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International Dimensions of Higher Education in Nursing in Canada: Tapping the Wisdom of the 20th Century While Embracing Possibilities for the 21st Century

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International Dimensions of Higher Education in Nursing in Canada: Tapping the Wisdom of the 20th Century While Embracing Possibilities for the 21st Century*

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Abstract

New focus on the internationalization of universities occurred in the late 20th century and higher education in nursing has been quick to embrace the opportunities. In this manuscript, writers provide a brief overview of the nursing and more general literature from the late 20th century relating to key dimensions of internationalization, as well as present data from a survey conducted in 1995-96 of the international activities and dimensions at Canadian faculties/schools of nursing. While it is clear that nurses in Canadian universities were engaged in significant international endeavours in the 20th century, the literature and our experience suggest that the extent of such activity has increased substantially in recent years. Discussion centres on examination of how knowledge generated in the 20th century can inform current internationalization initiatives and on identification of key questions that merit consideration as we move forward in the 21st century.

KEYWORDS: internationalization, nursing education, international students, curriculum

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Increased ecological awareness, international migration and travel, and telecommunications and mass media, including proliferation of the Internet worldwide, are changing the milieu in which nurses practice, teach, and conduct research. New technologies increase opportunities for international partnerships. New challenges, such as the possibility of global pandemics or widespread social conflict, require international collaboration in addressing threats to the health of individuals and of populations. Sensitivity to cultural, social, and historical diversity gains importance as international mobility increases. These trends, while not new, are increasingly recognized in the mission and vision statements of tertiary educational institutions. Universities and faculties that do not respond to these challenges and opportunities through internationalization of curricula, research, and community service may lose relevance in the 21st century.

Nursing, a health and human science discipline, has the potential to make a significant contribution in the global arena. We are already connected through the International Council of Nurses, Sigma Theta Tau, World Health Collaborating Centres for Nursing, and other international organizations and activities. We need to take global opportunities and responsibilities seriously through thoughtful integration of international dimensions in all facets of our work. More importantly, we need to prepare our students for global citizenship as future health care professionals and perhaps health care leaders in what is becoming an increasingly interconnected world.

While there is a plethora of recent nursing literature relating to nursing and nursing education in a global community, much of this literature focuses on student international experiences and exchanges, international projects, and experiences of international students. There is less emphasis on infusion of international concepts into nursing curricula, although the literature on cultural competence in nursing continues to expand and includes suggestions for international nursing educational experiences. Faculty international consultation, research, development projects, and partnerships receive some attention but little is written about faculty orientation for international work or on how to prepare nursing students for international experiences and supervise them in the field.

The intent of this paper is to tap the wisdom generated from writings about the international dimensions of higher education in the late 20th century. While the nursing literature is explored, much of what is discussed comes from the education, social science, and medical literature spanning the 1960's to the 1990's and reveals an emphasis on international student experiences at universities in Canada, the US, the UK, and Australia. A study of the international dimensions of nursing education in Canada during the 1995-96 academic year provides a

snapshot of what was happening in nursing faculties and schools in Canadian universities as the 20th century drew to a close. Such knowledge will help us build on past insights as we assess current initiatives and needs for research. The historical context can help us improve the present and envision the future.

THEMES WITHIN THE LITERATURE

International student experiences, the contribution of international students to brain drain concerns, academic issues associated with international students, curriculum relevance, and faculty attitudes were the dominant themes addressed in the literature of the 20th century. A brief synopsis of the literature related to students, faculty, and curriculum follows. Literature on exchanges or experiences of students from more economically advantaged countries to less economically advantaged countries is not explored, as articles discussing such experiences are more a feature of the 21st century.

