



Feasibility study on upgrading the bachelor nursing curriculum in Nepal

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ABSTRACT

Introduction Since the beginning of nursing education in Nepal in 1956, the bachelor of nursing curriculum was developed and has been used since then with a few revisions to address new changes. The aim of this paper was to identify the gap in 2-year bachelor nursing curricula of Nepal.

Method This paper employed mixed evaluation methods on various institutions' participants between the periods of April- May 2012. Focused group discussion, self administered questionnaire, document analysis and workshop were used for data collection. There were BN 2nd year nursing students (108), BN Graduates (33), nursing teachers (29) and policy makers (5). There was a total of 175 respondents. The participants were selected by non-probability purposive sampling method. This was followed by a 3 days' workshop conducted to review BN curriculum to decide about some changes in the existing curriculum at National Centre for Health Professions Education (NCHPE). The data was analysed using computer to reveal coding structures.

Findings All most all BN 2nd year students, graduates, teachers and policy makers answered that some more subjects need to be added in the extended BN program. Similarly, a large proportion of the students, graduates, teachers and policy makers and workshop interaction felt that the existing BN curriculum needs to be extended to 3 years from the existing two years.

Conclusion The response from students, graduates, teachers, policy makers' and workshop interactions shows that existing BN curriculum need to be extended to three years from the existing two year to accommodate the gap. It should be standardized by adding new content and subjects and increase practical hours in specialization subject.

Keywords: Feasibility, nurses, nursing education, curriculum evaluation

INTRODUCTION

Some forty years ago there was neither a medical university nor proper medical education in Nepal. Formal training programs started only in 1972 A.D. with the establishment of the institute of medicine (IOM) under Tribhuvan University (TU).¹ The Proficiency Certificate Level (PCL) Nursing was started in 1956 A.D. The first post-basic bachelor nursing (PBBN) degree in midwifery nursing (2 and half year) was initiated in 1976 A.D. (2033 B.S.) and terminated after 2 intakes. The second program in

community health nursing began in 1981 A.D. (2038 B.S.) and was terminated after 4 intakes in 1989 A.D. (2046 B.S.). The third program in adult nursing began with 3 intakes in 1984 A.D. (2041 B.S.), 1985 A.D. (2042 B.S.) and 1987 A.D. (2044 B.S.). The fourth program child health nursing also began with 3 intakes in 1984 A.D. (2041 B.S.), 1985 A.D. (2042 B.S.) and 1986 A.D. (2043 B.S.). In 1988 A.D. (2045 B.S.) the decision was made by the Faculty Board, IOM to have just two tracks: community health nursing and hospital nursing. The curriculum was revised in 1997 A.D. to incorporate some

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essential components. The fifth program psychiatric nursing track began in 2000 A.D. (2057 B.S.) in the existing curriculum. Therefore, three tracks were existing in PBBN curriculum from 2000 A.D. such as; hospital nursing, community nursing and psychiatric nursing.² The present version of this curriculum is the outcome of review that took place in the year 2002.³ It took almost another two decades to move into the masters in nursing.⁴ At present, the bachelor of nursing program referred to is a 2-year academic program based at different Nursing Campuses under the Institute of Medicine in Nepal, and accredited by the Government of

Nepal. The curriculum is designed as a *community oriented and based nursing program* with the philosophy of *primary health care* (PHC) strategies. In PBBN curriculum the leadership role is emphasized in relation to the provision of health care services to individuals, families and communities in hospital and primary care settings.⁵ The program has both theoretical and practical mix that leads to a bachelor of nursing education and it also qualifies bachelor nurses in a variety of roles. The existing nursing curriculum has been successful in providing a foundation on which masters level nursing curricula are built.

