University should put intentional efforts in place to hire Adventist nursing faculty to teach in the program. This can be done by locating Adventist nurses who have had higher education in nursing in all parts of the country or outside the country as missionaries. This will ensure that Adventist values are transferred from teachers to students.
2. The Human Resource Department can implement faculty search program to identify Adventist nurses who are qualified to teach in the program. There can also be sponsorship programs instituted to train potential faculty who are Adventist within or outside Ghana. These individuals are made to sign bonds to return and serve the university at the department of nursing and in the university as a whole in other capacities.
3. The University Administration championed by the Pro Vice Chancellor and the finance officer should put better remuneration plans in place so as to attract Adventist nursing faculty in other universities especially those in the government own institutions with higher rankings. This is because it is speculated that the salary by the university is not attractive enough for some individual Adventist with higher academic ranking to be drawn to the program as faculty.
4. The Department of Works and Advancement should plan and campaign for state of the art facilities such as lecture theatres, library, computer skills, laboratory and faculty offices as well as resource centers. With funds from within and the diaspora, there can be construction by the University for the Programs. This will go a long way to accommodate students, faculty and other significant staff for the program.

5. The Head of Nursing Department should request from the university administration for the demonstration room to be equipped with new mannequins and simulators so that the students can gain the relevant psychomotor skills needed for the profession.
6. The university administration together with the transport office should put both short and long term measures in place to solve the transportation problem facing the program by purchasing bigger and quality vehicles for clinical attachments. In the interim, transportation services on hiring bases can be used so as to ensure that the students get to the clinical areas on time.
7. The Vice Chancellor, Finance Officer and the Department of works and Advancement should solicit for funds to construct the University Teaching Hospital which has been earmarked since the beginning of the nursing program in 2007. Upon completion, the facility will not only solve the clinical placement problem but can also solve the transportation problem encountered by the students since few will be sent out for specific experiences. Nearby training institutions can also access the facility for fees that can also generate funds for the university.

Reference

- Adio, G., Akewukereke, A. M., & Ibitoye, S. O. (2007). *The effect of medical library on medical education: Evidence from Osun State, Nigeria*. Osun State, Nigeria: Library Philosophy and Practice.
- Appiah, S. (2014-2015). Recapturing the medical missionary spirit: An advocacy for Seventh-day Adventist nurses as tools for evangelism in Ghana. *Journal of AIIAS African Theological Association*, 5, 28-38.
- Appiah, J., & Wa-Mbaleka, S. (2015). Integrating faith and learning in distance education in the Ghanaian context. *International Forum*, 18(2): 83-104.
- CHED Memorandum Order Number 14 (2009). *Policies and standards for Bachelor of Science in Nursing Program*. Retrieved on September 14, 2016 from <http://www.ched.gov.ph/wpcontent/uploads/2013/07/CMO-No.14-s2009>
- Felix, C. C. P., Mancussi e Faro, A. C., & Dias, C. R, F (2011). Nursing students' perception about the Nursing Laboratory as a teaching strategy. *Rev Esc Enferm USP*, 45(1), 238-244 www.ee.usp.br/reeusp.
- Greenleaf, F. (2005). Timeline for Seventh-day Adventist education. *Journal of Adventist Education*, 10-15.
- International Council of Nurses (2006). *The global nursing shortage: Priority areas for intervention*. Retrieved from http://www.icn.ch/images/stories/documents/publications/GNRI/The_Global_NursingShortage-Priority_Areas_for_Intervention.pdf.

- Jones, D. W. & Barlet, A. (2012). *The profession of nursing*. Burlington, MA: Jones and Barlett Learning.
- Killam, L. M & Carter, L. M. (2010). Challenges to the student nurse on clinical placement in the rural setting: a review of the literature. *The International Electronic Journal of Rural and Remote Health Research, Education, Practice and Policy*. Retrieved from http://www.rrh.org.au/publishedarticles/article_print_1523.pdf.
- Kingma, M. (2007). Nurses on the move: A global overview. *Health Research and Educational Trust*, 42(3), Part II. DOI: 10.1111/j.1475-6773.2007.00711.
- Limon, C. (2008). *The nursing profession: A historical perspective*. Retrieved from <http://www.selfgrowth.com/> on April 30, 2016.
- Marshall, J., Morgan, J., Klem, M., Thompson, C., Wells, A., (2014). The value of library and information services in nursing and patient care. *OJIN: The Online Journal of Issues in Nursing*, 19, 3. DOI: 10.3912/OJIN.Vol19No03PPT02.
- Marshall, J. G., Sollenberger, J., Easterby-Gannett, S., Morgan, L. K., Klem, M. L., Cavanaugh, S. K., Oliver, K. B., Thompson, C. A., Romanosky, N. & Hunter, S. (2013). The value of library and information services in patient care: results of a multisite study. *Journal of Medical Library Association*, 101(1). DOI: <http://dx.doi.org/10.3163/1536-5050.101.1.007>
- Munir, S., Ramos, C. T. and Hudtohan, E. T. (2013). Benchmarking Nursing Education in Indonesia for Social Development and Global Competitiveness. *Journal of Dental and Medical Sciences*, 10(1), 51-65.
- Needleman, J. & Hassmiller, S. (2009). The role of nurses in improving hospital quality and efficiency: Real-World. *Health Affairs* 28(4). Doi: 10.1377/hlthaff.28.4.w625
- Walker, J. (2010). *The global nursing shortage*. Retrieved from <http://magazine.nursing.jhu.edu/2010/08/the-global-nursing-shortage/>
- World Health Organization (2013). *Global health workforce shortage to reach 12.9 million in coming decades*. Retrieved from <http://www.who.int/mediacentre/news/releases/2013/health-workforce-shortage/en/>.
- White, E. G. (2010). *Education*. Battle Creek, MI: International Tract Society.
- World Health Organization (2010). *Guidelines on quality assurance and accreditation of nursing and midwifery educational institutions*. Regional Office for South-East Asia. Retrieved from http://apps.searo.who.int/PDS_DOCS/B4527?Ua=1