INTERNATIONAL STUDENT EXPERIENCES

The nursing literature on international student experiences (Abu-Saad & Kayser-Jones, 1982a, 1982b; Bronner, 1982; Colling & Liu, 1995; Gay, Edgil, & Stullenbarger, 1993; Julian, Keane, & Davidson, 1999; Kayser-Jones & Abu-Saad, 1982; Kayser-Jones, Abu-Saad, & Akinnaso, 1982; Mooneyhan, McElmurray, Sofranko, & Campos, 1986; Tien, 1982; Upvall, 1990; Wang & Lethbridge, 1995) was congruent with the literature from other disciplines (Bryan & Holdaway, 1987; Coombe Lodge Report, 1977; De Vries & Richer, 1988; Dunnett, 1981; Fenwick & Moss, 1985; Hull, 1978; Ip, 1985; Klineberg & Hull, 1979; Lewins, 1990; Prieto, 1995; Sellitz, Christ, Havel, & Cook, 1963; Senate Task Force, University of Alberta, 1979; Spaulding & Flack, 1976; Von Zur-Muehlen, 1978; Yee, 1980; Zelmer & Johnson, 1998). Loneliness, interpersonal relationships, and financial status emerged as key concerns. Social isolation was attributed to many factors: poor language skills inhibiting all but superficial dialogue; cultural differences, particularly with regard to gender relations and drinking behaviours; lack of finances to join in social events where money was needed; more time needed to study in an unfamiliar learning environment; and lack of interest of students from the host country in developing friendships with international students.

While most of the research on international student experiences was generated through surveys, qualitative data illustrated the angst felt by many of these students. Bronner (1982) became interested in researching the plight of international nursing students after reading a paper in which a student's

achievements in the home country were contrasted with her experiences as a graduate student at an American university:

I remembered orientation day; an exciting day; everything was new to me. I remembered less than 20% of what was said.... I took three courses the first semester. I was absolutely alone, sat in the back of the classrooms and never said anything. No one spoke more than one sentence to me the whole semester.... My grades were C and that was unacceptable to me as I had been a very good student. The second semester I worked harder and became physically and mentally stressed.... Finally the stress caused my thyroid gland to produce too much thyroxin and I developed hyperthyroidism. I finally made two friends. (p. 38)

Research supported that international students were at high risk for illness (Prieto, 1995; Ryan, 1977), with stress posited as a contributing factor (Tien, 1982).

Phenomenological research involving 23 nurses from Taiwan who studied in the US revealed three central processes related to their experiences; becoming *gold-plated*, enormous pressure and sacrifice, and transformed self (Wang & Lethbridge, 1995). The prestige attached to the American degree and the new perspectives on life that were gained balanced the negative experiences to some extent. During the program, however, participants experienced self-doubt, language difficulty, isolation, loneliness, separation, and guilt. Expectations of faculty and other students, as well as barriers to participation in clinical practice, engendered self-doubt and lowered self-esteem. Perceptions of language incompetence affected participation in seminars and enhanced social isolation, although few participants expressed difficulty in mastering course content. Spousal relationships became more distant and isolation was particularly difficult when crises occurred at home. What the researchers found striking was how *invalidated* and *invisible* these women felt.

INTERNATIONAL STUDENTS AND CONCERNS ABOUT BRAIN DRAIN

Faculty members often raised concerns that international students, particularly those from disadvantaged countries, would not go home. A study of international students in Australia, Canada, France and the USA, however, found that 95-98% of sponsored students returned home and, when assured of a suitable position, 75-90% of privately funded students also returned home (Rao, 1979). Exceptions tended to be students with minority status in their country of origin or those from politically unstable countries. Decisions appeared to be based on a realistic appraisal of future prospects. Underemployment, lack of resources for

research or other work using acquired knowledge and skills, and/or a political climate unfavourable to intellectuals influenced decisions to stay in the host country (Das, 1972; Lee, Abd-Ella, & Burks, 1981; Rao, 1979). Most African and Latin American students planned to return home while Asian students preferred to stay in the host country unless there were good positions available in the home country (Das).

Based on a study of 1400 international students in the USA, Das (1972) challenged the concept of *brain drain* and suggested *brain gain* or *brain exchange* as more accurate terms. The thesis that decisions were realistic and based on perceptions of net gain was substantiated by reports of highly skilled professionals returning to the newly industrialized countries of Taiwan and South Korea after many years working overseas as employment opportunities in their home countries increased (Altbach, 1991). As the 20th century drew to a close however there were concerns about political changes in a number of nations that were contributing to increased concern about the ramifications of *brain drain* in many countries (Altbach).