Table 1 Program Overview of Post Basic Bachelor of Nursing Science Program (Overview of the Courses)
First Year*

S. N.	First Year Courses	Hours		Marks
		Theory	Cl./Field	
Core courses				
1.	Social Sciences	50	-	50
2.	Common Health Problems through the Life Span	100	-	100
3.	Nursing Concepts and Principles I	90	-	100
4.	Community Health Nursing I	100	-	100
5.	Psychiatric Nursing I	100	-	100
6.	Teaching and Learning	90	-	100
7.	Teaching Practicum	-	240	100
Specialty Courses				
8.1	Hospital Nursing Practicum (Major)	-	300	150
8.a	Community Health Nursing Practicum (Minor)	-	60	25
8.b	Psychiatric Nursing Practicum (Minor)	-	60	25
OR				
8.2	Community Health Nursing I Practicum (Major)		300	150
8.a	Hospital Nursing Practicum (Minor)		60	25
8.b	Psychiatric Nursing Practicum (Minor)		60	25
OR				
8.3	Psychiatric Nursing I Practicum (Major)		300	150
8.a	Hospital Nursing Practicum (Minor)		60	25
8.b	Community Health Nursing Practicum (Minor)		60	25
Total		530	660	850

*(Second Year table continued on page 2)

METHODS

Study Approach

The research approach used for this study is qualitative and quantitative based on the social constructionism theory. According to Somekh, Burman, Delamont, Meyer, Payne and Thorpe (2004) and Babbie (2001), social constructivist approach aims to construct meaning of social context and social reality.^{6,7} Human world is different from natural, physical science, therefore, it must be studied differently as individuals

construct and assign meaning to the world through their interpretation and interactions with it.⁸ Shadish (1995, p.67) reminds us that social constructionism means 'constructing knowledge about reality, not constructing reality itself.' The intent of this approach is to use multiple sources of data in order to investigate the same phenomenon from different perspectives as social reality is contextually embedded, interpersonally forged, and necessarily limited.^{9, 10 & 8}

Second Year*

S. N.	Second Year Courses	Hours		Marks
		Theory	Cl./Field	
Core courses				
1.	Leadership and Management	100	-	100
2.	Health Economics and Nursing	50	-	50
3.	Research Applied to Nursing	90	-	100
4.	Management Practicum		360	150
Specialty Courses				
5.1	Community Health Nursing II	60	-	50
OR				
5.2	Nursing Concepts and Principles II	60	-	50
OR				
5.3	Psychiatric Nursing II	60	-	50
Practicum				
6.1	Research Practicum with Community Health Nursing	-	400	150
OR				
6.2	Research Practicum with Hospital Nursing	-	400	150
OR				
6.3	Research Practicum with Psychiatric Nursing	-	400	150
Total		300	760	600

*(Continued from page 1)

Participants

This study employed mixed evaluation methods: Four focus group discussions were conducted with 33 nursing graduates. Self administered questionnaires were given to BN 2nd year nursing students (108), nursing teachers (29) and policy makers (5). There were total 175 participants. The participants were selected by non-probability purposive sampling¹¹ to achieve theoretical sampling¹² – inclusive and representation of age, sex, gender, year of experience and geography between the periods of April to May 2012. Document and content analysis were applied for additional information.

Information Gathering

The self administered questionnaires to allow any relevant issues to be discussed for 6 2nd year BN

students and the guidelines for focused group discussion used in pilot study for 3 graduate nursing students and 3 nursing teachers at Nursing Campus Pokhara (non-study area) to establish face validity as well as to improve the intrinsic aspects of the questions (Bowling and Ebrahim, 2005, Robson, 2002). Based on the feedback received, the self directed questionnaires and guidelines for Focused grouped discussion (FGD) were revised and finalised for use at 4 study sites- Kathmandu (38), Chitwan (30), Lalitpur (27) & Birgunj (10) campuses of Institute of Medicine. 150 self administered questionnaires were given out but only 108 had been completed. Out of 29 Teachers, 5 were from Lalitpur Nursing Campus and 24 from Nursing Campus Maharajgunj.

1. Demographic information
2. Are the subjects of existing BN programme adequate?
3. Do you think that some more subjects need to be added in the extended 3 BN year programme?
4. Do you think that existing BN programme need to be extended for 3 years program?

Figure 1 Guidelines for focused group discussion and self administered questionnaires



In order to maintain content validity, the respective questionnaire (**Figure 1**) was prepared by reviewing related literature, and researcher's personal experience. A pilot study had been carried out on the 10% of the total sample in the similar setting, to see the reliability of the prepared instruments for the final data collection.

The investigator formally requested and obtained officially written permission to carry out the study from the concerned department and institutes. Verbal consents were taken from all the students, teachers and policy makers. None of the students, teachers and policy makers was forced to participate and ethics was taken into consideration. The investigator briefed about the objectives of the study, followed by half hour duration of time to fill up the questionnaire.

RESULTS

1. Graduates in Bachelor Nursing (GBN)

Four focus group discussions were conducted with 33 nursing graduates. Most of the participants' age was 28- 45 years. All participants were female. Out of 33 participants 25 were married. Job experiences were 5 years to 12 years after BN. Out of 33 participants majority 20 (60.6%) have been working in nursing and medical colleges followed by 12 (36.3%) in hospital and 1 (3.0%) in DPHO.

The BN is not adequate because the curriculum is not specific and there need (needs) to be added Basic Science to improve it. Some subjects of BN 1st year could be divided into 2 subjects, pediatric and adult hood i.e. common health problems throughout life span. BN course can compete with other universities in the country and international level. (GBN: 1-33).

These subjects need to be added in the extended 3 year program such as; Microbiology, Pharmacology, Biochemistry, Anatomy and physiology, Pathophysiology, related Applied and Basic science, Bio-statistics (Increase hours of statistics). Similarly, trends and issues in nursing, ICU, CCU, Oncology (Maximum exposure to the specialized services), adult nursing (exposure in clinical areas), English, Community, Nutrition,

Disease portion and its management, Midwifery, Gynaecology, Computer application and Geriatrics need to be added in the extended 3 year BN program. (GBN: 1-33)

Reason for adding the subject(s) are to do equivalence to other bachelor level courses national and international for job opportunity, to provide quality nursing care in different area, to produce quality human resources in terms of knowledge, skill and attitude. More subjects should be added especially related (to) basic and applied science because it helps to identify the patient's problem and utilize the nursing care plan effectively. Nursing as an art and science needs a strong base of scientific knowledge as after graduation they will be (a) teacher as well as practitioner. Nurses also should have adequate knowledge with rationale to meet the demand of globalization and advanced science technology. (GBN: 1- 31)

All most all participants said that existing BN program needs to be expanded because the academic year is not adequate according to the international level equivalence and not uniform in all universities of Nepal such as; Tribhuvan University (TU), Purbanchal University (PU), Kathmandu University (KU), B.P. Koirala Institute of Health Sciences (BPKIHS). It is high time to expand the course from 2 year to 3 years BN. It is also high time to develop knowledge and skill in specialization subject in detail to gain more knowledge and expertise in clinical area. (GBN:1-33)

Bachelor program must be of 3 years duration because there should be 18 years study for the PhD. Theoretical classes and clinical hours should be increased to bring quality in nursing. Graduate should be internationally valid when it becomes total of 16 years. Similarly inclusion of basic science and other specialization course and topics cannot be accommodated in two years program so there is need for 3 years graduate nursing program. It is very important to meet the demand of globalization, to match between the theory and practice to face many challenges and issues. (GBN: 1-33)

2. Second year BN students

Table 2 Demographic of the BN Second Year Student (n=108)

S.N	Variable	No.	%
Gender			
1.	Male	0	0
2.	Female	108	100
Age			
1.	25-30	15	13.8
2.	31-35	58	53.7
3.	36-45	20	18.5
4.	46-50	10	9.25
5.	50-60	5	4.6
Marital status			
1.	Married	90	83.3
2.	Single	15	13.8
3.	Widow	3	2.7
Year of experience of BN students			
1.	0-3	26	24.07
2.	4-6	38	35.1
3.	7-9	24	22.2
4.	10-12	20	18.5
Development Regions			
1.	Eastern Development Region	25	23.14
2.	Central Development Region	50	46.2
3.	Western Development Region	20	18.5
4.	Mid Western Development Region	10	9.25
5.	Far Western Development Region	3	2.7
Total		108	100

Table 3 Is the subject of existing BN program adequate? (n=108)

S. N.	Response	No.	%
1.	Yes	18	16.6
2.	No	90	83.3
Total		108	100

Table 4 If no, please specify the reason(s). (n=90)