ACADEMIC ISSUES ASSOCIATED WITH INTERNATIONAL STUDENTS

Academic issues reported in the nursing literature (Abu-Saad & Kayser-Jones, 1981; Abu-Saad & Kayser-Jones, 1982a, 1982b; Carroll, 1994; Colling & Liu, 1995; Gay et al., 1993; Glittenberg, 1989; Julian et al., 1999; Mooneyhan et al., 1986; Tien, 1982) were consistent with those reported in the general literature on international students. The focus of most of this research was on graduate students. Language, writing skills, cognitive styles, and standards received the most attention.

Research from the 1960's found that international students tended to overestimate their language abilities initially and were reluctant to admit difficulties (Else & Kinnell, 1990). This led to a reliance on texts and inattention to lectures and discussions. There was concern that nationalist policies in countries such as Ghana, whereby primary education in particular shifted from English to local languages, led to decreasing English competency (Else & Kinnell, 1990). Poor language competency led to poor grades (Womack & Bernstein, 1990), particularly in courses where scholarly papers and class discussion were valued (Zhao, 1993). It also led to social isolation (Zhao) and a tendency to associate mostly with compatriots, a behaviour not conducive to language acquisition (Womack & Bernstein, 1990). Findings from a Canadian study of language acquisition of 17 MBA students from China (Hai, 1987)

suggested that an emphasis on grammar was inappropriate for academic purposes when teaching English as a Second Language (ESL). Receptive skills were developed but productive skills (those needed for writing papers and reports) received little attention. It was recommended that English not be taught as a separate subject but rather as a means to model abstract reasoning and other important cognitive skills.

International students often came from both national and educational contexts vastly different from those in the host country. Cognitive skills needed to cope in the countries of origin often varied widely from those valued in the host institution (Cheng, 1990; Crittenden, 1994; Elsey & Kinnel, 1990; Elton, 1985; Johnson, 1992; Nasri, 1993; Natowitz, 1995; Noronha, 1992; Pugh & Fenelon, 1988). Many students were not used to independent learning and expected faculty to give them the necessary information:

passive understanding of learned problem solutions, using questions for clarification rather than probing, and an absence of lateral thinking were found to be typical of the learning style of many students. Self-motivation and personal development were being inhibited. Overseas students therefore first had to be helped to discover what they were trying to do when learning in Britain. (Elsey & Kinnell, 1990, p. 3)

Plagiarism was a connected issue:

International students may be used to writing papers that simply report what experts have said on a particular subject, and may be unfamiliar with the expectation in American universities that students emulate experts by trying to produce an original piece of research. (Natowitz, 1995, p. 11)

Faculty members at western universities were often less formal and less hierarchical. They expected creativity and encouraged discussion. As Cheng (1990) stated:

Most foreign-born students have to shift from the lecture method of teaching to the freer learning environment, from memorization of facts to problem-solving, from dependence on teachers to self-reliance in finding information which may be alien to them. (p. 265)

Different cognitive and learning styles of international students could be perceived as a challenge for faculty to enhance their teaching skills (Johnson, 1992; Noronha, 1992; Pugh & Fenelon, 1988). These differences were also crucial to understanding problems encountered by international students in their roles as teaching assistants. Their teaching styles, imported from their home educational context, interacted with issues of cultural difference and racism in

creating what often became negative experiences (Crittenden, 1994). It was important, however, to emphasize the diversity among international students. Stereotypes, even of particular countries, were not useful as social class position and other opportunities changed the cultural capital of many students (Johnson, 1992). Not all international students experienced academic difficulties. African students voiced the greatest concerns about their acceptance by faculty and other students (Lee et al., 1981).