S. N.	Response	No	%
1.	Existing BN program is not adequate because other national bachelor programs are three to four years so BN also need to be equivalent at national and international level.	30	33.3
2.	Added some course like basic science, midwifery, paediatric nursing, adult nursing, critical nursing care i.e. ICU, CCU and oncology etc.	18	20
3.	Some more specialization with increase clinical practice.	15	16.6
4.	Subjects are not specified. E.g. nursing concept is for all of the nursing profession which is basic. However it is not appropriate to hospital nursing, Psychiatric nursing and community nursing,. Topic, objectives and contents should be specific (i.e. medical surgical).	13	14.4
5.	Too much difficult in 1 st year and easy in second year. Not related to more advance knowledge and just repeat as per course. Too many general courses.	12	13.3
6.	Not relevant to the current health and to cover health issues.	2	2.2
Total		90	100

Table 5 Some more subjects need to be added in the extended 3 BN year program? (n=108)

S. N.	Response	No.	%
1.	Yes	108	100
2.	No	0	0
Total		108	100

Table 6 If yes please specify the preferred subject(s) to be included. (n=108)

S. N.	Response	No.	%
1.	Computer	21	19.4
2.	More specialization subject such as; Medical surgical nursing, midwifery, Paediatric, Women health, Nephrology, Cardiac Nursing, Psychiatric nursing, Geriatric nursing, Neuro, Anaesthesia, OT, ICU, ENT, Ortho, Eye, oncology and critical care nursing etc.	35	32.4
3.	Basic Science	30	27.7
4.	Leadership and management	4	3.7
5.	Specify Nursing concept and Adult health nursing	2	1.8
6.	Specify Common health problems throughout the life span subject	10	9.2
7.	More hours should be added for Biostatistics and Epidemiology.	6	5.5
Total		108	100

Table 7 Give reasons for adding the subject(s). (n=108)

S. N.	Response	No.	%
1.	The existing curriculum could be more standardize and could be equal to international curriculum.	35	32.4
2.	The university can produce more competent graduate nurses in the field of nursing which can ultimately contribute to a healthy nation and profession.	21	19.4
3.	The global burden of disease, global issue and new nursing concept are not added included in curriculum currently.	13	12.03
4.	Because of inadequate course lack of knowledge required in basic science, rational, Clinical knowledge, confident, decision making power, and scientific technology behind their nursing care.	12	11.1
5.	More specialization course as well as more advance practice for hospital nursing should be added to create the specific areas of work.	10	9.25
6.	Midwifery is important subject for maternal and child health according emerging problem and millennium goal to be met in our national health study.	10	9.25
7.	Nursing concept and principle for 2 nd year is not sufficient for major subject.	5	4.6
8.	Case discussion with doctors.	2	1.8
Total		108	100

Table 8 Existing BN program needs to be extended for 3 years program? (n=108)

S. N.	Response	No.	%
1.	Yes	108	100
2.	No	0	0
Total		108	100

Table 9 If yes, please specify the reason(s) for BN Program need to be extended. (n=108)

S. N.	Response	No.	%
1.	For further study in case of foreign country three year program is more valid than two year. Bachelor nursing graduate are now not competitive in international market because of shorter duration of course of study and It is necessary for national and international recognition.	60	55.5
2.	To cover all above subjects mentioned, there is need to be expanded for 3 years. These above subjects, content, theory and practical and duration should be added and if current subject are modified the time must be expanded for perfection of course.	48	44.4
Total		108	100

3. Teachers

Out of 29 teachers, 24 (82.7%) teachers from Nursing Campus, Maharajgunj and 5 (17.2%) from Lalitpur Nursing Campus were the participants of the study. Among them, 2 (1.8%) were professor, 14 (48.2%) Associate professor, 11 (37.9%) lectures and 2 (1.8%) Instructors. Duration of the teaching experiences was 3 years to 34 years. The subjects taught by them were: Common health problem through life span was taught by 4 (3.7%), Nursing

concept and principles I& II by 4 (3.7%), Community health nursing I & II by 5 (4.6%), Psychiatric Nursing I & II by 3 (2.7%), Teaching and Learning by 3 (2.7%), Social Sciences by 1 (0.9%), Leadership and management by 4 (3.7%), Health economic and nursing by 3 (2.7%) and Research applied to nursing by 2 (1.8%).