There was evidence to suggest that some international students had unrealistic expectations of faculty and educational experiences (Barker, 1990; Reed, Hutton, & Bazalgette, 1978). International graduate students were often junior faculty members in their own countries (The Council of Graduate Schools, 1969) and there was tremendous loss of face when a student was unsuccessful in completing a degree (Else & Kinnell, 1990). Graves (1977) suggested that bridging courses could eliminate *wastage* that occurred when good students were disadvantaged by earlier educational opportunities. Perceptions of international students arriving with lower educational achievement and faculty consequently accepting lower performance standards from them, generally voiced in relation to concerns about declining admission standards, academic achievement, and status accorded the degree, tended to be raised primarily by faculty, students, parents, and politicians not directly involved with international students (Lulat, Altbach, & Kelly, 1986). There was sometimes a misconception that international students were taking university places at the expense of national applicants but experience suggested that such concerns only became valid when recruitment was increased for financial gain. Two studies cited by Lulat et al., found a high correlation between enrolment of international students and research output (Ohio Board of Regents, 1982) and that the majority of international students had academic performance at or above the norm (Rogers, 1984). While questions were raised as to whether differential expectations of the academic performance of international students were warranted, there was strong consensus that double standards for admission were inappropriate (The Council of Graduate Schools, 1969). Two articles from the nursing literature focused on the needs of international nursing students (Hezekiah, 1993; Leone, 1982). Accurate advance information and contact with faculty (maybe through a letter from the academic advisor), time to adjust and to increase language skills prior to beginning courses, and an orientation to the host country health care system were recommended.

CURRICULUM RELEVANCE

Discussion of curriculum relevance had three components in the late 20th century literature. There was a focus on the need for international students to

receive knowledge and technical skill relevant to needs in their countries of origin (Gue, 1977; Johnson, 1992; Keenan, 1992a, 1992b; Keeney, 1987; Lulat et al., 1986; Nasri, 1993). There was also limited recognition that such knowledge and skill should be placed within the context of an awareness of international development theory for students returning to economically less advantaged countries (Toh & Farelly, 1992). In the late 1980's the dialogue began to shift to issues of globalization and the internationalization of universities in more economically advantaged countries. This change in focus led to appreciation of the need to introduce international content into the curricula of all higher education students (Asper, 1989; Henderson, 1989; Highlights of Group Discussions, 1989; Knight, 1994; Mooneyhan et al., 1986; Segall, 1989; Uhl, 1993).

While concerns about curriculum relevance were voiced in the nursing literature (Abu-Saad & Kayser-Jones, 1982a; Abu-Saad, Kayser-Jones, & Tien, 1982; Bronner, 1982; Kayser-Jones et al., 1982; Mooneyhan et al., 1986), little guidance for curriculum planning was offered. A more sophisticated analysis was provided in the medical literature. Recommendations, based on a concern that health care systems in many less economically advantaged countries were still too oriented to western models, suggested that focus be placed on community-based care, epidemiology, management, behavioural science, research, and education. Unless programs were altered to meet such needs, international students should not be accepted (Henderson, 1989). For meaningful curriculum changes to occur:

Programs in community medicine and public health would need to be greatly strengthened; promotion committees would need to give due weight to service in other countries; many institutions would need to reorient their attitudes from the "paternalistic" to the "collaborative"; and special programs would need to be devised to accommodate the needs of those from other countries. Implicit for most institutions is a significant change in institutional mission and structure and a modification of academic structure and function. Clearly, this is not an initiative that all could or should want to undertake. (Henderson, 1989, p. S12)

What Henderson seems to be advocating is congruent with a worldwide trend of the late 20th century and early 21st century towards internationalization of universities, including working in partnership with international colleagues.

Offering special courses or programs for international students was controversial. At an invitational conference on international medical education, 200 participants engaged in dialogue (Highlights of Group Discussions, 1989). Strong support for traditional residency programs was voiced. Special programs for international students carried less prestige and could decrease the potential of

graduates to act as change agents in their home countries. Internationalization of curricula to the benefit of all students was advocated as a more useful direction to pursue. International partnerships, with faculty and students from both partner institutions engaging in international teaching and learning experiences, was suggested as integral to development of technically and substantively appropriate curricula for international medical students and residents. Such exchanges were perceived to have spin-off benefits for raising knowledge and skill levels in source countries of international students as well as enhancing curriculum relevance and cultural sensitivity of faculty in host institutions. Support was given for more attention to population as opposed to individual health needs and to thinking more broadly than medical education because in many countries much care at all levels was provided by nurses and other health workers (Mutalik, 1989). There was recognition that educational needs were often country-specific, a view supported by delegates from Latin America (Pulido, 1989) and Africa (Monekosso, 1989). Similar thoughts emerged earlier in dialogues from other disciplines (Sabourin, Bridges [Canadian University Curricula and Students from the Developing World], & Moore, 1977), including nursing (Segall, 1989; Uhl, 1993). Knight (1994) suggested, in an influential document on internationalization of higher education, that curriculum innovation is the *backbone* of the process.

Only Toh and Farelly (1992) strongly suggested that international development courses were essential if returning graduates were to work effectively in alleviating inequities and poverty in less economically advantaged countries. There was an intimation that the social knowledge and consciences of students needed to be stimulated by engagement in thought about international and national social justice issues and that the political and economic dimensions of development needed to be addressed. The point was made that there were alternate theories of international development and a need for this to be recognized and debated in academic discourse. This position was echoed in the work of Barber, Altbach, and Myers (1984) and Lulat et al. (1986).

FACULTY ATTITUDES

As previously mentioned, international partnerships were mentioned as important for developing faculty with the knowledge and sensitivity needed to create and implement relevant curricula for international students or, perhaps more appropriately, for introducing an international component into higher education for all students. A study of faculty and students at three American universities (Goodwin & Nacht, 1983) revealed that involvement in international work, either as an international student advisor or as a former Peace Corps

volunteer, was predictive of enthusiasm and support for international students. Some faculty members were hostile, using terms such as *inscrutable*, *obsequious*, and *dogmatic* to describe international students. One Dean reported a commencement exercise where the names of seven international graduates were greeted with silence, while an American graduate received enthusiastic applause. An observation was made that foreign-born faculty were not major players in international policy formulation at most campuses.

A subsequent study of faculty at 37 institutions of higher learning revealed internationally sophisticated enclaves, often in the social sciences, humanities, or professional schools, in many universities (Goodwin & Nacht, 1991). Often they revolved around one key figure and were thus vulnerable to demise if that person left. Faculty members were often conservative and ethnocentric, with few of them feeling any need to internationalize or find out about the contexts from which their international students came. Goodwin and Nacht concluded that: "Equality of participation along all dimensions of the scholarly relationship is increasingly demanded, but this is a condition for which many US scholars are unprepared" (p. 114). Recognizing the importance of networking, they recommended that: "Internationalists among the faculty should band together to promote institutional change" (p. 119).

USING INSIGHTS FROM THE LITERATURE IN MOVING FORWARD

The challenges encountered by international students, both personally and academically, are well documented and provide guidance for developing supports. Social contact, financial stability, and attention to language, writing, and learning style needs are key areas for intervention. The phenomenon formerly called *brain drain* may be more appropriately captured by the more recent conceptualization of *brain circulation* (Adepoju, 2004; Ankomah, 2005; Dodani & LaPorte, 2005; Kingma, 2006; Lowell, 2003). Decisions to stay in host countries or return home are usually based on a realistic appraisal of opportunities and, in this age of Internet and increasing transnational networks, have new meanings and possibilities. The notion of curriculum relevance for international students, while important, may be reframed as an issue of curriculum relevance for all students in an era of increasing globalization. Faculty can choose to enhance their international awareness and receptivity or become increasingly marginalized in the worldwide movement towards internationalization in higher education.