Table 10 Are the subjects of existing BN program adequate? (n=29)

S. N.	Response	No.	%
1.	Yes	0	0
2.	No	29	100
Total		29	100

Table 11 If no, please specify the reason(s): (n=29)

S. N.	Response	No.	%
1.	Curriculum was not specific and not included Basic Science and new health issue subjects and topic. So, add some specialization courses like basic science, computer, English, midwifery, paediatric nursing, adult nursing, critical nursing care etc.	18	62.06
2.	Existing BN program is not adequate because other national bachelor programs are three to four years so BN also should be expanded for national and international equivalence and standardization.	17	15.74
Total		29	100

Table 12 Some more subjects need to be added in the extended 3 BN year program? (n=29)

S. N.	Response	No.	%
1.	Yes	29	100
2.	No	0	0
Total		29	100

Table 13 If yes please specify the preferred subject(s) to be included (n=29)

S. N.	Response	No	%
1.	Add Basic Science, English, Computer as well as more specialization subject such as; Medical surgical nursing, midwifery, Paediatric, Women health, Nephrology, Cardiac Nursing, Psychiatric nursing, Geriatric nursing, Ortho, Eye, oncology and critical care nursing etc should be added.	20	68.9
2.	Specify Nursing concept and Adult health nursing, common health problems throughout the life span	9	8.3
Total		29	100

Table 14 Give reasons for adding the subject(s). (n=29)

S. N.	Response	No.	%
1.	Rationale of additional subjects is to make BN graduate competent, confident, quality patient care, decision making, leadership role and use of scientific technology in nursing professions.	17	15.7
2.	To give the nursing professions equivalence in the national and international as well as to fit for the international market.	8	7.4
3.	To address the global disease burden nationally and internationally as well as to meet the millennium development goal.	4	3.7
Total		29	100

Table 15 Existing BN nursing program needs to be extended for 3 years program. (n=29)

S. N.	Response	No.	%
1.	Yes	29	100
2.	No	0	0
Total		29	100

Table 16 If yes, please specify the reason(s) for BN Program need to be extended. (n=29)

S. N.	Response	No.	%
1.	To maintain and upgrade nursing education and quality education in nursing professions so that can compete in international market as well as to meet international standard, bachelor level education to be complete with minimum 16 years schooling.	20	68.9
2.	To increase specialization in different subjects such as hospital nursing, community nursing, psychiatric nursing and midwifery.	9	8.3
Total		29	100

4. Policy Makers:

Demographic information: There were 5 policy makers. They were from IOM-3 (60%), MOH-2 (40%). Among them 3 (60%) were female and 2 (40%) were male. Similarly 3 (60%) were nursing professions and 2 (40%) were doctors. Almost all participants answered the subjects of existing BN program was inadequate. They answered that basic science, specialization subject needs to be added.

The existing BN program needs to be extended for 3 years because of the need to add new topics, subjects and specialization according to the local and global issues in health. Similarly they added that "If we do not upgrade our nursing curricula and the standards of education, we will not only be discredited in the foreign market soon, but we will also fail to provide quality care to our patients. So, the nursing education needs comes first to maintain scientific based education of the nursing

profession internally and externally (internationally).” (PM 1-5)

A) Document Analysis

During the study Bachelor nursing curricula of Tribhuvan University (TU), Institute of Medicine (IOM), KU, Purbanchal University (PU) of Nepal were analyzed as well as international Bachelor level curricula of India, Bangladesh and developed countries, in the areas of duration of course, subject, content hours and methods of evaluation were analyzed.

B) Workshop

2nd phase Post Basic Bachelor of Nursing curriculum has been planned to be updated with recent trends and developments. Therefore 3 days review of BN curriculum workshop was conducted from 22nd to 24th Ashad 2068 (6-8 July, 2011). Forty

participants from various institutions and organizations had participated such as Ministry of Health (MoH), IOM, Tribhuvan University Teaching Hospital (TUTH), students’ representative, policy makers, campus chiefs, and teachers of different Nursing Campus, NCHPE, Nepal Nursing Association (NNA), and Nepal Nursing Council (NNC). The workshop recommended that BN curriculum should be of 3 years duration with 5 tracks: Child Health Nursing, Adult Nursing, Psychiatric Nursing, Community Health Nursing and Midwifery Nursing. This revised curriculum has emphasized on innovative program with components of integration, student centered, community based and community oriented, based on the problem and the needs of the country. Output of workshop of 3 year BN program is given below:

**Table 17 Bachelor of Nursing Science Program (Overview of the Courses)
First Year**

Course	Course Title	Total Hours	Total Marks
BN 01	Integrated Basic Health Sciences I (Th)	150	100
BN 02	Integrated Basic Health Sciences II (Th)	150	100
BN 03	Basic Health Sciences (Pr)	100	100
BN 04	Nursing Concepts and Principles (Th)	100	100
BN 05	Adult Health Nursing I (Th)	60	50
BN 06	Adult Health Nursing I (Pr)	180	50
BN 07	Child Health Nursing I (Th)	60	50
BN 08	Child Health Nursing I (Pr)	150	50
BN 09	Geriatric Nursing (Th)	60	50
BN 10	Geriatric Nursing (Pr)	150	50
BN 11	Comprehensive English	50	-
BN 12	Computer Application	50	-
Total (Th. = 680 hrs. & Pr. = 580 hrs.)		1250	700

Second Year

Course	Course Title	Total Hours	Total Marks
BN 13	Social Sciences Applied to Nursing (Th)	50	50
BN 14	Community Health Nursing I (Th)	60	50
BN 15	Community Health Nursing I (Pr)	180	50
BN 16	Midwifery I (Th)	60	50
BN 17	Midwifery I (Pr)	180	50
BN 18	Psychiatric Nursing I (Th)	60	50
BN 19	Psychiatric Nursing I (Pr)	150	50
BN 20	Teaching and Learning (Th)	100	100
BN 21	Teaching and Learning (Pr)	360	100
BN 22	Health Economics and Nursing (Th)	50	100
			50
Total (Th. = 380 hrs. & Pr. = 870 hrs.)		1250	600

Third Year

Course	Course Title	Total Hours	Total Marks
BN 23	Leadership and Management (Th)	100	100
BN 24	Management (Pr)	360	100
BN 25	Research Applied to Nursing (Th)	100	100
BN 26	Research (Pr)	288	100
	Major Subjects		
	Adult Health Nursing II (Th)		
	Child Health Nursing II (Th)		
BN 27	Community Health Nursing II (Th)	60	50
	Psychiatric Nursing II (Th)		
	Midwifery Nursing II (Th)		
	Major Subjects		
	Adult Health Nursing II (Pr)		
	Child Health Nursing II (Pr)		
BN 28	Community Health Nursing II (Pr)	360	100
	Psychiatric Nursing II (Pr)		
	Midwifery Nursing II (Pr)		
Total (Th. = 260 hrs. & Pr. = 1008 hrs.)		1268	550

DISCUSSION

The study results indicate that most of the respondents and participants are interested in adding new subjects and extend to 3 years from existing two years BN curriculum. Shahi, (2012) also support the view of the students that computer subject should be added in the curriculum.¹³ In the changing context of nursing education in Nepal, Jolley (1987) considered that social change has led to the development of curricula, including social sciences, in medical education and new roles for nurses in health care practices.¹⁴ Hegge (1995) further claimed that the required restructure in nursing education has to be compatible with the innovative mechanisms in academia, for example evidence and competency-based learning.¹⁵ Based on educational philosophy, it can be argued that the new trends in nursing education need to be incorporated.¹⁶ Booth (1995) and Hegge (1995) call for curriculum evaluation in terms of its overall 'content' and 'processes'.^{17,15} Similarly, according to Ministry of Health and Population, 2011, localization of MDGs has to be internalized and well addressed in plans, policies, programs, monitoring and evaluation with a capacity development of concerned stakeholder.¹⁸ It is, therefore, well recognised that there has been a need for introducing more changes to curricula.^{19, 20}

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LIMITATIONS

This study drew respondents, relatively small sample size, from four selected nursing institutions of Nepal. This attempt is rather focused to build on to complement the existing body of knowledge looking from graduate, students, teachers and policy maker perspective, purposive sample-under representation hereby difficult to generalisation. Another practical difficulty we noticed was of maintaining high quality in qualitative data analysis - transcribing, translation, transliteration of questionnaire and it was both 'time-consuming' and often 'daunting' experience.

CONCLUSION

The response of students, graduates, teachers, policy makers' and workshop interaction shows that existing BN curriculum need to be extended to three years from the existing two year to accommodate the gap. It should be standardized by adding new content and subjects and increase practical hours in specialization subject.

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