INTERNATIONAL DIMENSIONS OF NURSING EDUCATION IN CANADA (1995-96)

Based on the literature, including surveys of dimensions of international aspects of higher education in nursing (Mooneyhan et al., 1986), the writers conducted a survey of university faculties/schools of nursing in Canada to obtain baseline data regarding current international activities and plans. This research and the formation of the first international nursing committee at our university were stimulated initially from concerns about the challenges encountered by our international graduate students and the lack of interest, understanding, and empathy exhibited toward them by some faculty members. Early in the exploration of the literature and discussion of what items to include in the questionnaire, it became obvious that restricting data collection to issues involving international graduate students would provide only a partial picture of what appeared to be happening with regard to international initiatives in our own setting. It would be more useful to look at the bigger picture and situate it within the context of the increased interest in internationalization of Canadian universities in an increasingly interconnected world. Thus the research expanded to incorporate what we perceived at the time to be a comprehensive survey of dimensions of internationalization at university faculties/schools of nursing.

Research questions addressed were: i) what information is available about international nursing students in Canada; ii) what initiatives have been taken at university faculties/schools of nursing in Canada to facilitate the learning and academic experiences of their international students; and, iii) how involved are university faculties/schools of nursing in Canada with international endeavours? Unknown to us at the time, a complementary study, but with different goals, was in progress in the USA, Latin America, and the Caribbean (Wright & Korniewicz, 1997) and a similar study was commissioned for Canada (McBride & Wright, 1998).

After receiving ethical approval, questionnaires in English or French were mailed to the 36 institutional members of the Canadian Association of University Schools of Nursing. Twenty-seven completed questionnaires were returned for a response rate of 73%. Findings were for the 1995-96 academic year and were categorized according to undergraduate data, graduate data, institutional supports, and faculty involvement in international endeavours. All respondents agreed to have data identified by site. This is a rich data set and only a snapshot of the findings is provided.

UNDERGRADUATE PROGRAMS

Eight of 19 respondents with basic baccalaureate programs reported the presence of international students, with numbers ranging from 1 to 8 students per program. Only Trinity Western, a small religion-based school, reported an international student proportion greater than 1% of the total program population. Of the 25 respondents with post-basic baccalaureate programs, only four had any international students with a range of one (three schools) to 10 such students representing 1.33% to 2.67% of the program population. Countries of origin of undergraduate international nursing students were identified as Africa (unspecified country), Bermuda, China, France, Japan, Pakistan, Peru, Philippines, Scotland, UK, and USA. While 22 schools had identical admission criteria for Canadian and international applicants, four schools reported differences that included confirmation of adequate funding, consideration of country of origin, and requirement of a higher academic average. Language requirements were specified at 26 schools. Requirements for nurse registration of post-basic students varied across universities and may have reflected professional regulatory body policies in the different provinces. No funding was specifically targeted for international undergraduate students. Free language courses were available at three universities, free computer courses at three universities, and free writing courses at nine universities. At three universities where such courses were available for a fee, financial support was available for international students. Little information was available regarding whether international student graduates returned home or stayed in Canada.

While 15 respondents reported that all undergraduate students had opportunities for international experiences within their curricula, only 104 of 12,735 students (0.81%) had such experiences in 1995-96. Only 14 international undergraduate exchange students came to Canada as part of their nursing programs. These students were from the Netherlands, Scotland, Sweden, Australia, and Taiwan. With the exception of required trans-cultural nursing courses at two schools, internationally oriented undergraduate courses, reported at seven institutions, were optional. These courses were generally interdisciplinary.

GRADUATE PROGRAMS

Of 15 respondents with graduate programs, only seven had any international graduate students. Twelve of 900 Masters' students (1.33%) and 5 of 76 PhD students (6.6%) were on student visas. Countries of origin were Brazil, Burkina Faso, China, Ghana, Iran, Ivory Coast, Nepal, Pakistan, Taiwan, Tanzania, and USA. To put these data into context, it is important to acknowledge

that PhD programs in nursing were relatively new in Canada at the time of the survey. Students were funded from a variety of sources including private and/or self-funding, government bursaries from the country of origin, WHO (World Health Organization), and CIDA (Canadian International Development Agency). Active recruitment of international nursing graduate students was reported at only two faculties/schools, although six respondents reported that such plans were currently under development. At eight institutions, inquiries from potential international students were met with additional correspondence to that sent to Canadian applicants. Of 22 international graduate students in nursing between 1990 and 1997, 12 collected thesis data in their home country. Only the Université de Montréal had a formal mechanism to track graduates but, of the 22 graduates between 1990 and 1997, 16 were believed to have returned home, four were working in Canada, and two were enrolled in further graduate programs.

Language competency was a concern of all respondents but only seven respondents answered the question related to nurse registration requirements. Eligibility for registration in the home country was a common requirement but full registration in a Canadian province was unusual. This has changed in recent years as advanced practice masters programs were introduced. Three faculties/schools had funding specifically targeted to international graduate students. Teaching assistantships were available at six institutions, rare at one institution, and unavailable at two institutions. Research assistantships were available at three institutions, rare at one institution, and unavailable at four institutions. While writing, language, and computer courses were available at most institutions, only four institutions had such courses available at no cost.

No university faculty/school of nursing in Canada hosted an international exchange graduate student in the year of the study but two graduate students went to Pakistan, one from McMaster University and the other from the University of Alberta. Both of these students were from Pakistan. At least 25 of the 976 Canadian graduate students had international nursing experience prior to enrolment in their graduate program. This information was not available from all responding sites so the exact number is unknown. International health graduate level courses were offered at two faculties/schools of nursing.

INSTITUTIONAL SUPPORTS

Seven questions were designed to determine the extent to which universities and faculties/schools of nursing had policies and services designed to facilitate their international activities. At the institutional level, 18 universities had an international student policy, 16 had an overall international policy, 14 had an

international student centre, and 18 had an international linkage office or centre. Six of 27 questionnaires were returned with no responses to those questions. At the faculty/school of nursing level, only four respondents reported the existence of any international policies but two other respondents indicated that such policies were currently under development.

FACULTY INVOLVEMENT IN INTERNATIONAL ENDEAVOURS

Thirteen respondents indicated that they had at least one faculty member involved in an international research project, with a total of 33 faculty members engaged in such initiatives. The respondents from the remaining 14 institutions reported no current faculty involvement in international research. Ten respondents reported that at least one faculty member had completed an international research project since 1990 (18 faculty members in total) whereas 17 respondents stated that no faculty members had been involved in this type of project. Eleven respondents reported that at least one faculty member was involved in an international development project (31 faculty members involved in total), while 16 reported no faculty involvement in international development projects. Six respondents reported that at least one of their nursing colleagues had completed an international development project since 1990 (13 faculty members in total), while 21 respondents reported that none had been completed. Forty-five nursing faculty members from 12 faculties/schools had previous international nursing experience of a year or more duration and an additional 51 faculty members from six faculties/schools had previous international nursing experience of less than one year.

During the academic year in which data were collected only two respondents reported the presence of long-term visiting nurse scholars on site. The University of Alberta had three from Thailand and the Université de Montréal had one from Brazil and one from Belgium. Two faculty members from the Université de Montréal went to Switzerland and Belgium, two from Dalhousie University went to Scotland, one from the University of Manitoba went to the USA, and one from the University of Ottawa spent time in Australia. Twelve respondents reported official international linkages, with memoranda of understanding, for a total of 27 linkages. Most respondents with official linkages reported a single linkage but the University of New Brunswick had two, McMaster University and the Université de Montréal had five, and the University of Alberta had six. Unofficial linkages were identified at 15 faculties with a total of 47 such linkages. The number of such linkages ranged from one to seven with the exception of the University of Alberta where 20 unofficial linkages were identified. Official linkages reported were in Australia, Belgium, Bermuda, Brazil, Chile, China,

Finland, Ghana, India, Italy, Japan, Lebanon, Netherlands, Pakistan, Russia, Scotland, Spain, Sweden, Switzerland, Thailand, and Wales. Other types of international activity, such as faculty membership on boards of international agencies, were reported by 15 faculties/schools. Official international faculty visits and visitors were also reported, with nine faculties/schools reporting 21 official visitors from the USA and nine respondents reporting a total of 81 faculty members making official visits to American universities. Sixteen respondents reported hosting a total of 156 international visitors from countries other than the USA and 17 respondents reported 61 faculty members visiting international institutions other than those in the USA. When considered in total, the data on international visits and the information collected about international students, exchanges, and projects show that Canadian faculties/schools of nursing had contact with nursing faculties in 81 countries. Contacts existed with 23 countries in Africa, 17 in Asia, 16 in the Americas, 23 in Europe, and with Australia and New Zealand.

COMMENT

It is clear that faculties/schools of nursing in universities in Canada were already involved in substantial international endeavour by the end of the 20th century. It is now 10 years since our research data on the international dimensions of nursing education in Canada were collected. If our faculty of nursing is indicative of what is happening across Canada and beyond our borders, international activity in nursing education is continuing to increase. There are more international partnerships, more international students, more student and faculty international activities and exchanges, and more international research and development projects. Perhaps it is time to replicate the study. Changes in the questionnaire would be needed to reflect current realities. For example, we now host international postdoctoral students at our faculty but in 1995-96 no questionnaire item addressed such a possibility.

DISCUSSION

What guidance can we take from the 20th century as we move forward in the 21st century? The literature and research from the 20th century provide guidance for how we could better welcome and treat international students and faculty, both in our programs and on shorter term exchanges or visits. The challenges faced by such students are well documented. There are suggestions for development of relevant curricula and the point is made that internationalization of curricula is needed not just for international students but for all students. Particularly in immigrant-receiving countries like Canada, the rest of the world is

not 'somewhere out there', but is part of who we are as a society. We are a microcosm of the realities, challenges, and possibilities that exist globally. Our international networks are vast. As borderless environmental health issues and the possibility of pandemics receive prominence on national and international health agendas, we need to prepare nurses able to visualize and embrace their potential as global citizens. It would be interesting to see whether such content, unusual in 1995-96, is now an integral part of nursing curricula.

While not reviewed for this paper, in the early 21st century there is a growing body of literature and research on nursing student and faculty experiences in international settings. Review of such literature would inform the development of appropriate questionnaire items for a new survey. Faculty development needs could be addressed through participation in international initiatives, as well as planned educational experiences and contact with international students. Issues of *brain drain*, *brain gain*, or *brain circulation* take on new meaning in an era of increased migration of health professionals, particularly of nurses, in an escalating worldwide shortage (International Council of Nurses, 1999; 2001; 2006; Kingma, 2006) as new pressures or opportunities may escalate the non-return home of our international students. Could we as faculty members influence international student decisions about returning to their home countries? Would our enthusiasm for, interest in, and support of international health initiatives and of international colleagues make a difference? Could brain circulation be enhanced through inclusion of international graduate students in collaborative development and research endeavours of our faculty members in their countries of origin, regardless of whether they chose to remain in the host country or to return home?

Situating international content in faculty/school of nursing mission and vision statements, in conjunction with rewarding international work through inclusion in faculty evaluation criteria, would provide impetus for international participation by faculty members. To what extent have such notions been integrated into strategic planning and policy documents in nursing education? Asking questions can stimulate thought and could influence action where it has not yet occurred.

What was striking for us in the data from 1995-96 was the wealth of knowledge and experience related to international health and nursing that existed in the faculty members and graduate students at Canadian universities. Canadian university nursing faculties/schools had connections in 81 countries. Canada welcomes immigrants and refugees from all regions of the world, many of whom maintain strong ties in their countries of origin. The Canadian Nurses Association

already has an international program and supports nursing involvement in international work. The Canadian Institutes for Health Research fund international studies. The Canadian International Development Agency, both through the Association of Universities and Colleges of Canada and through other programs, has funded several development projects in nursing. The Canadian Society for International Health and the Canadian Coalition for Global Health Research provide opportunities for multidisciplinary networking and enhance potential for interdisciplinary initiatives. The International Development Research Centre in Ottawa has a long history of support for collaborative research in less economically advantaged countries. There are more opportunities for international endeavours than ever before. Are we as nurse educators and academics prepared to accept the challenges and embrace the possibilities of internationalization of higher education in the 21st century?

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